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April 3, 2025

Testimony of Representative Dan Shagoury introducing
LD 263, Resolve, to Provide Rural Nonmedical Transportation Services to the Elderly and Adults with Disabilities Receiving Home and Community Benefits Under MaineCare
Before the Health and Human Services Committee

Good afternoon, Senator Ingwersen, Representative Meyer and fellow members of the Joint Standing Committee on Health and Human Services. I am Representative Dan Shagoury, and I represent House District 55 – the communities of Hallowell, Manchester and West Gardiner. I am here to present **LD 263, Resolve, to Provide Rural Nonmedical Transportation Services to the Elderly and Adults with Disabilities Receiving Home and Community Benefits Under MaineCare.**

Imagine if you were stuck in your house and couldn't get out to buy groceries or other necessities, visit an old friend or even go to church without having to beg a friend or relative to drive you. Or pay for a ride that you know you can't afford, or that may not even be available where you live.

I'm fairly sure that most of the people in this room never have to worry about that – but it is an everyday reality for lots of people in Maine.

The problem of public transportation in Maine is severe, particularly in rural areas. As an older friend of mine once told me, "in Maine either you drive or you rot." At the same time, social isolation has been shown to have serious negative effects on a person's physical and emotional health. Combine this with Maine's status as both the oldest state and one of the most rural, and you have a perfect storm of sorts. To help alleviate this situation, this bill proposes to provide older Mainers and those with disabilities who receive MaineCare services with a non-medical transportation benefit.

This bill was submitted four years ago by then-Senator Chloe Maxmin and is based on a program that is used in New York. That bill, LD 17 in the 130th, was endorsed by a majority of this committee, passed both chambers and died on the table. At that time, the Department testified neither for nor against and seemed genuinely interested in the concept.

Over the intervening four years, the situation on the ground has not improved. *The Blue Ribbon Commission to Study the Organization of and Service Delivery by the Department of Health and Human Services* listed reintroducing this bill as one of their recommendations. DHHS representatives on the Commission again showed a lot of interest in the idea.

As they say, that was then and this is now. The fiscal situation has changed since last fall. That does not mean that the concept behind this bill is not a good one. Even in the current fiscal climate, I believe this policy has merit.

I have heard that the Department will be testifying neither for nor against this bill, and they cite serious (and valid) concerns about both the cost and the current state of the transportation system.

Concerning who will be providing the rides, it is my hope that transportation could be provided through the MaineCare non-emergency medical providers. Given that exactly who this will be is currently tied up in court, that means that negotiations on this will have to wait until the case is settled. But, providers I have spoken with feel that it could be made to work.

Concerning the cost, I realize it isn't clear in the bill, but it is my intent that this be a MaineCare pilot program, which would require the Department to apply for a waiver. That would lower the fiscal note by approximately 65% when the match is factored in. Further, costs could be cut by limiting the benefit to \$1,000 per year. This should still be enough to provide meaningful transportation.

Finally, the beauty of a pilot project is that it can be limited by either geographic region or by target population. I would welcome the opportunity to work with the Department to come up with a suitable group so that the pilot could be done for a far lower amount.

Even when you add in money to apply for the waiver, design the parameters of the study and prepare the report, it still should be a manageable number.

I have also heard that the Department has been working on a study of similar transportation projects in other states, and it would be good to have the results of that study before the work session so that their results could help us determine how best to proceed.

In short, the problem of a lack of transportation for non-medical reasons is a serious one in Maine and we need solutions. I think this bill provides a flexible framework to come up with a pilot project to help us develop one.

Thank you for your consideration. I look forward to working with you on this bill.