



**Testimony of Angela Westhoff, President & CEO
Maine Health Care Association**

Testimony before the Committee on Health and Human Services Neither for nor Against
LD 1157, An Act to Amend the Laws Relating to the State's Background Check Center

Public Hearing: Tuesday, April 1, 2025

Senator Ingwersen and Representative Meyer as well as Distinguished Members of the Health and Human Services Committee:

My name is Angela Westhoff, and I serve as the President & CEO of the Maine Health Care Association. We represent approximately 200 nursing homes, assisted living centers, and residential care facilities across the state. Our mission is to empower members to ensure the integrity, quality, and sustainability of long term care in Maine.

I am testifying neither for nor against ***LD 1157, An Act to Amend the Laws Relating to the State's Background Check Center***.

We understand that much of LD 1157 is currently an administrative update to the background check center laws. However, given the significance of the fingerprinting policy altogether, MHCA wants its reservations noted before the legislature. While we value the presumed intent to protect vulnerable populations by expanding the background check process, we want to ensure that any changes made to the current system do not inadvertently make it more challenging to hire and retain qualified staff during a workforce shortage. We are concerned that the expansion of mandatory, intensive fingerprint-based checks for facility staff will place a significant administrative and logistical burden on already stretched long term care providers.

The current name-based system works well. It is user-friendly, produces results in minutes, and includes valuable tools like "rap-back" notifications and automated annual rechecks. These features give providers timely, actionable information while minimizing administrative burden. If there are documented problems with

this current system, we would be interested in learning more from the Department before supporting more onerous requirements.

Fingerprinting, particularly when done without employers and employees in mind, introduces several potential barriers. It would delay hiring, particularly in rural areas where fingerprinting sites are limited and appointments may take weeks to schedule. Asking job applicants, some of whom lack reliable transportation or have privacy concerns, to visit police or other stations for biometric scans could deter individuals from entering or staying in the field. That's a risk we can't afford during a staffing crisis.

Additionally, our members are concerned about cost. At \$56, the current background check is already a significant investment. If fingerprinting directly or indirectly adds to this cost, we strongly urge the Committee to consider mechanisms for reimbursement. This is especially important for facilities operating on thin margins and do not need another unfunded mandate.

Should this move forward, we encourage the Committee and DHHS to consider steps that:

- Preserve the current name-based system while expanding its capabilities to include national-level searches, similar to the name-based federal checks used for firearm purchases in Maine. This would enhance safety and include federal data without disrupting a system that already works well for providers.
- Consider alternative fingerprinting pathways that achieve similar goals, such as limiting fingerprint-based checks to when a worker seeks licensure or certification, rather than placing the burden on the hiring process.
- If fingerprinting is required for facility hires, ensure the process is practical and workforce-friendly by:
 - Covering associated costs through MaineCare
 - Allowing for low-tech options such as ink-and-paper fingerprint cards
 - Establishing a grace period for completion of checks
 - Permitting provisional employment while results are pending
- Avoid unintended delays in hiring. Especially in rural areas, limited access to fingerprinting locations could result in weeks-long delays that directly impact staffing levels and resident care.

Thank you for your time and consideration. I would be happy to answer any questions.