Submitter: Jared Weekly

On Behalf Of:

Committee: Senate Committee On Rules

Measure, Appointment or Topic: SB1505

Chair Jama, Vice Chair Starr, and Members of the Rules Committee,

I originally sat down to write today to voice my opposition to Senate Bill 1505—not because I oppose its intents, but because I am concerned that it may ultimately do more harm than good. As I listened to testimony in the overflow rooms today, a consistent theme emerged on both sides: the significant investments made by the Legislature, and the ongoing debate about where those funds are actually going.

Proponents of the wage board have suggested that providers have absorbed recent legislative funding increases as profits, and that we have done so with little oversight. This is simply not the case.

Every recent rate increase from the Legislature has come with a clear directive to raise wages and benefits for DSPs, and our agency has done exactly that. Since 2019, our average DSP wage has increased over $4 per hour. During this same period, we have also absorbed dramatic increases in healthcare costs, yet we have continued to provide full health and dental coverage for employees, paying 100% of the premium, and instituted substantial bonuses directed only at direct care work. Our highest grossing DSP made over $67,000 in 2025 by covering bonus shifts and was our 6th highest paid employee, exceeding our managers, and some directors.

In addition, providers operate under significant financial oversight. Medicaid rules require that 100% of the funds we receive be used for the supports we provide, and 70% of those funds must go directly to direct support services. The remaining 30% is available for administrative costs. These requirements apply equally to nonprofit and for-profit providers.
What is often missing from the discussion around DSP wages is the growing financial burden providers face. Many of us operate complex organizations that require more than DSPs alone. We employ managers, billing and compliance specialists, operations staff, and HR professionals, medical staff. These positions need competitive pay as well. We maintain homes, vehicles, and agency infrastructure. Over the years, the state has reduced or eliminated programs like CIP, which once helped providers offset these costs. As these supports have disappeared, the burden has shifted entirely onto our budgets. Additionally, we must comply with laws such as increased minimum salary thresholds for exempt employees, another cost absorbed without corresponding rate relief.

These pressures steadily chip away at the rate increases the Legislature has provided.

What I hope you take away from my testimony is an appreciation for how complex this issue truly is. Yes, we absolutely need to invest in our workforce. And yes, not every dollar the Legislature has invested has gone directly to DSP wages and benefits (not towards profit either). But the underlying realities, withdrawal of state investments, increasing administrative demands, and funding providers at only 70% of the true cost of service, are simply not sustainable.

If the Legislature wishes to pursue policy that addresses these systemic issues, I welcome that. But creating a wage board to conduct yet another study, immediately after the completion of the previous one requested by the legislature and delaying meaningful action until 2029 will not solve the problems facing providers, DSPs, or those with developmental disabilities; nor will it stabilize the workforce our system relies on.

Thank you for your consideration.