

State of Oregon
Governor's Advocacy Office
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The implementation of minimum wage increases across the State of Oregon is serving to further destabilize the workforce that supports our most vulnerable citizens. Specifically, individuals with intellectual and developmental disabilities (I/DD) and the Direct Support Professionals (DSPs) that provide a variety of Medicaid funded services. Much of the discussion that resulted in the adoption of Oregon's minimum wage increase included a focus on entry-level positions, however it failed to address the impact to DSPs and persons with I/DD that depend on their supports to ensure basic health, safety, and the realization of Home and Community Based guideline expectations (HCBS). Although the I/DD community is in favor of the minimum wage increase, we must receive additional revenues from the State of Oregon to afford to comply. We must also afford, via rate increases, the wage compression that becomes more problematic as we approach the final \$15.00 an hour step.

The DSP workforce includes direct care staff, home health assistants, aides, personal care attendants and other professionals who assist individuals with I/DD. Specifically, DSPs assist with activities of daily living & instrumental activities of daily living (ADLS/IADLS) that support persons with disabilities to pursue self-directed, active, social lives. These professionals act as advocates by communicating the needs, self-expression and goals of disabled persons in their care. DSPs provide support within the home, work, school, or in other public and private places within the community.

While DSPs find their jobs rewarding, there are a variety of challenges that negatively impact their experience. These challenges include:

- Low wages
- High turnover
- Poor utilization and access to benefits
- Ineffective supervision
- Organizational training and socialization practices
- Opportunities for professional development

High turnover rates among DSPs are a financial and operational burden to entities serving customers with I/DD. These challenges result in:

- High vacancies
- Productivity loss
- Increased demand on existing workforce to "cover" often leading to burnout
- Individuals with I/DD receive less attention and support
- Expectation of "green" staff to train, develop, and supervise new employees
- Inadequate knowledge and familiarity with institutional practices, workplace culture, customer care, and caregiving experience

People with disabilities and their families suffer the most serious effects. High turnover translates to a revolving door of caregivers, requiring constant training and disruption of care. Many DSPs lack the education, skills, and experience necessary to provide quality care. In many instances, people with I/DD cannot access services from this depleted workforce. Some accept poor quality care rather than no care at all.

The State of Oregon determines the provider rates and must include these rates in their state's Medicaid Plan which is reviewed by the Centers for Medicaid and Medicare Services (CMS). In short, as Oregon's economy experiences inflation or legislative activity results in minimum wage increases, community providers (DSP employers) cannot raise their prices or shift costs to meet higher compensation demands. Community providers and DSPs are left to cost cutting measures, including discontinuation of services, to

make ends meet. Today, the reimbursement rates that fund services to persons with I/DD have not been adjusted to include Oregon's minimum wage increases let alone any inflationary factors.

The capacity to provide competent and effective care is diminished. The number of Americans needing long-term services (LTSS) is expected to double by the year 2050. The demand for DSPs will increase by 48% in the next decade alone. Without a stable, competent, and committed workforce individuals with intellectual and developmental disabilities remain at risk. Hospitals, jails, prisons, homeless shelters, nursing and rehabilitation facilities, crisis units, and the like are not a suitable or acceptable option to serve as a safety net for the I/DD population as access to caregivers becomes more problematic. Even if they were suitable solutions they are cost prohibitive.

The Oregon Legislature will commence in the upcoming months. It is my intention to assist individuals with I/DD, families, caregivers (DSPs and Community Providers) to have their voices heard. A collective voice is a strong voice, and story-telling creates understanding, empathy, and change. Persons with I/DD, their families, caregivers, and other concerned community members may utilize the Governor's Advocacy Office Complaint process, the Case Management Complaint process, participation in the GO! Project, letter writing, legislative outreach and education, media, legal counsel, and opportunities for formal presentations to have our collective voice recognized and heard.

Please consider this a call to action to address the customer and caregiver crisis that results in compromising the basic needs and rights of our most vulnerable Oregonians.

Thank you for your time and consideration,