

**Testimony on House Bill 33 before the House Finance Sub-Committee on Health and Human Services**

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Chairwoman Carruthers, Ranking Member Liston, and members of the Committee. Thank you for the opportunity to submit testimony. I am Katherine Hunt Thomas, Attorney and Director of Advocacy for The Ability Center of Greater Toledo, a Center for Independent Living serving seven counties in northwest Ohio. The Ability Center advocates, educates, partners, and provides services supporting people with disabilities to thrive within their community.

I am here today with two asks: I ask that this committee support increased wages for in-home care providers in Ohio with parity across ODM, ODA, and DODD Waivers and that it support a provision setting a base hourly wage for such providers to \$20.00/ hour.

Ohio's Medicaid Home and Community Based Waiver system is meant to give people with disabilities a choice to receive long-term care and supports in the community rather than in an institutional setting like a nursing home or Developmental Center. While there are times when people with disabilities may need supports in an institutional setting, no person should be forced to live in a hospital due to a lack of available services in the community. This is especially relevant to many of our constituents. While Centers for Independent Living serve anyone with a disability, our main constituency are people with significant disabilities under the age of 55 who seek independent lives where they can live, work, and socialize in the community.

The choice to live in the community rather than an institution is what caused people with disabilities to organize to pass Americans with Disabilities Act in 1990, a law that requires state and local government to provide services to people with disabilities in the "most integrated setting" appropriate to their needs.<sup>1</sup> For many of our colleagues and constituents, the most integrated setting means in their own home with wrap-around services, giving them dignity, independence, and the ability to work and participate in our community.

The largest issue facing people with disabilities who wish to live in the community is a shortage of direct care providers. There are many systemic issues contributing to the shortage – last summer, Governor DeWine put together a cross-agency workgroup – the Ohio Direct Care Expansion Working Group -- to hear testimony on this issue. That workgroup produced a report setting out issues that the state of Ohio will need to fix in order to recruit and maintain a direct care workforce. The report is available on the Ohio Department of Jobs and Family Services website.<sup>2</sup>

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<sup>1</sup> 42 USC 12101 (1990).

<sup>2</sup> Ohio Direct Care Expansion Working Group (2022), Final Report, available at <https://jfs.ohio.gov/owd/WIOA/docs/DirectCareReport2022.stm>.

The key consideration for this committee right now, however, is a base hourly wage. Many people with disabilities who want to live in the community have access to HCBS Waivers, but they do not have the *providers*. A job in direct care is difficult – it involves assisting people with Activities of Daily Living like getting out of bed, using the restroom, bathing, eating, etc. Like any job in a health care field, to attract workers who feel called to care for others and will engage in such a difficult job, home care agencies and independent providers need to have competitive wages. \$12.95/ hour with no mileage reimbursement, often no benefits, and no job security or career ladder will not attract people to the field. The wage will need to be a living wage and one that is higher than that offered in the customer service professions -- \$20/ hour would ensure that these workers are adequately compensated.

Additionally, the base hourly wage needs to be the same across all HCBS Waiver systems – ODA, ODM, and the DODD all oversee at least two HCBS Waiver programs in Ohio. Each Waiver Program should have the same base hourly wage for direct care workers – otherwise there is an inequity in care and the ability to live independently based on what system people with disabilities are found eligible for. In practical terms, this means that individuals have to be eligible for the Waiver system with the highest wages to be supported independently in the community, and those who are only eligible for the lesser rate of care may be forced into living in an institution.

This makes economic sense for Ohio. It is well-known that providing care in the community costs half of what it costs to provide care in institutions.<sup>3</sup>

On behalf of The Ability Center of Greater Toledo, I ask that this committee support a base hourly wage for direct care providers of at least \$20/ hour that is the same across HCBS Waivers overseen by ODM, ODA, and DODD.

Thank you, again, Madam Chair, and members of the committee for the opportunity to submit testimony today.

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<sup>3</sup> Erica Reaves, MarBeth Musumeci, Kaiser Family Foundation, Medicaid and Long-Term Services and Supports: A Primer (Dec. 2015), available at <https://www.kff.org/medicaid/report/medicaid-and-long-term-services-and-supports-a-primer>.