

To Chair Romanchuk, Vice Chair Huffman, Ranking Member Liston, Senator Blackshear, Senator Johnson, and Senator Wilson:

Thank you for once again allowing me to submit written testimony to the Senate Medicaid Committee and enabling me to share my thoughts on the proposed 2026-2027 budget bill (HB 96). In my previous testimony to this committee, I advocated for several items to either be included or excluded from the budget. First and foremost, I urged that no cuts be made to Ohio's Medicaid program. This included my strong opposition to the proposed provision in the budget that says that individuals in the Medicaid Expansion Group, also known as Group VIII, would automatically lose their Medicaid coverage if the federal government reduces the amount of Medicaid funds it gives states.

In this testimony, I would like to voice my enthusiastic support for a previously drafted and proposed amendment to the budget. This amendment would establish The Legislative Long-Term Care Workforce Study Commission. According to the amendment, the commission would study the current state of Ohio's Long-Term Supports and Services (LTSS) workforce and then recommend strategies to strengthen this vital workforce. According to a webpage on the Congress.gov website, LTSS are "a broad range of health and health-related services and supports needed by individuals who lack the capacity for self-care due to a physical, cognitive, or mental disability or condition" (Source one). A wide variety of people, including people with disabilities of all ages and the elderly need LTSS (Source 1). LTSS are provided in a wide variety of places, such as private homes and long-term care facilities (Source 1).

Many of the individuals in the LTSS workforce are direct care workers. According to an article on the PHI National website, "Direct care workers assist older adults and people with disabilities with daily tasks, such as dressing, bathing, and eating" (Source 2). I could not survive without direct care workers. As stated in my previous testimony, I have a significant physical disability and need 21 hours of help a day from direct care workers with daily tasks. These tasks include everything from getting me a drink of water to giving me a shower and putting me to bed. In fact, direct care workers are so important to me that I advocated in my last testimony for a provision to be added to the budget to ensure that all direct care workers get an automatic cost of living adjustment annually. I also mentioned in my previous testimony that there is a shortage of direct care workers because they are paid ridiculously low wages and often do not receive healthcare benefits from the companies that employ them. Another big problem in the direct care worker workforce is a high turnover rate. This is a difficult situation for a person using LTSS because just as the person gets used to working with one direct care worker, the person must start all over and train a new worker.

The importance of direct care workers in my life, the worker shortage, and the high turnover rate in the field are all reasons I support the creation of The Legislative Long-Term Care Workforce Study Commission to strengthen the LTSS workforce. By strengthening the workforce, the commission will both improve the lives of these invaluable workers and the lives of the people who depend on them for care.

I wholeheartedly endorse all the initiatives that the amendment lists for the commission to complete. These initiatives include developing strategies for worker recruitment, identifying the

workers' educational needs, devising ways to improve the workers' job quality, and strengthening the career ladder for the workers. Myself and other advocates have discussed these initiatives as possible solutions to the direct care worker shortage. The commission should also have the power to oversee the implementation of already agreed upon solutions. One example of this would be the commission doing whatever it can to make sure the wage increases allocated for direct care workers in the previous budget are actually being passed on to those workers.

I also approve of the proposed members of the commission as they are listed in the amendment. It is critical that the commission includes managers/owners of direct care worker agencies, direct care workers themselves, people using LTSS, their family members, legislators, and all other interested stakeholders. Having everyone at the table ensures that all perspectives are heard. It is equally important that the commission have representatives from the three departments – the Department of Medicaid, the Department of Aging, and the Department of Developmental Disabilities – that administer LTSS in Ohio. One of the biggest problems facing people using LTSS is the lack of parity, both in wages paid to workers and services offered to users, among these three departments. Without parity and transparency among the departments, the problems plaguing the LTSS workforce will never be fixed.

Thank you again for letting me share my testimony and I highly recommend that the amendment creating The Legislative Long-Term Care Workforce Study Commission be added to the 2026-2027 budget.

Sincerely,

Susan Koller

References

1. Source 1. Webpage Title: "Overview of Long-Term Supports and Services".

Webpage Address: [https://www.congress.gov/crs-product/IF10427#:~:text=Long%2Dterm%20services%20and%20supports%20\(LTSS\)%20refers%20to%20a,or%20mental%20disability%20or%20condition.](https://www.congress.gov/crs-product/IF10427#:~:text=Long%2Dterm%20services%20and%20supports%20(LTSS)%20refers%20to%20a,or%20mental%20disability%20or%20condition.)

2. Source 2. Webpage Title: "Understanding the Direct Care Workforce".

Webpage Address: <https://www.phinational.org/policy-research/key-facts-faq/#:~:text=WHO%20ARE%20'DIRECT%20CARE%20WORKERS,supervision%20of%20a%20licensed%20professional.>