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Ohio Association of Area Agencies on Aging

1263 East Broad Street Columbus, OH 43205 (614) 481-3511 www.ohioaging.org @ 04aadvocacy

Remarks to Direct Care Workforce Expansion Working Group

Beth Kowalczyk, Chief Policy Officer Ohio Association of Area Agencies on Aging July 29, 2022

My name is Beth Kowalczyk and I am the Chief Policy Officer for the Ohio Association of Area Agencies on Aging. Thank you for inviting me to speak today. I appreciate your coming together across programs, populations, and departments as a working group to fully understand and address this important issue. We believe that now is the time to try out new ideas and innovative approaches to improve how our state supports us as we age. We are eager to continue working with the Departments of Aging and Medicaid to urgently address the direct care workforce shortage.

Older adults play vital, positive roles in our communities – as family members, friends, mentors, volunteers, civic leaders, members of the workforce, and more. Just as every person is unique, so too is how we age and how we choose to do it – and there is no "right" way. Policies that enable us to continue to be active members of our communities for as long as possible ultimately benefit all of us and make our communities stronger. We are all aging, and this is important to all of us.

Ohio's Area Agencies on Aging administer and provide care management for federal, state and local programs to provide home and community-based services to older adults and people with disabilities. These programs include:

- Department of Aging's PASSPORT waiver for individuals age 60 and older,
- MyCare Ohio, the state's dual-eligible Medicare-Medicaid demonstration program,
- Department of Medicaid's Ohio Home Care waiver for individuals under age 60,
- Older Americans Act supportive services for individuals age 60 and older, and
- Local levy programs.

The home and community-based system that we rely on to support older adults, people with disabilities, and family caregivers is strained because of a specific workforce shortage – personal care aides - that has been growing for many years and has only been exacerbated by the pandemic.

Personal care is assistance with activities of daily living (ADLs), which are basic activities necessary for independent living in the home, including personal hygiene, dressing, preparing food, transferring/mobility, and toilet care. Personal care services can also include homemaking, assisting with managing medications, and assistance with attending appointments. Personal care is essential care work that can enable older adults to thrive in our homes and communities as we age.

The Association has submitted several suggestions to the Working Group about how to better support personal care aides and streamline services. I have been asked to address submissions under Technology and Innovations. These suggestions are based on the expertise of the PASSPORT Administrative Agencies, the AAAs' MyCare Ohio staff, and staff administering Older Americans Act and levy programs that include personal care services.

We believe that increasing rates and wages are the most important aspects of addressing this workforce crisis, particularly for those who serve older adults where the rate are the lowest. We also acknowledge that the problem is a complex one, with other challenges that should be examined. I respect that the Working Group is choosing to separate out reimbursement rates and wages for separate discussion.

First, to be able to have a more complete picture of the workforce crisis, one of the most significant things this working group can do is consider how to collect the relevant data about the workforce across programs and populations.

Our AAAs currently do not have a formalized way to track the lack of services for enrolled and eligible individuals in all our programs, and so for some programs they have been relying on individual tracking mechanisms such as spreadsheets to approximate those who are unserved or underserved. The Ohio Home Care waiver case management system has an indicator of provider "pending" which means that the individual still needs services but there are no providers to provide them. We are currently working in partnership with the Ohio Department of Aging to identify ways to do something similar so that we can provide a better picture using the PASSPORT case management system, PIMS and the weekly enrollee waiver report. We need to develop standardized, consistent ways to track the issue.

I have reviewed different summaries of how other states are collecting data on their workforce. Colorado's EFMAP plan includes a project to expand data infrastructure to better understand the current supply and demand, and to track impact of strategies on recruitment, retention, and turnover. Texas requires providers to submit data on size, stability, and compensation of the workforce.

We have also suggested that the state create a statewide provider portal to improve referral efficiency and to track data on network/member needs. Most of the PAAs are currently emailing/faxing/calling in provider referrals making it difficult to track data and use an efficient method to communicate back and forth with providers. A statewide provider portal could be used for all providers (MyCare, all waivers, etc.) and could enable more real-time data on service workforce shortages.

An exciting innovation created out of necessity, the Council on Aging of Southwestern Ohio's AddnAide app is a secure digital platform where the employee/provider is matched with an older adult (the employer) who needs in-home care services based on user-created profiles. The Council on Aging found that it was difficult to identify individuals to provide services, and providers wanted to have flexibility to identify their employers. The app makes the employment process seamless and safe, allowing providers/aides to:

- Create a profile with information about their skills and availability.
- Work with the older adult/employer to create a schedule of care that works for both of them
- Communicate with the older adult/employer (and their caregivers) about schedule changes or any other issues that arise.
- Clock in and out on scheduled workdays and manage other payroll functions.
- Match with additional older adults (people who need care).
- Utilize optional training tools to help provide the best possible care.

The app was created to support the AAA's consumer direction levy program but can be scaled up for additional programs. Individuals receiving services in the program have a professional care manager who has assessed them and determined which services they need to live independently in their homes. For more information about AddnAide: https://home52.org/addnaide/aides

We also suggest that the state review and support standardized online training options, such as the Ohio Council on Home Care and Hospice Guided Training Program for Home Health Aides. The program is designed as a guided program for agencies to train and certify new Home Health Aides as efficiently as possible, with online and in person training as well as in person practical training. For more information:

https://members.ochch.org/files/OCHCH%20HHA%20Training%20Program%20Overview.pdf

I would also like to share two innovations that we have been discussing with the Department of Aging and the Department of Medicaid to address the immediate needs of older adults needing services to thrive in their homes. I have included project descriptions for each of these with my materials and we would be happy to discuss with you further at any time.

The first is a Provider Engagement Coach. When a potential provider displays interest in serving a waiver participant who wants to use self-direction, the time from initial interest to first day of paid service is too lengthy because the provider application process is cumbersome, and participants can find it difficult to identify and retain providers as a result. The potential aide decides not to follow through. The current process creates delays in services which could negatively impact the health and safety of participants during the delay.

The Association is proposing a modification of the Family Support Coordinator for PASSPORT and MyCare Ohio. We recommend that the state provide funding to support a new position at the AAAs aimed at provider recruitment and application coaching. The implementation and support of Provider Engagement Coaches would be expected to lead to an increase in providers certified to provide personal care, especially in self-direction, and expedite

services to participants, thus getting people care sooner, and lowering the risk of a health and safety-related issue. An AAA 2 pilot for self-direction in the levy program has had some initial early success in the most recent quarter with an average time from application to service start from 58 days to 30 days. We would propose that the state invest \$1 million for one year to support 13 Provider Engagement Coaches, one for each PAA in provider relations to staff this position for a year, which would include salary, benefits, supervisory costs, mileage, etc.

Our second idea is for Streamlined Housekeeping Service. Providers won't take referrals for homemaker services because of the low reimbursement rates and are prioritizing care of the person for as many people as possible over care of environment. We propose that the state consider outsourcing services like cleaning or laundry to alternative sources. The housekeeping service can be separate from the homemaker and home care attendant service so that it can be completed by a housekeeping type service agency or individual and not a home health agency.

To simplify access to immediate housekeeping services, we suggest that individuals be provided a monthly voucher or stipend that can be used with selected providers that have agreements with the PAAs. Training and supervision requirements should be minimized or waived depending on the situation. The state could set a cap for a certain amount (e.g. \$250 a month for a temporary period (w/in 6 -12 month period)), administered as a voucher for eligible clients. In January 2022, the AAAs identified an estimated 2000 individuals without personal care service in PASSPORT and MyCare. This idea could also be included in the Older Americans Act Title IIIB services as well as Ohio Home Care waiver services.

As you consider how to support the existing direct care workforce, and to expand it, please keep in mind the essential services provided by personal care aides to older Ohioans and people with disabilities in their homes. We have situations where individuals have transferred from one waiver, such as Ohio Home Care, to another, such as PASSPORT, and have lost their providers because of different rates and/or requirements. Other individuals have lost providers to the DD system, which pays higher rates. We are not only competing for workers with Amazon distribution centers, fast food and other service jobs, but within our own system of long-term care — where PASSPORT workers earn the least compared to nursing facility and DODD direct care workers.

Services for older adults and people with disabilities are no less critical than services provided to those in the DD system or nursing facilities. We need to bring parity to the level of attention and investment for older Ohioans and Ohioans with disabilities who are served in their homes and communities. We are all aging, and we are fortunate to be living longer. What will be in place when we need it most?

Ohio's older adults are feeling the effects of the nationwide home health aide workforce crisis. There are not enough aides to serve clients currently enrolled in state and locally-funded in-home care programs, much less meet the demand created by the growing population of older adults and people with disabilities who will need care in the near future. In fact, statewide, over 6,000 individuals enrolled in state home care programs are currently going without care.

home52, a subsidiary of Council on Aging, has developed a solution that addresses these issues by:

- expanding opportunities for older adults to participate in self-directed care
- creating a safe, secure environment to connect individuals who provide care with those who need it
- addressing all facets of the aide shortage, from recruiting new workers to offering opportunities for education
- leveraging a cost-effective and streamlined model for care
- creating a fully-connected care team



What is AddnAide and how will it help?

AddnAide is an app, accessible via the Google Play Store or <u>addnaide.home52.org</u>. It's an enhancement of the self-directed care model, offering a secure space where older adults who need in-home care can match with available aides.

In AddnAide, older adults and aides create personalized profiles to improve the matching process. Profiles highlight care needs, caregiving skills and schedule preferences, giving older adults and aides more control of the caregiving relationship. A professional care manager monitors care, and all payroll and time management functions are managed within the app, cutting down on paperwork for all parties.

Most importantly, AddnAide will expand the pool of individuals available to serve older adults who need care. Based on successful gig-economy models used by companies like Uber, AddnAide is ideal for individuals who want flexibility in their work schedule, such as stay-at-home parents, retirees, those with other employment, and students. It's also ideal for community-minded individuals who want to give back while supplementing their income.

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Provider Engagement Coach o4a Workforce Proposal March 2022, Updated May 2022

Problem Statement: There is an insufficient number of home care aides who can meet the personal care and homemaker needs of current waiver participants in PASSPORT and MyCare Ohio. When a potential provider displays interest in serving a waiver participant, the time from initial interest to first day of paid service is too lengthy because the provider application process is cumbersome and participants can find it difficult to identify and retain providers as a result. There are times the potential aide decides not to follow through. The current process creates delays in services which could negatively impact the health and safety of participants during the delay.

Business Case:

The Arc of Ohio has found success with a Family Choice Model to provide individuals with intellectual and developmental disabilities as well as their families another option to access Homemaker/Personal Care (HPC) services in Ohio through the SELF, Level 1, and IO DODD waivers. This includes a new role, Family Support Coordinator, that supports individuals by paying for the individual or a family member to recruit, select and hiring support service workers, determining duties and work schedules, monitoring waiver budget expenditures, and training, supervising and reviewing performance of support workers.

O4a is proposing a variation of this idea for PASSPORT and MyCare Ohio. We recommend that the state provide funding to support a new position aimed at provider recruitment and application coaching (see attached). The localized family support that the Arc supports is something that could build the capacity of self-direction in PASSPORT and MyCare Ohio. The implementation and support of Provider Engagement Coaches (see proposed job description) would be expected to lead to an increase in providers certified to provide personal care, and expedite services to participants, thus getting people care sooner, and lowering the risk of a health and safety-related issue.

Goal Statement/Financial impact:

- Increase the amount of certified direct care workers who move from initial interest to first day of paid services to participants, especially with the self-directed option.
- Decrease the number of days it takes for providers to be located and certified. An AAA 2 pilot for participant direction has some initial early success in the most recent quarter with an average time from application to service start from 58 days to 30 days.

Cost: Updated Proposal: \$1 million for one year. Salary estimated is \$40,000 for each PAA in provider relations to staff this position for a year, plus benefits, supervisory costs, mileage, etc.

Proposed Job Description Attached

JOB DESCRIPTION

JOB TITLE: Provider Engagement Coach

PRIMARY FUNCTION: To link, assist & coach participants and non-agency providers to

successful certification and timely delivery of home and

community-based services.

Essential Job Functions and Responsibilities:

Procurement and Provider Certification:

• Recruit and assist in the selection of providers.

- Assist and prepare applications for certification processes and FMS processes.
- Inform, educate and coach participants with the certification requirements for non-agency and participant directed services.
- Inform, educate and assist providers with certification requirements and assist in the completion of all necessary requirements if not met.
- Provide linkage to required training resources.
- Coach participant and review database eligibility and assist with background check screening.
- Assist and facilitate deeming of non-agency providers across waivers for seamless service delivery to participant.
- Facilitate complete certification process for providers in a timely manner in accordance with funder requirements for certification.
- Coach participant and assist to plan and develop work schedule, duties and rates.

Communication and Relationship Management

- Coach, facilitate certification and direct participants for timely implementation of services.
- Plans, directs development and communicates as liaison of information for providers.
- Outreach to family members, informal supports or community organizations to identify potential caregivers.
- Possess a comprehensive understanding of systems and services related to provider administration/operations as well as strong knowledge of AAAs programs and services.
- Responsible for problem solving, report preparation and development of effective strategies for provider development.
- Collaborates with internal staff as necessary to ensure that appropriate applications are processed, contracts are executed, and all providers are credentialed in a timely manner.
- Initiates responses to participant and provider requests or needs.
- Conducts on-site provider/participant education, orientations, and provider/participant visits to ensure providers & participants are well-acquainted with policies, and procedures.
- Develop, track and provide listing of credentialed providers to participants to expand options of non-agency providers.
- Facilitate and assist with transfers between waivers, ie. OHCW, PASSPORT, or Mycare to alleviate gaps in service delivery.

Qualification Requirements:

- Minimum Associate degree required, Bachelor's degree preferred (additional equivalent experience may be substituted).
- At least 1 year working in a human service field.

- Strong customer service skills to provide support to participants and guide decision making.
- Knowledge of community resources and networks to identify potential caregivers.
- Strong recruitment skills to link and support potential caregivers to participants.
- Ability to build and maintain collaborative relationships.
- Strong communication skills.
- Strong analytical and problem-solving skills.
- Superior skills with MS Word, PowerPoint and MS Excel software.
- Effective negotiation skills.
- Knowledge of aging network and ability to apply knowledge effectively to service participants and providers and identify potential gaps in service.
- Comprehensive understanding of systems and services related to provider administration/operations.
- Strong customer service skills with ability to handle escalated participant/provider issues and provide consultation to office staff.

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Streamlined Housekeeping Service o4a Workforce Proposal March 2022, Updated May 2022

Problem Statement: There are an insufficient number of home care aides who can meet the personal care, homemaker and home care attendant needs of current waiver participants in PASSPORT and MyCare Ohio. Individuals are waiting from months to up to two years for services. Providers won't take referrals for homemaker services because of the low reimbursement rates and are prioritizing care of the person for as many people as possible over care of environment.

Business Case: The state should consider outsourcing a limited number of components of these services like cleaning or laundry to alternate sources. The housekeeping service can be separate from the homemaker and home care attendant service so that it can be completed by a housekeeping type service agency or individual and not a home health agency. Barriers to certification such as training and supervision requirements should be temporarily minimized for this service. Maid services are more readily accessible, but PASSPORT and MyCare participants are unable to access the service because of the lack of individuals willing to provide the service due to low pay rates and burdensome requirements.

O4a is proposing two ways to provide immediate housekeeping services outside of the traditional homemaker and home care attendant waiver services: contract with a cleaning service through an RFP process and provide stipends or vouchers to individuals to pay for cleaning through participant direction. Training and supervision requirements should be minimized or waived depending on the situation.

Goal Statement/Financial impact:

- Provide immediate access to cleaning and laundry services to individuals who are not receiving homemaker services and have an identified need.
- Reduce the requirements to be certified to provide the service.

Cost: Updated Proposal – Set a cap of \$250 a month for a temporary period (w/in 6 -12 month period), administered as a voucher for eligible clients. In January 2022, the AAAs identified an estimated 4000 individuals without personal care service, so these individuals could be the initial candidates for this service. This could be in MyCare or PASSPORT, or perhaps even OAA.

Proposed Project Description Attached

PROJECT DESCRIPTION

PROJECT Streamlined Housekeeping and Laundry Service

PRIMARY FUNCTION: To fill an immediate need for housekeeping for participants who are

unable to obtain homemaker or home care attendant services due to the workforce shortage and existing homemaker and home care attendant

rules and reimbursement rates.

SERVICES: Laundry, including folding, ironing, and putting away laundry.

House cleaning including dusting furniture, sweeping, vacuuming, and mopping floors; kitchen care including dishes, appliances, and counters; bathroom care; changing bed linens; washing inside windows within

reach from the floor; and removing trash.

PROVIDERS: Two options:

Contract with cleaning and laundry services directly.

Provide voucher or stipend for cleaning and laundry services outside
of the budget and as a separate service for consumer direction
participants. Assist participants in identifying an individual or entity
that could provide the pended consist.

that could provide the needed service.

 Updated: O4a has landed on this second option for all consumers. The AAAs could identify providers/agencies that would participate.

CONSIDERATIONS:

- This service is temporary but could be evaluated for permanent adoption.
- Pay needs to be competitive and per job (not per 15 minutes unit)
- Training should be limited to that specifically needed to perform the service..
- Agencies and individuals could provide service during evenings and weekends. Home care providers generally do not provide services at these times.
- Housekeeping agencies typically are bonded and insured and do own background checks. Individuals (e.g. friends, neighbors or others) who would be willing to provide the service should have a streamlined certification.
- Supervision requirements set forth in the OAC should be waived. Mitigation of risk and monitoring of service can occur with engagement of the participant and case manager.
- Minimize training requirements, include requirement for CEUs. Area Agency on Aging can
 provide a streamlined training program for interaction with participants.
- Only require the necessary actions to minimize reporting and tracking. Contract with the agency or the individual to provide the service.

OTHER SUGGESTIONS:

- Allow AAAs to contract with their own staff to provide this service.
- Payment for annual Kroger Boost (or similar) membership to allow consumers access to grocery delivery. This would eliminate the need for an aide to go to the store for a consumer.