



Testimony on H.B. 49

House Finance Health and Human Services Sub-Committee

Mark Davis, President, OPRA

Dear Mr. Chairman, Ranking Member Sykes, and Members of the House Finance Health and Human Services Sub-Committee:

My name is Mark Davis, President of the Ohio Provider Resource Association (OPRA). OPRA is a statewide member association representing private providers who serve individuals with developmental disabilities.

OPRA is in full support of the Department of Developmental Disabilities (DODD) funding initiatives in H.B. 49 as introduced. Unique in its approach this limited collection of funding initiatives target specific areas of urgent need in Ohio's developmental disabilities system.

Governor Kasich and DODD Director John Martin are to be credited for creating a balanced funding package that identifies critical, specific gaps in our home and community based service residential system and attaches resource to address them. This is essential as our HCBS system increasingly serves those with increased medical and behavioral needs. At the same time and in equal measure the Director is proposing additional funding to intermediate care facilities for individuals with intellectual disabilities (ICFs/IID) recognizing the historic need for investment and the value of this type of residential support for many individuals and their families.

Viewed individually or holistically these DODD funding provisions provide a fundamental understanding of where our system is in the midst of significant yet inevitable transition. We hope you will support the H.B. 49 DODD funding as proposed in its entirety.

Our system faces tremendous challenges with the recruitment and retention of direct support professionals (DSPs). We are a human service system and our core essence is the delivery of hands on direct service to individuals. Recruiting and retaining a direct support workforce is the number one issue facing providers today. Providing direct supports to individuals with developmental disabilities is no easy task. We expect our staff to administer medications, occasionally through G-tubes or J-tubes. We expect them to support individuals with a wide variety of needs including those with complex medical needs where a mistake can have serious consequences or those with severe behavioral challenges often at risk to their own safety. And of course they are required to fill out endless documentation as required through state rule and regulation.

In House Bill 64, the legislature and the governor made progress addressing this issue through targeted increases to direct support professionals in the waiver and ICF systems. As I testified two years ago, the 6% increase, was “a great start to moving DSP wages to a sustainable level of 200% of the federal poverty level as recommended by DODD’s Strategic Planning Leadership Group”. Although greatly appreciated, the 6.7% increases have paled in comparison to the 24.1% inflation since the waiver rates were originally set in 2005. Our average turnover has increased from 47% two years ago, to over 51%.

In addition, direct supports are increasingly provided in integrated, isolated sites with little to no back-up. All of this for an average wage of \$10.24. For the record, we believe that increased wages for direct support professionals is only part of the solution. We also support creative and innovative system reform and are actively pursuing multiple strategies to improve the recruitment and retention of a direct support workforce.

For the first time we are seeing providers refusing new opportunities or even terminating existing obligations for the sole reason that they cannot find the staff to deliver the service. The targeted 6% increase for quality, trained direct support professionals will help keep us on the course of a sustainable workforce.

Next, I want to talk about the ICF program, a comprehensive residential service that has proven valuable to many Ohioans. House Bill 64 as proposed, contains a freeze of provider rates and components of a new reimbursement system that is not yet completed. We appreciate DODD working in good faith with OPRA and others, to propose revisions to this language. The stability of the ICF program lies in the balance.

Finally, Developmental Disability systems exist for the sole purpose of the facilitation of and delivery of service at the direct support level. All other systemic activities should act as a compliment to those efforts. Oftentimes the complexity of regulation and process can overwhelm all involved in the facilitation of and delivery of service. OPRA realizes that while funding of services is critical we have a reciprocal obligation to ensure that our system is as efficient and effective in operation as possible and we pledge our continued commitment to that goal.