


Homecare in Oregon: Past, Present, Future

Presentation to the House Committee on Early Childhood & Human
Services

November 6, 2023



**We envision an
Oregon where care
work is respected,
valued, that all
workers are treated
with dignity, and
everyone has
access to quality
care**

What will we cover?

- Background on the homecare program
- Why Oregon needs to modernize its systems
- How modernization will better serve consumers and workers so that Oregonians can continue to live in their communities

Medicaid Homecare

Who is served

- In home care for low income seniors and people with physical disabilities
- Support for activities of daily living such as personal hygiene, medication management, shopping, transportation, and more.
- To qualify:
 - Eligible for Medicaid
 - 65 or older OR 18+ with a qualifying physical disability
 - Limitations on assets
 - Able to direct one's own care or designate someone to do so

Two Main Options

- In Home Care Agencies (IHCAs)
 - Private agencies
 - Workers are employed by the agency
- Oregon Home Care Commission, or the "Consumer-Employer Provider Program"
 - State-run program
 - Workers are employed by the state for collective bargaining, otherwise directed by the consumer

We will be focusing on the Consumer Employed Provider Program

History of SEIU Homecare

From 2000 to 2023

Ballot Measure 99 (2000)

Voters passed the Quality Homecare Act in 2000 at nearly 63%

Historically, these workers were exempted from traditional protections (wage and hour)

Homecare workers got their first contract in 2003, getting health care, worker's comp

99

AMENDS CONSTITUTION: CREATES COMMISSION ENSURING QUALITY HOME CARE SERVICES FOR ELDERLY, DISABLED

RESULT OF "YES" VOTE: "Yes" vote creates commission ensuring quality home services for elderly, disabled receiving publicly-funded care.

RESULT OF "NO" VOTE: "No" vote rejects commission ensuring quality home services for elderly, disabled receiving publicly-funded care.

SUMMARY: Amends constitution. Creates nine-member commission ensuring high-quality home care services for elderly, disabled receiving publicly-funded personal care. Members appointed by Governor for three-year terms, confirmed by Senate. Commission would establish home care worker qualifications, registry; provide routine, emergency, respite referrals of qualified care providers; provide training opportunities. Clients

Who are these workers?

80% of the workforce are women

1 in 3 are people of color

Many are immigrants or refugees

1 in 4 are over age 55

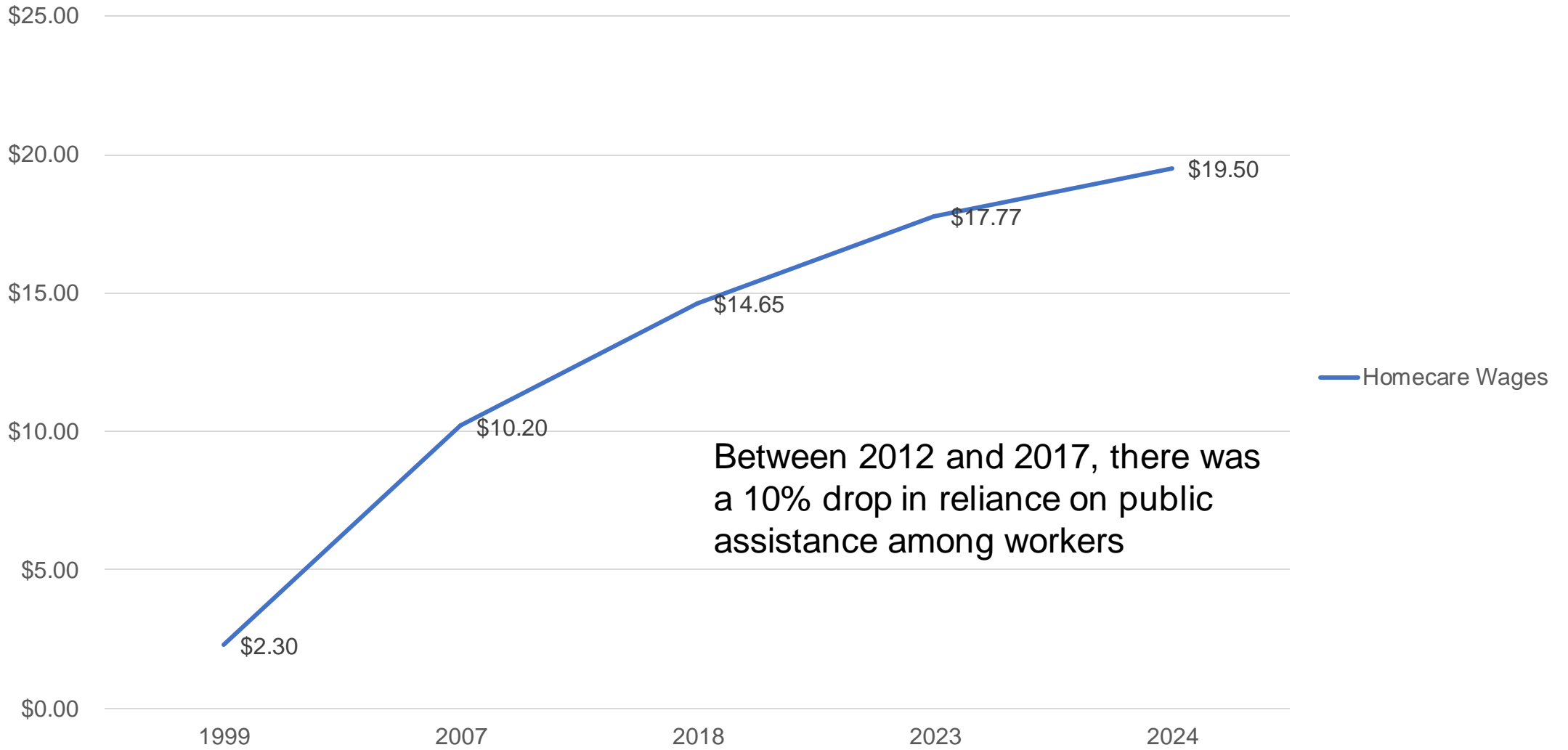
50% rely on public assistance

41% are at or below 200% of the FPL

Sources: PHI Report and SEIU 503 Surveys



Homecare Worker Wages



2003:
• Healthcare Coverage

2005:
• Dental, Vision Coverage

2011:
• PSWs became part of the union

2019:
• Retirement through Oregon Saves
• Training parity with private homecare

2017:
• Passed mandatory training standards

2013:
• Benefits Trust Established
• Paid time off added

2022:
• Passed Certification and Registry

2023:
• Holiday Pay
• Wage scales

The road to high quality jobs has been long but very transformative



What this has meant?

Beter care for Oregonians; Respect & Recognition; Access to training; Stability that has lifted families out of poverty

Lots of Progress but not
Meeting the Demand

LTC Workforce Crisis

- Improve wages and benefits
- Improve working conditions
- Career Pathways in Care Work
- High Quality Training
- More support for workers
- Recruitment and retention
- Give workers a voice
- Sector wide approaches
- Fiscal Transparency
- Data driven



Increasing Demand

Demand is expected to increase dramatically by 2030, with an estimated 10,000 more caregivers needed to meet demand in Oregon.

Due to high turnover, an aging workforce, and increasing demand, estimates show that we likely need to recruit, hire, and train closer to 65,000 more care providers to keep up.

Oregon is not ready.



Ongoing Challenges for Homecare System

Late & Partial Pay: Workers can't afford mistakes when living paycheck to paycheck

System Barriers: Ongoing challenges with hour tracking system. Legislature passed a bill in 2015 for a Universal Provider Number, still has not happened

Lack of Support: Respite is nearly impossible, case managers are having to manage consumer and workers

One Solution: Homecare Modernization

Client-Driven Services

- Families and consumers can focus on directing services, not being an employer

Good Jobs

- Workers will have access to support, coverage when they are sick, and face fewer issues with late pay

High Quality Care

- Strong standards will ensure that just like the OHCC, workers are trained to provide high-quality care

Increased Choice

- Families and workers will have another option to turn to for services and employment

Efficient Administration

- State relieved of program administration burdens
- Case managers focus on service coordination

What is "Agency with Choice"?

Federal Medicaid guidelines define Agency with Choice model, “whereby the participant is supported by an agency that functions as the common law employer of workers recruited by the participant. The participant directs the workers and is considered their co-employer. The agency performs financial management services and tasks, rather than the individual. The agency must hold a provider agreement with the state in order to submit billings and receive payments for the services furnished by workers”

Homecare Modernization: Proposal Details

- Directs Oregon to add “Agency with Choice” option to existing Medicaid program
- Directs ODHS to contract with 1-2 Agency with Choice providers
- Contractor Requirements:
 - Pro-worker policies
 - Good wages and benefits
 - Person-centered services
 - High quality standards
 - Recruit and retain adequate workforce
- Low administrative costs
- Robust Regulation and Oversight

Comparison of Current and Proposed Models

Current OHCC Model	Agency with Choice Option
Employer Roles	
<p>Joint employment relationship between OHCC and consumer. OHCC is not an employer in the traditional sense, but is the employer for purposes of collective bargaining.</p>	<p>Co-employment model. An agency is the common law employer of direct care worker and performs necessary payroll and human resources functions. Consumer is “Managing Employer” who selects, supervises, manages, and dismisses worker. Supports are available to assist the participant in conducting employer-related functions.</p>
Customer Service	
None	<p>Supports consumer with issues related to recruitment, retention, and managing workers.</p>
Backup plans	
Consumer responsibility	<p>Agency helps consumers with back up plans. Agency minimizes losses to workers when hours are reduced due to consumer factors.</p>

Comparison of Current and Proposed Models

Current OHCC Model	Agency with Choice Option
Timekeeping and Pay	
Homecare worker submits time worked through the ODHS Provider Time Capture system. Local offices manually enter hours. ODHS reviews hours and pays the homecare workers	Agency handles timekeeping and pays caregiver.
Human Resources	
None	Traditional HR Department
Role of Case Manager	
In addition to determining eligibility, assessments, and service coordination, case managers are responsible for administrative tasks, including onboarding paperwork, background checks, monitoring training of homecare worker, and manually approving time. And because basic supports are lacking, they end up taking on role in payroll issues and HR. Client Assessments, determines # of hours available to consumer, and other administrative tasks associated with workers	Focused on eligibility determinations, assessments, and service coordination

Homecare Modernization: Proposal Details



Additional Features:

- Prioritizes workforce recruitment and retention
- Incentives for matching consumers and caregivers
- Streamlines onboarding and enrollment of caregivers
- Builds Oregon's home care capacity

What stays the same?

- Consumers directing their care
- Worker training and certification requirements
- State oversight role

Problems with Current Model for Consumers

- Workforce shortage limits viability of self directing services
- 6,000 people without a caregiver now, and many more with unfilled hours
- Administrative burdens of serving as an employer
- Barriers to entry
- Slow onboarding
- Lack of coverage or respite
- Caregiver turnover due to frustrations with state system



Health, Economic, and Societal Costs of Unmet Needs

- Declining health and quality of life
- Reliance on unpaid labor
- Financial strain on household
- Moving to facility settings





Demographic Changes and the Silver Tsunami

- As Oregon's population ages, demand is increasing for all long term care settings statewide
- By 2030, state economists project that Oregon will have at least 27,000 more residents over 85, an increase of 33% from 2020 population levels
- According to the Oregon Employment Department, in 2022 there were more difficult-to-fill vacant positions for Personal Care Aides than for any other occupation in Oregon.⁸ At the same time, the demand for these jobs is growing, expected to increase by 26% between 2021 and 2031
- Of all long-term care options, Homecare is the most cost-effective, least restrictive, and has many safety benefits compared to other settings.
- In-home care maximizes consumer choice, control, dignity, and autonomy, and it keeps people in their own communities

Thank you

Questions?

Contact: Alice Miller, longleymillera@seiu503.org