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Testimony submitted to the Joint Standing Committee on Health and Human Services on January 20, 2026 - LD 1932 - An Act to Support Essential Support Workers and Enhance Workforce Development

Senator Ingwerson and Representative Meyer, co-chairs, and members of the Committee on Health and Human Services, my name is Ron Phillips, a resident of Waldoboro. As a volunteer of AARP Maine, I wish to give my support to LD 1932. It is an important bill for all Maine residents, and particularly the elderly and family caregivers. As you know, Maine is a state with the oldest population in the nation. As such, family caregivers, along with essential caregivers, will become even more critical in the years to come.

I became more acutely aware of the challenges faced by homecare workers through my own direct experience as a family caregiver. Over a recent five-year period, which is also the average number of years a family caretaker spends, I took care of my spouse of 62 years, 24/7, involving all levels of care that could be provided in the home, including administering morphine. I became acutely aware of the vital role not only essential workers play in home care and advising and directing family caregivers, but also my role as a family member caring for a loved one.

Among the merits of this bipartisan proposed legislation is to increase the reimbursement rate under Maine Care to 140 percent of Maine's minimum wage. Some 24,000 direct care workers in Maine could be affected by such an increase. Maine's current minimum wage is \$15.10/hour. This would bring the essential worker's wage to \$21.14/hour, much closer to MIT's living wage calculator of \$23.22 for our region of Maine for an adult to attain a basic standard of living.

Second, I call your attention to the comprehensive research report on the *State of Caregiving in the U.S. 2025* conducted by the national AARP and the National Association for Caregiving. The 131-page report notes that over 63 million family and friends are involved in some way, providing care for a family member, 89 percent of whom are caring for a spouse, partner, or relative. While some federal and/or state programs reimburse family caregivers for some portion of care, much remains to be considered on where financial support can be extended, and where the essential workers' role can be more adequately supplemented by compensating a family member's caregiving.

For example, under the federally-proposed *Credit for Care Act of 2025* – actually introduced in pre-COVID Congress in 2019 - AARP, along with other senior and family health advocates are proposing a nonrefundable, 30 percent tax credit up to \$5,000 for households filing a joint return of no more than \$150,000 on their IRS 1040. The research report documents that some 70 percent of households earning above \$50,000 would take advantage of such a credit. There are an estimate 166,000 family caregivers active in Maine. With Maine's 2024 median household income of around \$90,000, many households could benefit.

Sorting through the myriad ways to understand the complexity - let alone to monetize - the continuum of caregiving in the U.S., is not for the faint-hearted. However, taking a step in this direction could be advanced by LD 1932's Section 8, which reads *Innovations to Care and Support Technology Plan*. This section calls for a stakeholder group to be formed to study innovations in technologies, such as telehealth, monitoring systems, and other technical aids, that can contribute to efficiencies to enhance home care tasks. If we could insert "Family" into this section so it reads: *Innovations to Care and Support Technology and Family Plan* - and define the tasks of the stakeholder group accordingly - the door could be opened to look at ways the state, let alone the federal tax system, can be directed to strengthen the caregiving infrastructure in Maine and the nation.

In conclusion, it seems to me that the 24,000 caregivers in Maine's workforce would benefit from a more robust family caregiver system to supplement their duties. Homecare workers, palliative and hospice providers do and can even more so boost family caregivers' skills in the multiple levels of Activities of Daily Living (ADL), including end-of- life care.

It feels counterintuitive to monetize love in this way, but given the political predilection to use the tax code for presumed public good, offering tax credits and paying a living wage for caregiving seems a no-brainer.

Thank you.