

THE 2008 DISABILITY POLICY SEMINAR

THE ARC, AAIDD, AUCD,
UCP AND NACDD
FACT SHEET

DIRECT SUPPORT WORKERS

Background

For millions of people with disabilities of all ages, direct support professionals are the key to living successfully in their home communities. Direct support professionals are personal care assistants, home care aides, or staff in community residential supports programs that assist people with disabilities with medications, preparing and eating meals, dressing, mobility, and handling daily affairs.

Unfortunately, there is a crisis in the availability of professionals to provide these direct supports. In 2000, the median (equal number above and below) hourly wage of personal and home care aides and home health aides was \$7.50 and \$8.23, respectively, for very demanding, often difficult work. Many workers find that they can earn higher hourly wages and receive better benefits in far less demanding jobs in the fast food and the retail industries. As a result, people with disabilities experience continuous turnover of direct support workers or they find themselves unable to get workers at all. Unable to obtain adequate assistance, people find their health, safety, and sometimes, their lives in jeopardy.

Self-advocates, families, advocates, and service providers have worked for decades to ensure successful community living for all people with disabilities. When there is safety and security in community based services and supports, people do better. Workers in the least desirable service setting - state-run institutions - are generally paid higher wages and receive better benefits than their counterparts providing highly valued community-based services and supports.

Organizations providing community-based supports must work within the constraints imposed by policies of state governments which establish the reimbursement rates for services available in the Medicaid program. Otherwise, the providers have to find sources of funding elsewhere, and while many do raise funds to pay staff, most find it difficult to do so for this public responsibility.

Representatives Lois Capps (D-CA) and Lee Terry (R-NE) introduced H.R. 1279, the Direct Support Professionals Fairness and Security Act. The bill would take important steps to ensure that direct support professionals are paid wages and benefits that enable them to stay in their jobs and provide the critical services that people with disabilities rely upon.

The direct support worker bill would amend the Medicaid program (Title XIX of the Social Security Act) to provide funds to States to enable them to increase the wages paid to targeted direct support professionals in providing services to individuals with disabilities. The program is designed as an option to states and would provide enhanced federal medical assistance percentage (FMAP) for five years to states to increase wages. It is designed to increase wages and eliminate the gap between wages paid to private employees and wages paid to public employees in the state.

In order to receive the enhanced FMAP, states would be required to submit a five-year plan and would have to assure continuation of the increased wage rate after the five-year period. The state plan must be developed in conjunction with individuals with disabilities and family members, private providers, and direct support professionals.

The bill targets the increased FMAP to cover direct support professionals working for private employers who provide supports and services to people with disabilities who are eligible for and receiving Medicaid under the following state plan services: personal care option for personal assistance; rehabilitation option for rehabilitation or habilitation; home health services; home and community-based services under Section 1915(c) or Section 1115 waivers; intermediate care facility services for persons with mental retardation and related conditions (ICFs/MR) and 1915(j) home and community based state plan option and the 1915 (i) self directed personal assistance state plan option.

The Administration and many in Congress are looking for ways to limit the Medicaid program. However, without enactment of this legislation, people with disabilities who need direct supports will continue to be made more vulnerable by the failure of the system to pay direct support professionals a decent wage with critical health care and other benefits

Action Taken by Congress and the Administration

H. R. 1279 was introduced in the House of Representatives on March 1, 2007 by Rep. Lois Capps (D-CA) and Rep. Lee Terry (R-NE). There are currently 113 cosponsors. A lead sponsor for the Senate bill has yet to be identified.

Recommendations

Disability advocates commend Representatives Capps and Terry for their leadership and commitment to ensuring that people with disabilities are not made more vulnerable by the failure of the system to pay direct support professionals a decent wage with critical health care and other benefits. Members of the 110th Congress who have not done so are urged to co-sponsor H.R. 1279.

Relevant Committees

Senate Finance Committee

House Energy and Commerce Committee (Subcommittee on Health)

For more information, please contact The Arc and United Cerebral Palsy Disability Policy Collaboration (202-783-2229), Association of University Centers on Disabilities (301-588-8252), American Association on Intellectual and Developmental Disabilities (202-387-1968), or National Association of Councils on Developmental Disabilities (703-739-4400).

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