Good day, Commissioner Johnson and members of the Department of Human Services. My name is Cathy Chin and I am here on behalf of ABCD. Thank you for this opportunity to share our thoughts as you begin deliberations on the proposed FY ’22 Budget. It means a lot to us to be a part of your process.

Commissioner, I was so pleased when during the budget hearings, Assemblyman McKeon framed the relatively low incidences of COVID among the population served by DDD as a “success story” and asked how you did it to which you graciously and accurately acknowledged the efforts of all.

- You immediately closed day programs and instituted an enhanced rate for residential settings to help cover additional staff needed to be in home 24/7 with 8000 individuals sheltering in place
- Your staff got to work crafting guidelines and advocating for resources while providing a never-ending stream of communication which to this day not only provides information but fosters community.
- Meanwhile in the trenches during the first 2 months
  - Day program nurses played a critical role in assessing, planning, educating, directing, and monitoring residential care. These nurses understood the needs of the I/DD. They helped alleviate the feelings of helplessness, fear and anxiety by supporting those in need and empowering those on staff. They saved lives.
  - Front line staff took enormous risks and often worked without protective gear while continuing to provide compassionate and quality care.
  - Providers spent millions with no guarantee of reimbursement on work force related costs and PPE supplies.
  - Managers handled the unchartered crisis with confidence and steadiness, projecting hope and strength while filling in for front line staff when needed.

We do not give up.

For FY’22 we ask your consideration in raising the rate for front line workers, supervisors and managers to ensure that they receive salaries commensurate with the value, care and professionalism they provide.

Before the rollout of the current system in 2014, concerns were raised about the viability of day programs which disproportionately serve individuals who due to medical or psychiatric issues, have high absenteeism rates. Because providers would only be paid when people are present and the rate included neither an absence nor nursing factor, these day programs ran the risk of being under-resourced. The solutions were:
• Over-enrollment. What happens on the day in which more people show up at the day program than there are slots available? Unlike an airline or a hotel, you cannot “bump” or “walk” an individual from their day program.

• Minimum attendance requirements. High absenteeism is due to chronic health or psychiatric conditions, fatigue or other side effects from medication or simply waiting for weeks to get a wheelchair repaired – the disability is the reason preventing regular attendance.

• Evaluate, in future, the options for how nursing services can most appropriately be provided.

The current rate does not cover the cost of providing services to those with chronic absenteeism. Because of these structural issues in the rate combined with the inherent imperfections in a market system, it is and will continue to fail this group of individuals who, if discharged from day program, will have few, if any, community options. In addition to our request for an across-the-board day program absence factor, can a mechanism, a reasonable accommodation be made for chronically absent individuals which would also include a nursing factor?

Support Coordinators have proved themselves valuable partners as evidenced by their continued delivery of excellent service during COVID 19 providing education, information, solutions, assistance and emotional support with minimal or no disruption to individuals and their families – proving that care coordination is too important to do poorly. Please consider correcting their current rate which is based on an education misclassification.

Poverty issues disproportionately impact people affected by disability. We ask you to consider policies and funding that ensure:

• Housing that is affordable and accessible and near employment centers. You can’t live in the community without a place to call home;

• Transportation to enable people to access jobs and programs and life in the community;

• Employment and supports for those most likely to be ready for employment and for individuals with significant developmental disabilities; and

• Food security so that people with disabilities may have a productive and healthy life.

Finally, that the state must establish a predictable level of spending on services for the intellectually and developmentally disabled in order to help ensure that services remain intact and providers are able to sustain their programs. Agencies are not exempt from employment and labor laws, licensing requirements and having a functional budget, and require resources to pay workers (who are, in effect, an indirect government workforce) fair wages and benefits, for infrastructure improvements and operational expenses. This investment will help to ensure that services remain intact and providers are able to sustain their programs throughout the state -- that this sector and the individuals they serve will continue to live and thrive in the community. We believe that it is incumbent upon State government to consider the full financial context in which the community provider operates. Please consider an annual COLA.