



Maryland Senior Citizens Action Network

MSCAN

AARP Maryland

Baltimore Jewish
Council

Catholic Charities of
Baltimore

Central Maryland
Ecumenical Council

Church of the Brethren

Episcopal Diocese of
Maryland

Housing Opportunities
Commission of
Montgomery County

Lutheran Office on
Public Policy in
Maryland

Maryland Association of
Area Agencies on Aging

Maryland Catholic
Conference

Mental Health
Association of Maryland

Mid-Atlantic LifeSpan

National Association of
Social Workers,
Maryland Chapter

Presbytery of Baltimore

The Coordinating
Center

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The Maryland Senior Citizens Action Network (MSCAN) is a statewide coalition of advocacy groups, service providers, faith-based and mission-driven organizations that support policies that meet the housing, health, and quality of care needs of Maryland's low and moderate-income seniors.

MSCAN supports HB 1280. According to an October 2025 *Caregiving in the US* report by AARP, Maryland is home to 1.16 million family caregivers.¹ This means one in four adults provides care to a family member, friend, or neighbor with complex medical conditions or disabilities. Most caregivers support an older adult, typically a parent. Their responsibilities are extensive: 68% help with at least one activity of daily living, and all caregivers assist with instrumental daily tasks such as meal preparation, transportation, or managing finances. Nearly half (45%) are “high-intensity” caregivers, and 29% provide 40 hours or more of care weekly or around-the-clock care.

Caregiving at this scale has wide-ranging consequences for families. Two-thirds of Maryland caregivers are employed while providing care, leaving many to balance work obligations with caregiving responsibilities. For some, this means reducing work hours, rearranging schedules, or struggling to remain in the workforce altogether. Caregivers also often take on complex medical and nursing tasks without formal training or support. These pressures can compound caregivers’ own health challenges, elevate stress, and reduce their ability to continue providing care over time.

National research shows that higher caregiver strain correlates with increased emergency department use, hospitalizations, and other destabilizing care transitions for older adults.² Strengthening caregivers’ capacity to maintain safe care at home is an opportunity to improve outcomes while reducing cost pressures on our health care systems.

The feasibility study in HB 1280 will allow Maryland to examine options for caregiver financial support, evaluate models, estimate costs and savings, and understand how different approaches might reduce caregiver burnout, promote family stability, and prevent unnecessary institutionalization. As caregiving demands grow and Maryland relies increasingly on families to sustain community-based care, we must explore strategies to support those who make aging in place possible.

For these reasons, MSCAN urges a favorable report for HB 1280.

¹ Caregiving in the US 2025: Maryland, <https://www.aarp.org/content/dam/aarp/ppi/topics/ltss/family-caregiving/cgus-2025-caring-across-states/caregiving-in-the-us-2025-maryland.doi.10.26419-2fppi.00383.015.pdf>

² Germain N, Toulouse-Fournier A, Samb R, et al. Caregiver Burden and 30-Day Emergency Department Revisits. *JAMA Netw Open.* 2025;8(9):e2531166. doi:10.1001/jamanetworkopen.2025.31166