

# MaineHealth

## **Testimony of Sarah Calder, MaineHealth Neither For Nor Against LD 2167, “An Act to Develop Maine’s Economy and Strengthen Its Workforce by Establishing an Office of New Americans” Wednesday, January 30, 2024**

Senator Nangle, Representative Stover, and distinguished members of the Joint Standing Committee on State and Local Government, my name is Sarah Calder, Senior Government Affairs Director at MaineHealth, and I am here to testify Neither For Nor Against LD 2167, “An Act to Develop Maine’s Economy and Strengthen Its Workforce by Establishing an Office of New Americans.”

MaineHealth is an integrated non-profit health care system that provides the full continuum of health care services to the residents of eleven counties in Maine and one in New Hampshire, but we’re also the state’s largest private employer with over 23,000 care team members. As we face a workforce crisis that is significantly impacting access to care, we are also challenged with providing health care services to new immigrants and asylum seekers, and it is from both perspectives that I offer my comments today.

As part of our mission of “Working Together So Maine’s Communities are the Healthiest in America,” MaineHealth’s members are committed to providing access to health care services for all patients regardless of their ability to pay or immigration status. We also provide free care to those at or below 200% of the federal poverty level (FPL), which is above and beyond the state requirement of 150% of the FPL. In fact, in Fiscal Year 2023, MaineHealth provided almost \$84.5 million in free care.

Although charity care provides a safety net, access to care is not enough to overcome all the barriers faced by our uninsured patients. In caring for New Mainers, we are frequently confronted with situations in which a patient’s health is significantly impacted both by being uninsured and by the social determinants of health, the lack of coordination of care, and wraparound supports necessary to ensure the health and wellbeing of this vulnerable community.

With that said, we urge the Committee to amend the legislation before you today and add to the Advisory Council membership a member representing a health care provider or hospital. Additionally, we ask that the Committee consider adding to the Office’s activities, that resources should be provided to coordinate the health care services of New Mainers, similar to the coordination of school and community services in Subsection D. It is critical that the proposed Office of New Americans in Maine focus its efforts on the comprehensive coordination of services, including health care services, for the immigrant and asylum-seeking communities before it can effectively reach its goal of incorporating immigrants into our workforce.

For example, we are often unable to discharge asylum seeking women who give birth at our hospitals because they lack adequate housing and, therefore, a safe discharge plan. As a result, these women are “stuck” in the hospital until a safe placement can be identified. And without

adequate transportation for immigrants housed in shelters outside of Portland, health care providers are relying on taxis and ride share companies to transport patients for their preventive care appointments often at our own expense. In the absence of a coordinated system of care, hospitals across the state are serving as the safety net for these patients – and the result is patchwork system that is failing to meet the basic needs of these individuals.

As an employer committed to advancing diversity and equity, MaineHealth recognizes the contribution our immigrant care team members make every day. We share the sentiment of the Governor that new Mainers are important to addressing the shortage of workers in the state. And we applaud the Administration for its support of eliminating the federal six-month work prohibition for asylum seekers.

For our current care team members, MaineHealth continues to make significant investments in retention efforts as well as initiatives to support growth and development in their careers. For example, through our MaineHealth Center for Workforce Development, we partner with the Immigrant Welcome Center of Greater Portland to offer English language acquisition classes to Maine Medical Center (MMC) employees. We support employees in this class with their learning, career navigation, awareness, and wraparound supports by collaborating with local partners. With that said, we strongly support the proposed activities of the Office to support English language learning programs, which will better prepare immigrants when they are able to enter the workforce.

Additionally, many of our immigrant care team members have higher education degrees from other countries and as their English language skills improve, we provide guidance into other internal and external career pathway and training opportunities. But the barriers (at the state and federal levels) to fully integrating into the health care workforce – at the same skill and level they were trained in – are significant, and we strongly support the proposed activities of the Office to promote improved pathways for professional accreditation and licensure.

Many of our New Mainers have faced incredible challenges to reach our state to make a better life for themselves and their family, and we look forward to working with the proposed Office to ensure that this vulnerable population receives the supports necessary so that they can lead both healthy and productive lives. It is critical that this Office include in its activities a focus on the health and coordination of health care services for these individuals, and we urge the Committee to amend the legislation before you today to reflect this critical component.

Thank you and I would be happy to answer any questions you may have.