



Testimony of Laura Cordes

LD 1509: Resolve, to Maintain Access to Home and Community-based Services for Adults with Intellectual Disabilities, Autism Spectrum Disorder or Brain Injury

Joint Standing Committee on Health and Human Services April 23, 2025

Good afternoon, Senator Ingwersen, Representative Meyer, and esteemed members of the Health and Human Services Committee. Thank you for the opportunity to provide testimony in support of LD 1509: Resolve, to Maintain Access to Home and Community-based Services for Adults with Intellectual Disabilities, Autism Spectrum Disorder or Brain Injury.

My name is Laura Cordes, and I serve as the Executive Director of the Maine Association for Community Service Providers (MACSP). MACSP represents nearly 100 agencies that provide person-centered educational, vocational, residential, and community-based supports—as well as specialized care—to children and adults with intellectual disabilities, autism, and brain injuries. These services help individuals live full, meaningful lives in their communities.

I want to thank and recognize Representative Holly Stover for sponsoring this bill and for elevating the importance of ensuring access to adequate rates for Home and Community-Based Services (HCBS). LD 1509 calls for the timely release of proposed rates and the funding necessary to implement them.

Our members provide HCBS services under Sections 18, 20, 21, and 29 of MaineCare to over 5,000 adults with disabilities across the state. These services are delivered by a dedicated workforce of nearly 9,000 direct support professionals—and funded almost entirely by MaineCare reimbursement rates.

Inadequate reimbursement rates, which fail to keep pace with rising costs and workforce pressures, remain the single greatest challenge to recruiting and retaining staff and sustaining the services that thousands of Mainers rely on every day.

Many MACSP members report striving to just meet basic health and safety needs when what they truly want—and what individuals deserve—are robust, integrated, person-centered services. They are working to stabilize existing services while also preparing to meet the needs of new individuals and new services under the Lifespan Waiver.

In good faith providers have waited their turn and supported the framework of the five year rate

determination cycle in the codified rate setting system put forward by the Department and championed by this committee and your colleagues.

We were optimistic in late 2023 when the Department initiated the rate determination process for all HCBS services, including those expected under the forthcoming Lifespan Waiver. In February 2024, nearly 50 providers submitted FY 2022–2023 data—investing significant time and effort into the process. Based on that work, we anticipated that draft rates would be released for public comment by late summer or fall of 2024.

You can imagine our concern when, by winter, the draft rates had still not been released. That concern deepened in December 2024, when we learned the Department would delay the launch of the Lifespan Waiver until FY 2027—effectively postponing the implementation of new rates for Sections 21 and 29 until that time. Making matters worse, the Governor’s proposed budget also included no funding for revised HCBS rates or the Lifespan Waiver in FY 2026 or 2027.

It is distressing to be in this position—particularly following the loss of the 3.5% cost-of-living adjustment in January—and with no indication of future funding to ensure that services can be sustained.

As it turns out, timing is everything.

As we continued advocating for restoration of the 3.5% COLA and prepared for this hearing, it became clear that an amendment extending the implementation deadline from July 1, 2025, to no later than July 1, 2026 is a necessary step forward reflecting the current reality we’re facing.

The draft rates for Sections 18, 20, 21, and 29—and the proposed models for the Lifespan Waiver—were just released last week. Providers, families, and stakeholders need time to review these extensive and complex changes, and the Department needs time to follow through with a thoughtful implementation process. But most importantly, this timeline adjustment must come with a commitment: that funding for sustainable, equitable rates will be included in the biennial budget. The people who rely on these services—and those who deliver them—need to know there is a funded path forward from the rate determination process.

Including the holiday, providers have been given just nine business days—less than two weeks—to comment on these long-awaited proposed rates. This short window makes it incredibly difficult to evaluate the adequacy of rate models that represent changes to over 18 different services in Sections 21 and 29, and more than 24 new services under the Lifespan Waiver.

Under the proposed redesign, a new assessment tool—the Supports Intensity Scale – Adult Version (SIS-A)—will be used to determine the pattern and types of supports each individual needs to succeed in community settings. Based on the results, individuals will be placed into one of six levels, each tied to a corresponding tiered rate.

Today we do not have the information we need to understand how the new rates will impact services for the people we support—as there is no publicly outlined plan or timeline to conduct assessments for those currently receiving services within the current waivers. We also lack critical information about the correlating rules that will further define these services in MaineCare Benefits Manual Chapter II and the requirements and costs associated with the forthcoming new licensing rule for HCBS services.

I recognize that this committee is not responsible for the technical aspects of rate modeling and assessment tools. But I also know of your strong commitment to effective rate setting and an equitable service system.

Given the significant redesign of these rates and our broader service system, we remain committed to working closely with the Department throughout this process. We have already requested additional time to provide meaningful feedback on the proposed rates and will continue to seek the information needed to fully understand the new four-tiered rate system, particularly to assess the adequacy of rates for individuals with the highest and most complex needs.

We ask for your support of LD 1509, with the amended implementation date, to help ensure that Maine's system of care and support for people with disabilities is not only sustained—but strengthened.

Thank you for your time and consideration. I'd be happy to answer any questions you may have.

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