



**LEGAL SERVICES  
FOR MAINE ELDERS**

LD 1613 – An Act to Establish Maine's Care Force to Address the State's Health Care Crisis

Testimony of John Brautigam, Esq. for Legal Services for Maine Elders  
Joint Standing Committee on Health and Human Services

April 23, 2025

Senator Ingwersen, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services.

My name is John Brautigam, and I am here today on behalf of Legal Services for Maine Elders. LSE provides free legal help for Mainers aged 60 and older when their basic human needs are at stake.

LSE serves older Mainers across the state. Our clients are generally low-income, some with medically complex conditions. Most are deeply rooted, contributing members of their communities.

Every week, our advocates encounter older residents struggling to remain safely in their homes or residential settings because they cannot find or retain consistent care. They are at risk of preventable institutionalization, neglect, or deep isolation — not because their needs are overwhelming, but because the workforce simply isn't there.

We are grateful to the sponsor for bringing forward this creative proposal. The idea of building a state-administered Care Force — complete with training, placement, and support infrastructure — speaks directly to the scope of Maine's worsening care crisis.

We offer our support for this bill and urge the Committee to consider several refinements that may enhance its impact, improve its sustainability, and ensure the safety and dignity of the people we serve.

**1. Strengthen Protections for Care Recipients**

While the bill rightly focuses on training and supporting essential support workers, we recommend additional safeguards for care recipients, including:

- Ongoing background check renewals,

**LEGAL SERVICES FOR MAINE ELDERS, INC.**  
5 Wabon Street, Augusta, Maine 04333  
(207) 621-0087 Fax (207) 621-0742  
Offices in Augusta, Bangor, Lewiston, Biddeford and Presque Isle  
LSE Helpline 1-800-750-5353 (Voice/TTY)  
[www.mainelse.org](http://www.mainelse.org)

- Clear mandatory reporting obligations,
- Site visit protocols, and
- A complaint and remediation process accessible to care recipients or their legal advocates.

Older individuals who rely on support workers may be medically or cognitively vulnerable, and it is essential that strong oversight measures accompany this deployment of a new workforce.

## **2. Prioritize Placement Based on Urgent Need**

The bill authorizes deployment of support workers “based on community need.” We encourage the Department to go further by prioritizing:

- Individuals eligible for Medicaid long-term services and supports (LTSS),
- Those already on waiting lists for in-home services, and
- Those at risk of premature nursing home placement.

This targeted approach would make the most of limited resources and ensure that the program reaches Maine’s most underserved residents.

## **3. Integrate the Care Force into Existing HCBS Infrastructure**

To avoid duplication and maximize efficiency, we recommend that Care Force placements be coordinated with Maine’s existing aging and disability services, including:

- Area Agencies on Aging,
- Home- and community-based MaineCare providers, and
- The Long-Term Care Ombudsman Programs.

This alignment would support continuity of care and ensure that the Care Force complements, rather than fragments, our existing care ecosystem.

## **4. Expand Training to Include Legal and Ethical Topics**

Participants in the Care Force will likely interact with individuals under guardianship, facing cognitive decline, or at risk of financial exploitation. We urge the Department to include basic training on:

- Autonomy and informed consent,
- Mandatory reporting of abuse or neglect, and
- Legal rights of care recipients.

This would enhance participant confidence and elevate the ethical standards of care.

## **5. Provide Career Pathways for Graduates of the Program**

To support long-term workforce development, the program should include career transition pathways such as:

- Partnerships with community colleges and apprenticeship programs,
- Progression toward certifications such as for CNA, LPN, or HHA, and
- Structured job placement support post-service.

This approach helps participants build lifelong careers in care and strengthens the pipeline for Maine's long-term services and supports sector.

## **6. Consider Piloting the Program First**

Given the scope and cost of the program — \$32 million annually — we respectfully suggest that the Committee consider piloting the Care Force in one or two regions of the state. A regional pilot would allow:

- Careful testing of implementation strategies,
- Collection of meaningful outcome data, and
- Adjustments before scaling statewide.

This measured approach may also make it easier to secure and align funding from federal and private sources.

## **Conclusion**

At LSE we share the sponsor's sense of urgency. The care crisis is real, and older Mainers across the state are already paying the price. We deeply appreciate the vision embedded in this bill and believe that, with the suggested refinements, it could become a model for how states respond to workforce shortages with creativity, compassion, and accountability.

Thank you for your leadership and attention to this vital issue. We welcome the opportunity to work with the sponsor, the Committee, the Department, and community partners to ensure the success of this proposal and others intended to relieve the workforce crisis.