

MAINE'S LEADING VOICE FOR HEALTHCARE

TESTIMONY OF THE MAINE HOSPITAL ASSOCIATION

In Support Of

LD 1311

An Act to Expand Maine's Health Care Workforce by Improving Educational Opportunities

April 4, 2025

Senator Ingwersen, Representative Meyer and members of the Health & Human Services Committee, my name is Sally Weiss, and I am here on behalf of the Maine Hospital Association. MHA represents Maine's 33 private acute care, psychiatric, and rehabilitation hospitals.

I am here today to express our support for LD 1311.

While we do not wish to sound alarmist, we believe it is critical to address the current healthcare workforce shortage. The next five to ten years will present some of the most significant challenges in our healthcare system, and we are deeply concerned.

Today, hospitals are seeking thousands of healthcare professionals to fill critical roles and provide care to their communities. However, hospitals are not alone in this search. Long-term care facilities, home health services, residential care, and other healthcare providers are also struggling to recruit necessary staff. Patient outcomes are compromised daily because hospitals cannot transfer patients to the appropriate level of care or place them in skilled nursing, home health, or another hospital due to a lack of healthcare workers.

Additionally, our healthcare workforce is among the oldest in the nation, with many practitioners nearing or even surpassing retirement age. According to MHA's workforce survey conducted in February 2025, Maine hospitals reported 5,592 employees aged 55 and older across 34 healthcare occupations, including providers, therapists, nurses, allied health professionals, and support personnel. Furthermore, with 39.3% of Maine's physicians aged 60 or older, Maine ranks first in the nation for the percentage of active physicians in this age group. Conversely, Maine ranks 50th in the nation for the proportion of physicians aged 39 or younger, at just 11.8%.

Compounding this issue, Maine's population is aging rapidly, with projections showing that 36.2% of Mainers will be 65 or older by 2030—nearly 400,000 people—significantly increasing demand for healthcare services. This increase could lead to utilization rates two to three times higher than current levels.

Maine's hospitals have been investing heavily in the training, recruitment, and retention of healthcare workers. Hospitals spent nearly \$17 million¹ on workforce development efforts in 2024 and invested close to half a billion dollars in salary increases for staff (excluding physicians)² between 2023 and 2025. However, we cannot solve this crisis alone—we need additional support.

LD 1311 provides that support.

This bill accomplishes three critical goals that strengthen Maine's healthcare workforce development efforts:

- 1. Expanding Clinical Training Placements: One of the key barriers to expanding clinical programs in Maine is the shortage of available clinical placements and internships for students. This bill provides funding to expand clinical training by supporting hosting sites with funds for housing, preceptor/supervisor training, and stipends to offset productivity losses from having learners in clinical practices. By increasing clinical placements, we can enhance the throughput of training programs and improve the likelihood that students will choose to practice in rural or underserved communities. This work is already underway through the Building ME Network (https://clinicalrotationsinmaine.org/), and this funding will allow it to continue and expand.
- 2. Supporting the MERGE Collaborative: Multiple studies have shown a correlation between the location of medical school education and where physicians ultimately practice. In particular, rural education increases the likelihood of physicians practicing in rural communities. This bill supports the MERGE Collaborative (https://mergecollaborative.org/), which enhances the physician pipeline by expanding graduate medical education residency rotations, with a focus on rural settings and practice.
- 3. Creating a New Grant Fund for Innovative Training Models: This bill establishes a new grant fund dedicated to developing innovative training programs to address workforce needs that current programs do not meet. For example, educators and hospitals have identified the lack of synchronous virtual learning for specialized clinical programs as a barrier. Funds could be used to create virtual classrooms that connect students with training programs offered in locations such as Portland, even if they are physically located in places like Presque Isle.

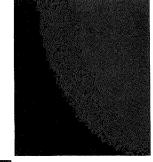
A key feature of this bill is that it provides flexible funding for any healthcare role or training program, supporting the entire continuum of care. While hospitals urgently need healthcare

¹ 26 hospitals reporting

² 27 hospitals reporting

professionals and providers, we also need every part of the healthcare system to be strong and sustainable. That is why we strongly support LD 1311.					
Thank you and I'm happy to answer any questions you may have.					
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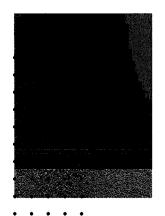




MAINE'S HOSPITAL WORKFORCE: CURRENT & FUTURE NEEDS

MARCH 2025

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Photo by Vidal Balielo Jr.: (<u>www.pexels.com</u>)

INTRODUCTION

In February 2025, the Maine Hospital Association (MHA) conducted a survey of its members to assess current workforce needs and project future requirements based on the age distribution of the existing workforce. Of the 33 members surveyed, 27 responded, yielding an 82% response rate. The survey gathered data on the number of full-time and part-time budgeted positions currently being recruited, as well as the number of employees aged 55 or older by healthcare occupation. Additionally, hospitals were asked about their investments in salary increases, traveler expenses, and workforce development initiatives.

Maine hospitals are actively recruiting for 4,227 budgeted positions, which include 3,090 full-time and 1,137 part-time roles. Beyond filling open positions, hospitals have significantly invested in retaining their current workforce, reporting \$472,912,614 in salary increases between 2023 and 2025—nearly half a billion dollars—representing a 14% increase that outpaces inflation. Furthermore, hospitals have invested an additional \$151,723,080 in physician fees and salaries during the same period, reflecting a 22% increase. It is important to recognize that these salary increases do not account for other rising costs, such as benefits. Furthermore, unlike other industries, healthcare providers including hospitals-cannot raise prices to offset these expenses. In fact, while hospitals are making these investments, they continue to experience a decline in reimbursements from payers.

Encouragingly, compared to previous years, the demand for contracted labor (or "travelers") has decreased, with total expenditures falling by 29% between 2023 and 2025. This suggests a stronger workforce and greater success in recruitment and pipeline development. Hospitals are also focused on strengthening their workforce pipelines by "growing their own" through workforce development initiatives. On average, hospitals reported investing \$426.29 per employee in workforce development efforts, totaling \$16,751,732 across 26 reporting hospitals in the past year. These efforts include partnerships with academic institutions, funding earn-while-you-learn programs, offering classroombased education for clinical programs, hosting clinical rotations, providing tuition reimbursement and remission for clinical training, offering clinical faculty to academic programs, and providing clinical certification and leadership education courses.

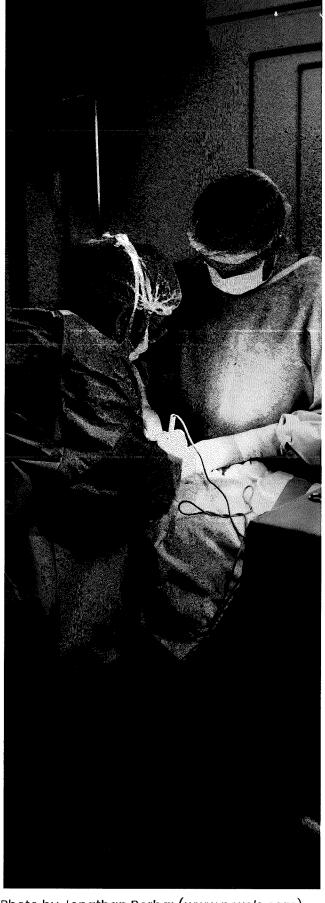


Photo by Jonathan Borba: (<u>www.pexels.com</u>)

Despite these substantial investments and early signs of progress, hospitals face significant challenges due to a limited recruitment pool and an increasing number of employees aged 55 or older. The aging workforce in Maine's hospitals mirrors the broader healthcare sector and the state as a whole. According to the Office of the State Economist's June 2023 report, Maine's prime working-age population (ages 20-64) is projected to decline by 5.3% from 2020 to 2030, as the Baby Boomer generation continues to age out of the cohort. By 2030, the youngest Baby Boomers will be 66 years old. The concern is compounded by the expected 2% decline in Maine's younger working-age population over the same period, leaving fewer individuals to fill critical healthcare positions as the Baby Boomer generation retires.[1]

[1] Maine Department of Administrative and Financial Services, Office of State Economist, "Maine Population Outlook 2020-2030," June 2023. Maine Population Outlook 2020-2030

Reflecting on Maine's population change between 2020 and 2030, it becomes increasingly evident why hospitals, communities, and the state must prioritize workforce development. This includes expanding the healthcare talent pipeline, enhancing and creating new training programs, and reducing barriers to entering the healthcare field. As the population ages, the demand for healthcare services naturally rises. Data shows that individuals aged 65 and older utilize healthcare services two to three times more than younger populations. With a projected 36.2% increase in Mainers aged 65 or older—nearly 400,000 individuals—Maine must urgently act to ensure adequate care for its aging population.

Maine Statewide Population by Age					
	2020 (historical)	2025	2030		
Age 0-19 years	286,218	264,935	258,901		
Age 20-39 years	320,309	325,242	313,804		
Age 40-64 years	466,899	444,771	431,560		
Age 65+ years	288,854	339,780	393,399		

Percent Change in Population						
	2020-2025	2025-2030	2020-2030			
Age 0-19 years	-7.4%	-2.3%	-9.5%			
Age 20-39 years	1.5%	-3.5%	-2.0%			
Age 40-64 years	-4.7%	-3.0%	-7.6%			
Age 65+ years	17.6%	15.8%	36.2%			

[1] Maine Department of Administrative and Financial Services, Office of State

Economist, "Maine Population Outlook 2020-2030," June 2023. Maine

Population Outlook 2020-2030

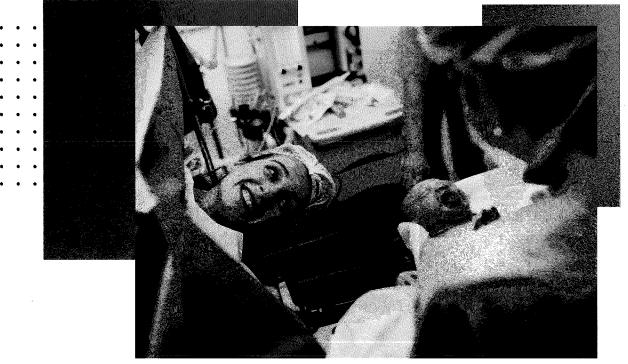


Photo by Jonathan Borba: (www.pexels.com)

KEY STATISTICS

- 4227 full-time (3,090) & part-time (1,137) budgeted positions actively being recruited
- \$472,912,614 is the total increase in salaries between FY 23 and FY 25. Close to a half a billion dollars, which accounts for a 14% increase overall and a 4.6% increase when adjusted for inflation.
- \$151,723,080 is the total increase in physician fees and salaries between FY23 and FY25, which represents a 22% increase.
- -29% decrease in contracted labor between FY 23 and FY 25
- \$426.29 is the average amount spent per FTE on workforce development efforts, with a total of \$16,751,732 spent per year on workforce development efforts (26 hospitals reporting).

NURSING WORKFORCE

In November 2024, The Nursing Workforce in Maine: Trends & Forecasts 2020/2021 to 2022/2024 highlighted that due to Maine's aging population, the demand for nurses is expected to rise, with a projected shortage of 2,817 nurses by 2030. The report also noted that this shortage would have been significantly greater had the state not invested in recruitment, education, and training—efforts that added 2,198 licensed nurses between 2021 and 2024.

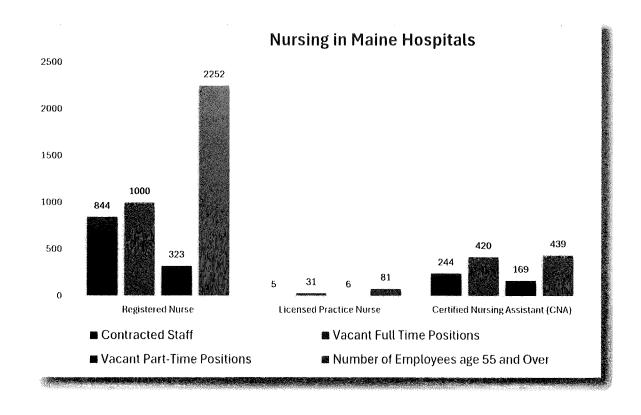
Currently, Maine hospitals are actively seeking to fill 1,323 nursing positions and report that 2,252 nurses are aged 55 or older. Among all healthcare occupations, registered nurses (RNs) are in the highest demand and represent the largest proportion of employees aged 55 or older. Contrary to some perceptions, there is not a significant number of unemployed nurses actively seeking work. According to the November 2024 report, only 765 registered nurses were unemployed and looking for work, while 689 were unemployed but not seeking employment.

Additionally, while Licensed Practical Nurses (LPNs) play a smaller role in Maine hospitals, the true demand for them is much greater when factoring in their crucial roles in long-term care, home health, and residential care settings—areas not reflected in the survey. LPNs are vital to Maine hospitals, particularly in post-acute care, where they staff beds and provide essential patient care. Their contributions are critical to the healthcare continuum, ensuring hospitals can transition patients to lower levels of care and free up beds for more critically ill individuals.

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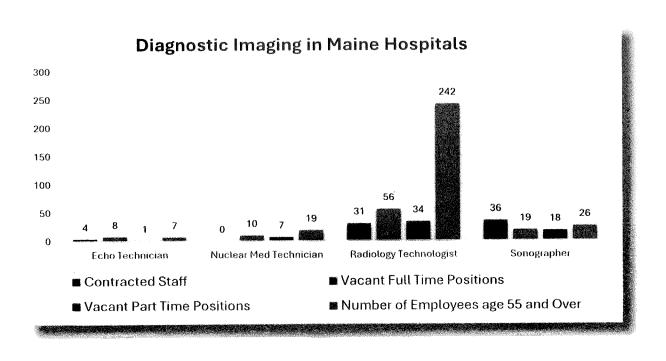
NURSING WORKFORCE

Certified Nursing Assistants (CNAs) also remain in high demand, with 589 open positions across the state. Hospitals have proactively addressed this need by developing their own CNA training programs or partnering with local educational institutions. Many of these programs utilize "earn while you learn" models to attract new enrollees, helping sustain a steady pipeline of certified CNAs. However, similar to LPNs, CNAs are heavily utilized in post-acute care settings, meaning the true statewide demand is likely much higher than hospital-reported figures suggest.



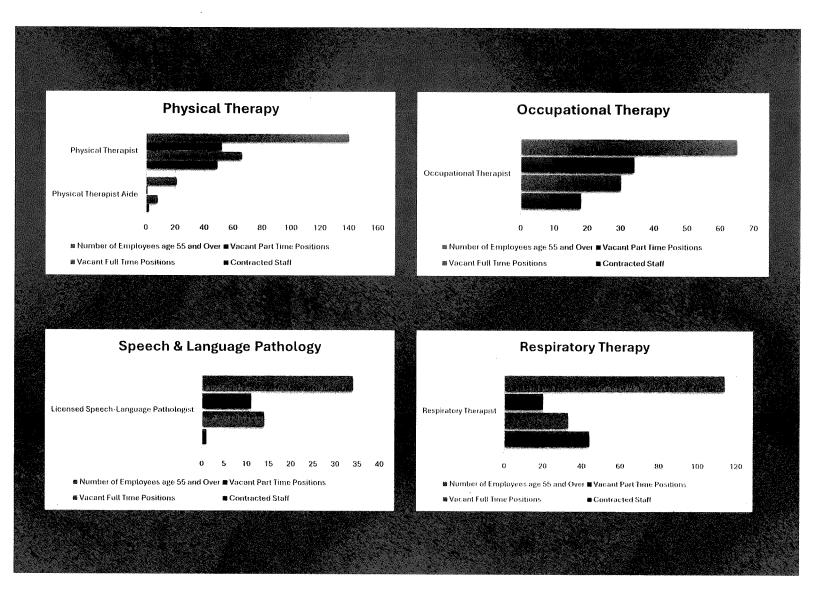
DIAGNOSTIC IMAGING WORKFORCE

While the demand for diagnostic imaging technicians is lower than that for nurses, this does not diminish the critical role these professionals play in hospitals or the impact their vacancies have on patient care. Smaller hospitals may employ only one or two full-time technicians for a specific diagnostic imaging service, meaning that a single vacancy can severely limit access or even shut down the service entirely—forcing patients to travel farther for essential imaging tests. Strengthening the pipeline for diagnostic imaging professionals must be a key component of a long-term strategy. Achieving this will require coordination and collaboration among multiple stakeholders, as the demand and resources for independent training programs remain limited. A potential solution could be the development of statewide programs that connect multiple learning sites to a central hub through technology, expanding training opportunities for each diagnostic specialty in Maine.



THERAPY WORKFORCE

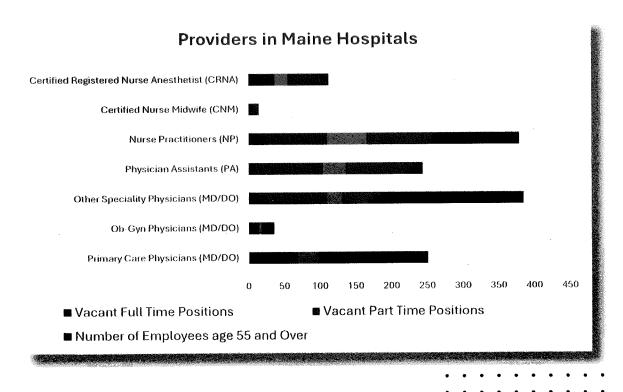
The demand for healthcare professionals providing respiratory, occupational, physical, and speech-language therapy services is expected to rise as Maine's aging population reaches its peak around 2030. Many older adults rely on these services to maintain their independence and age in place. While current workforce shortages already pose challenges to access, the aging workforce will further strain availability over the next 5 to 10 years.



PROM DER WORKFORGE

Maine hospitals are facing significant challenges in hiring providers across all specialties, from primary care to subspecialties. Current data highlight this reality, with hospitals actively recruiting 607 providers, including physicians and advanced practice providers. On average, it takes 277 days to recruit a single physician to practice in Maine, with even longer delays for rural, independent, and Critical Access Hospitals.

In 2022, Maine ranked first in the nation for the highest percentage of physicians aged 60 or older, at 39.3% (1,746 physicians), while ranking last for the proportion of physicians aged 39 or younger, with only 11.8% (525 physicians). Unfortunately, this trend persists in 2025, with 816 hospital-based providers now aged 55 or older, further exacerbating workforce shortages.

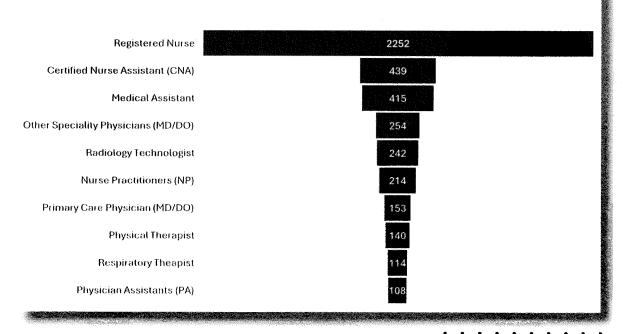


AN AGING WORKFORCE

Maine hospitals reported 5,592 employees aged 55 and older across 34 healthcare occupations, spanning providers, therapists, nurses, allied health professionals, and support personnel. However, this survey was not exhaustive and did not capture the full scope of the healthcare workforce in Maine's hospitals. As a result, the true scale of our aging workforce is even greater, particularly when considering the entire healthcare sector.

This demographic shift presents one of the most significant challenges we will face over the next five to ten years. The aging workforce in Maine hospitals mirrors the state's overall population trends and, as our members have noted, "tells a true story—one that many do not want to believe."

Top 10 Occupations with greatest number of employees 55 years or older

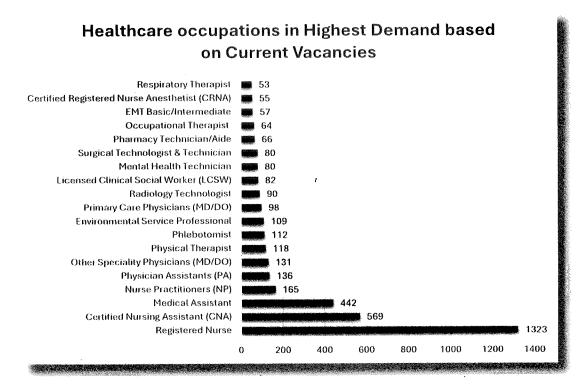


VACANCIES IN MAINE HOSPITALS

All 34 healthcare occupations identified in the survey reported both full-time and part-time vacancies. However, this graph highlights occupations with at least 50 or more vacancies, considering both types of positions.

As the state, educational institutions, healthcare providers, and policymakers evaluate where to invest, current vacancies serve as a valuable data point—especially when considered alongside the number of employees aged 55 and older by occupation. However, it is also important to recognize that some roles are limited in number within each hospital, meaning even a single vacancy can have a significant impact.

To make informed decisions about legislation, education, and clinical training investments, these data must be considered comprehensively.



Other Data Sets:

- https://www.maine.gov/dafs/economist/sites/maine.gov.dafs.economist/files/inline-files/Maine%20Population%20Outlook%20to%202030_5.pdf
- https://usm.maine.edu/school-nursing/maine-nursing-workforce-data/
- https://www.themha.org/policy-advocacy/Issues/Workforce/2022Nurse-Forecast-Report.aspx



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