

# State of Maine | 131st Legislature Joint Standing Committee on Appropriations and Financial Affairs Testimony of Hannah A. Hudson on behalf of Maine Primary Care Association February 26, 2024

## Neither for Nor Against:

LD 2214 "An Act to Make Supplemental Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds and to Change Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2024 and June 30, 2025"

Sponsored by Representative Sachs

Senator Rotundo, Representative Sachs, and members of the Joint Standing Committee on Appropriations and Financial Affairs, I am Hannah Hudson, Director of Policy at Maine Primary Care Association (MPCA).

MPCA is a membership organization representing Maine's Community Health Centers (CHCs), also known as Federally Qualified Health Centers (FQHCs). Maine's CHCs make up the largest independent primary care network in the state, providing high quality and equitable primary and preventive medical, behavioral, and dental health services for over 200,000 people (1 in 6 Mainers) at more than 80 service delivery sites around the State.

Community Health Centers provide all patients with comprehensive primary care services, as well as a host of other services that include transportation, translation, and case management, among others. They are at the forefront of delivering care to rural and underserved Maine communities. CHCs are further required to provide this care without regard to a patient's insurance status or ability to pay.

We are writing to share our concerns with this supplemental budget proposal as it currently stands related to economic justice for older Mainers, access to health care and food assistance for immigrants, and commitments to childcare providers. All of these issues, described in detail below, have a direct impact on the patients and staff of Community Health Centers across the state.

## Oppose Repeal of the Expanded Medicare Savings Program

We ask that you oppose Part NN and include the increased eligibility to the Medicare Savings Program (MSP) that was approved by the Maine Legislature to help keep older Mainers healthy and save on overall healthcare costs.

Last year, the Maine Legislature took action to improve the economic security of older Mainers by significantly increasing eligibility for the MSP, a program funded mostly by federal dollars that reduces Medicare costs for qualifying participants. The new eligibility levels would have ensured tens of thousands of older Mainers have enough money to meet their basic needs. MSP helps older people with lower incomes pay for some or all of their Medicare premiums, deductibles, copayments, and coinsurance. MSP pays for the Part B premium, which is usually taken from social security income, for all qualifying members, and for Part D for the lowest income members, so this reduces healthcare costs for older Mainers.

About 30,000 older Mainers across the state will lose access to this new benefit as a result of the proposal in the supplemental budget. The direct impact on the patient population served by CHCs in



Maine is significant as approximately 25% of CHC patients in the state are over the age of 65. CHCs' ability to address a wide range of primary care issues, from dental to behavioral health, while also understanding and responding to Social Drivers of Health (SDOH), makes them a crucial part of the nation's healthcare infrastructure and a leader in efforts to address inequities in health care delivery. Given this role, CHCs understand the value of and need for this expansion of MSP access.

#### **Oppose Repeal of Food Assistance for Certain Immigrants**

We ask that you oppose Part QQ, the repeal of the hardship exception that provides state-funded SNAP benefits to immigrants with no income who have work authorization but who are not yet employed.

The supplemental budget proposal cuts food assistance for immigrants by repealing the hardship exception that allows those who have work authorization but have not yet found employment to receive state-funded SNAP benefits until they find a job. SNAP is one of the few proven-effective solutions to combat hunger in the country and one of the only options for some immigrants in Maine to get the food they need while awaiting work authorization, seeking education and training, and looking for employment. Finding work takes time and immigrants often face multiple barriers to employment beyond the approval of work authorization.

Cuts like this were attempted under the LePage Administration, but the Legislature has affirmed the importance of supporting people's ability to meet their nutritional needs while experiencing hardship, including high barriers to employment. Without earned income or access to SNAP, people must rely on help from our already overburdened charitable food system. This cut will increase the need for food assistance, putting additional strain on our local food pantries - including those that are run by Community Health Centers across the state - which are struggling to keep up with the high demand.

# Oppose Repeal of Commitments to Child Care Providers

We are concerned that the supplemental budget does not include the necessary supports for child care providers and those with children in childcare that have been previously approved by the Legislature.

Specifically, the supplemental budget proposal:

- Delays implementation of the changes to income eligibility for childcare subsidies in the Child Care Affordability Program from 85% SMI to 125% SMI until July 1, 2024. (Part SS)
- Delays implementation of including childcare staff in the Maine Child Care Affordability Program until July 1, 2024 and changes the program to be a 2-year pilot program. (Part TT)
- Fails to carry forward \$4.4 million in funding for monthly childcare stipends. These funds are needed to cover the costs of retroactive payments and the increased payments to providers moving up the Quality Rating Scale as this program was designed to do.

According to the Maine Children's Alliance, last year Maine childcare programs served 9,422 fewer children than they are licensed to serve, due to a lack of staff. In addition to the negative impact this has

<sup>&</sup>lt;sup>1</sup> Maine Health Center Program Uniform Data System (UDS) Data, 2022



on CHC patients who rely on access to childcare, these proposals would also have an effect on recruitment and retention efforts at health centers. Maine's CHCs have long felt the impacts of primary care workforce shortages. Rural areas, in particular, are experiencing critical challenges with access to care. Difficulty hiring, recruiting, and retaining clinical staff and support staff is a consistent issue. Having access to childcare supports can empower more individuals to enter the workforce.

#### **Support Funding for Immigrant Access to MaineCare**

We ask that you include funding in the supplemental budget to remove exclusions in MaineCare based on immigration status and allow all Mainers who are income-eligible to get the care they need.

All Mainers need access to health care regardless of their background. Community Health Centers were born out of the Civil Rights Movement and a need to provide access points to health and social services for medically under-served and disenfranchised populations. Today, Maine CHCs remain deeply committed to continuing that mission of promoting greater health equity for all people.

The proposed supplemental budget lacks funding to support more equitable access to MaineCare for Maine residents with varying immigration statuses. While significant progress has been made to expand affordable health care coverage in Maine, there are still people who are ineligible for MaineCare based solely on their immigration status. These include working-age adults, parents, and elders with low-income who may be waiting for decisions on their asylum claims, have a temporary work visa or protected status, green card holders and victims of abuse who have been in the U.S. for less than 5 years, and those who are undocumented or currently without a clear pathway to citizenship.

We know that when we ignore health care needs today, people face preventable illness and unnecessary suffering, and it increases health care costs for our whole system. Without health coverage, many low-income immigrants must wait until a condition becomes an emergency to get care—endangering their health and adding stress to our already overburdened emergency departments.

Furthermore, Community Health Centers are required to provide care without regard to a patient's insurance status or ability to pay — which is a mandate unlike any other primary care provider. Ensuring that the patients they serve have access to MaineCare coverage allows our primary care providers to fully utilize the wraparound services that are necessary for the overall health of the whole person. Being able to bill for these services is critical for the financial health of the health centers as well, as they continue to recover from the COVID-19 pandemic and are dealing with inflationary wage pressures and increasing costs of care. Without reimbursement for these visits, it is becoming increasingly harder for health centers to keep their doors open and uphold their mandate and commitment to provide high quality and equitable care for their communities.

Thank you for considering our concerns. Please do not hesitate to contact me directly with any questions.

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