

Good afternoon! My name is Erin Forson. I currently serve as a service and support administrator, or SSA, and have done so for nearly a decade. My job is to assist Ohio adults who have developmental disabilities find the support they need to live a great life! I am also a parent of two adult children with developmental disabilities and have worked as a direct service professional providing hands-on support. So, I have a panoramic view of the issues we face.

Thank you for allowing me to testify today.

Thankfully, people with intellectual and developmental disabilities in Ohio are not warehoused, forgotten, or abused, as often happened only sixty short years ago. Ohio has provided the means for these people to live in their communities, work, play, and experience a wonderful life.

My fear is that warehousing may begin again.

Let me explain.

I live in Union County. In this county alone, we support 1,153 people with developmental disabilities. We help 272 of those people with waivers. In case anyone here isn't exactly sure, waivers are one avenue to pay for support for Ohio residents who have developmental disabilities. Some of the most critical supports are direct care.

If a person needs direct care, they or their advocate calls the SSA (that's me), I find them an agency to interview and hire. The agency provides a DSP, or direct support professional, to provide support. The waiver pays for it. Simple.

But what if there is no agency to call?

In Union County there are currently 52 open requests for providers. That's nearly 20% of the individuals with waivers, and let me be clear, these people **already have waivers to pay for these services**, who cannot find providers. I checked with our Medicaid Services Manager, and she crunched

some numbers. The 5 highest earning agency providers in Union County earned \$255,425 less in 2022 than they did in 2021. I know this isn't because they didn't want to provide services—it's because they could not.

Why?

**The current billable rate for agencies restricts the wages agencies can pay, the benefits they can offer, and the staff they can attract. This is not speculation. It is a fact.**

According to The Occupational Outlook Handbook provided by the U.S. Bureau of Labor Statistics, the median pay for DSP's was \$14.15 per hour just one year ago. Mind you, that is **the median pay**, not the entry level pay. For comparison, my son recently started at Wendy's and makes \$14 an hour. And yet, we are expecting responsible, intelligent, mature, caring human beings to work for \$14 an hour—or less. We want people who can monitor the health and safety of people in the State of Ohio, help them get to medical appointments and follow doctor's orders, perform delegated nursing tasks, fill out reports and document, plan a budget, take them shopping, assist with advocacy, drive them around, and help them mitigate all the problems and pitfalls of life. All for \$14 an hour (median).

Here is what I have seen as a result.

- DSP's have either unreliable transportation or no transportation because they cannot afford a car and insurance, let alone gas.
- DSP's cannot pay for childcare so they work somewhere that pays more.
- DSP's work at least 60 hours a week—usually more. They are exhausted.
- DSP's will not work shorter shifts from 4-8 hours—they don't earn enough to make the drive.

Here are some stories of my experiences as an SSA that illustrate the problems posed by the current funding.

Two years ago, an agency came into Union County with outside investors and a vision. Pay \$16 an hour to direct service professionals, provide health insurance, and offer paid time off for vacation and sick leave—reasonable goals—but lofty. This agency signed on with a lady I support who suffers severe mental health challenges. This agency has provided such good care that for the first time in a decade she has held down a job and was able to spend Christmas in her home rather than in a treatment facility. On Monday I talked to her, and she was ecstatic. “This is the best I’ve ever done in life,” she said. “My agency is great!” The next day her provider emailed me. She has 30-days-to find a new agency. They can’t find staff to work in the home.

I have a young man with a level one waiver who has been 2 years sober. He is thriving and ready to get his first job. He was lucky enough to find an independent provider and moved out of his mother’s home. Two weeks ago, his independent provider fell and broke her leg. She isn’t sure when or if she will be back. I cannot find an agency to help work with him, even if I bump up supports to 5-hours every day or 10 hours three times a week. Agency providers struggle to staff people who live alone. Many only have enough staff to cover group settings where people can share services.

I support another young woman who is 31 years old. She has lived in a nursing home for nine years. Why? She has high medical need. Her mother cannot care for her. Her mother is afraid to house her in the community because it’s very difficult to find a reliable provider who can provide round-the-clock services for her daughter. What if a provider gives notice?

I just ended services for another man who moved into a nursing home. Why? His parents are both in their eighties, in poor health, and cannot provide for his care. He was living in the community in

a group setting. However, he had high medical need, and the agency working with him could not provide adequate staff to support the home.

When the independent provider rate was announced, we all thought that was the answer. New blood would be drawn to the field because they can earn over \$20 an hour, right? Some DSP's employed by agencies jumped to the independent world (thus further reducing agency manpower). Independent Providers cannot cross-train and cover for one another when a person is unable to work. Sometimes they can help with Level One Waivers which allow less funding for direct care and carry lower need, but they fill up as soon as they announce their certification. They are not a good solution for those who cannot be left alone.

For example, last week I had a single mom call me in tears. Her son has an Individual Options waiver. This mom employed an independent provider, but her IP can no longer work because she's going to nursing school so she can better provide for her children. This mom's son cannot be left alone. She can't afford to quit her job and care for him. She cannot afford to stay at home and make caring for him her job through Shared Living. She works full-time and is on her 3<sup>rd</sup> agency provider. The first two agencies sent DSP's with no transportation. So, they were either late, absent, or didn't get picked up after their shift. One DSP fell asleep on the job—she had worked 40 hours already that week and it was Wednesday. This mom is so overwhelmed that she's given up. She simply cannot afford the time it takes to train someone else. She called me for help. I could offer none. There are no more agencies left to query.

I am afraid because the writing is on the wall. If this budget does not pass, if the agency billable rate and the wages of DSP's does not increase, Ohio simply cannot maintain the manpower it takes to help our citizens with developmental disabilities live in the community, work, pay taxes, contribute, and live fulfilling lives.

I know that the members of this committee do not want to take Ohio back sixty years to warehouse human beings, remove them from productive society, take away their right to freedom. I ask you to come out of the wings and be champions for these constituents.

Thank you again for taking the time to listen and to hear my testimony today.