



Brittanie Maddox

Disability Rights Advocate for The Ability Center of Greater Toledo Legislative Committee Chair for the Ohio Olmstead Task Force June 8, 2023

Interested Party Testimony for House Bill 33

Thank you, Chairman Dolan, Vice Chairman Cirino, Ranking Member Sykes, and members of the Senate Finance Committee, for the opportunity to testify on HB33 and the importance of investing in the inhome care workforce. My name is Brittanie Maddox, and I am a Disability Rights Advocate at The Ability Center of Greater Toledo as well as Chair of the Legislative Committee for the Ohio Olmstead Task Force. On behalf of both organizations, please accept this testimony.

The increased funding in Ohio's budget for FY24-25 is essential for people with disabilities to remain independent and connected to their communities. My most pressing concerns are:

- The removal of the House passed Supportive Decision-Making amendment and
- Parity in funding that includes a livable wage for all Direct Care Workers of at least \$20 per hour, regardless of service system.

In the House version of HB33, Section 5123.68 to 5123.685 creates a statue to formalize Supportive Decision-Making. This is a way for people with disabilities to receive assistance in some of their decisions without having to give up their legal rights. A truly supported decision-making model is one that reflects the informal process that so many of us use to get advice or assistance with some of our toughest decisions. We support state-recognized supported decision-making so long as the law reflects an informal agreement and does not give any authority or decision-making power to the person who is supporting the individual with a disability without having to petition the Probate Court. Looking at Section 5123.68 (B)-(C), once an individual with a disability (principal) enters into a formal agreement with a supporter, the supporter would then be able to make, communicate, and implement life decisions. Our concern is that the Senate did not address the problematic language that is in the House version; therefore, it still exists and without any attempt to ensure that people with disabilities will potentially be exploited without direct Court oversight.

People with disabilities want to live in their communities of choice rather than institutions or facilities. We now have two federal laws that support that choice to remain independent. The Americans with Disabilities Act (ADA) and the Olmstead Supreme Court Decision, state that an individual has the right to live in the most integrated setting appropriate to the needs of the individual. An integrated setting is defined as, "a setting that provides individuals with disabilities opportunities to live, work, and receive services in the greater community, like individuals without disabilities"1. As such, Ohio has an obligation

¹ U.S. Department of Justice, Statement of the Department of Justice on Enforcement of the Integration Mandate of Title II of the Americans with Disabilities Act and Olmstead v. L.C. (2020) available at



to ensure that home and community-based services are adequately funded, and individuals have access to receive services and supports in their most integrated setting. This does not mean building additional alternative living arrangements or putting people in nursing homes. Direct Care Workers are vital to this equation and provide the necessary services and supports for people with disabilities.

There needs to be equitable funding for ALL Direct Care Workers regardless of service system. The Senate version includes an additional \$1 for the Department of Developmental Disabilities workers only. Increasing funding to only one service system does not address the "job hopping" that already exists and potentially creates an even bigger crisis. We have heard from consumers on Medicaid Waivers have difficulties finding Direct Care Workers and keeping them employed. Workers find out that they can make more money working for DODD and often quickly leave which unnecessarily puts the individual with a disability in risky situations. I want to reiterate that workers in the DODD, Medicaid, and Aging system are all performing relatively similar jobs and tasks. According to a report from PHI, Ohio's Direct Care Workers were paid an average of \$12.61 in 2021. That is a growth of only \$0.56 or 5% from the years of 2011 to 2021². In addition, a National Low Income Housing Coalition report noted that in Ohio, an individual needs to make at least \$17 per hour to afford a modest 2-bedroom home³. Based on this data alone, a Direct Care Worker would be unable to afford housing, food, medical care, etc. leading many to qualify for Medicaid services themselves. Due to the rising costs of living and the fact that many of these workers have families with multiple children, \$17 per hour is not going to provide them with financial stability. Ohio should increase the wages for this workforce to \$20 per hour.

A working individual, paying taxes, should receive a livable wage and have access to employment benefits, mileage reimbursement, educational assistance opportunities, and career development. The solution to the Direct Care crisis is multi-faceted, but if we do not take significant steps to ensure our long-term supports and services are adequately funded and continue to develop, people with disabilities and the significant aging population will no longer have the options to live in their home, go to social gatherings, and be close to their families. It will cost Ohio even more money to fund and staff nursing homes than it would to fund and grow the direct care workforce to provide services in the home.

We all want Ohio to be a state that individuals, regardless of disability, see as a place to raise their children, age, and find meaningful employment. Thank you again for the opportunity to testify on HB33, please let me know if you have any additional questions or concerns.

Sincerely,

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² PHI, Workforce Data Center (2020) available at https://www.phinational.org/policy-research/workforce-data-center/#var=Wage+Trends&states=39

³ NLIHC, Out of Reach: The High Cost of Housing, p199 (2022) available at https://nlihc.org/oor