



**Survival
Coalition**

of Wisconsin Disability Organizations

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People with disabilities and older adults can't wait: state budget committee makes some critical investments, not others

The Wisconsin Joint Finance Committee's (JFC) actions yesterday in considering the Department of Health Services budget show they have begun to listen statewide to the overwhelming numbers who are struggling to find adequate care to remain in their homes by beginning to acknowledge the depth and critical nature of Wisconsin's workforce crisis.

JFC approved a 9% increase to the Medicaid Personal Care Services rate in 2019 and an additional 3% increase for 2020. In 2017, the average wage for personal care workers in Wisconsin was \$11.03 per hour. Increases to the overall rate will result in modest increase in worker wages, up to an additional \$1.35 per hour for workers by the end of the biennium.

JFC also significantly increased the Family Care Direct Care funding supplement which will allow provider agencies to apply for funding to enhance direct care worker wages, bonuses, or other compensation for workers. In addition to including the base funding from the 2017-19 budget, JFC added more than \$66.5 million in new dollars for the supplement fund and it added an additional \$125,000 annually in respite care funding to help family caregivers.

Survival Coalition is disappointed that the 18,000 people with disabilities and older adults in the IRIS program have not received equivalent funding support as Family Care participants to support recruitment and retention of high-quality workers.

While we appreciate the acknowledgement of the essential services direct and personal care workers provide to people with disabilities and older adults that help them stay in their homes and out of expensive Medicaid-funded institutions, low wages are only one factor that make recruitment and retention of quality workers difficult. A modest increase in worker wages is not sufficient to address Wisconsin's workforce crisis.

Survival Coalition looks forward to the Governor's Task Force in further exploring comprehensive solutions that meet the needs of both people needing care and the workers providing those critical supports.

Survival Coalition urges the State Senate and Assembly to explore of the benefits of Medicaid expansion in addressing the workforce shortage and other critical needs facing the disability community

Workforce Crisis

Lack of benefits—including health insurance, paid sick and family leave, retirement, dependent care, commuter benefits etc.—career advancement opportunities, training, and support are all factors that impact the recruitment and retention of quality caregivers.

Expanding Medicaid is an opportunity to extend a quality health insurance benefit to the lowest wage workers who support older adults and people with disabilities in Family Care and IRIS. An estimated 30% of Wisconsin's paid caregiving workforce is already in BadgerCare, as are many family caregivers who reduced hours or left the workforce to take care of aging adults and people with disabilities.

“Our analysis finds that increasing the amount a worker can earn to 138% of the Federal Poverty Level (FPL) would result in the 30% paid caregivers already in BadgerCare being able to work an additional 457 hours annually (or an extra shift per week) without losing their BadgerCare health insurance. Collectively, that translates into millions more hours of caregiving for Family Care and IRIS participants,” said Beth Swedeen, Survival Coalition Co-Chair. “Expanding Medicaid would allow an estimated additional 8,000 paid caregivers to have critical health insurance, helping to increase direct care worker retention.”

Dental Care access

JFC partially funded the Governor's proposal that set aside a dedicated pot of money for dentists who serve Medicaid recipients with physical or intellectual disabilities. JFC approved a total of \$2.5M, half of the Governor's original proposal.

“Access to regular dental care is a big problem for people with disabilities,” said Lisa Pugh, Survival Coalition Co-chair. “29% of adults with disabilities have had at least one permanent tooth removed over the past year, 26% have not been to a dentist in the past year. Many can only visit a dentist when something is wrong or causing pain/other health impacts, and often they may have to wait weeks or months for an appointment even in these situations.”

The Joint Finance Committee did not approve proposed increases to the Medicaid reimbursement rates for dentist providing services to Medicaid recipients.

Last month, JFC removed a provision from the budget that would have allowed dental therapists to perform additional services and would have expanded access to dental services to Medicaid recipients.

Children's Long-Term Supports

JFC approved funding to serve children with disabilities who are currently waiting for services and who are already in the program, but it did not include a provision that no child will ever again need to wait for services.

More than 1,000 Wisconsin children are currently on waiting lists for the Children's Long-Term Supports waiver program.

“If there are more children who need services than the amount of funding approved, we could once again see kids on waiting lists,” said Kit Kerschensteiner, Survival Coalition Co-Chair. “Immediate access to waiver supports and services ensures that kids have the maximum amount of time to benefit from therapies and services that help develop physical functionality and daily living skills.”

JFC approved \$3.1 million to fund intake, application and screening costs for children’s long-term care services, subject to a future review and approval by the committee.

JFC did not fund proposal that would have established a children’s ombudsman program, resource centers, and staff that would have to help families navigate through a complex system.

Mental Health

JFC approved increased reimbursement for crisis intervention services, which will help counties develop local resources and limit the role of law enforcement in responding to a mental health crisis and reduce reliance on more costly and traumatizing services.

JFC increased the reimbursement rate for mental health, behavioral health, and psychiatric services provided by physicians, by \$5 million per year--subject to a future review and approval by the committee. This increase is significantly lower than the level proposed by the Governor.

JFC did not fund the regional stabilization facility grant program.

“In 2018, over 3,000 people experiencing a mental health crisis were transported from their community to Winnebago Mental Health Institute, far away from their support network and their mental health providers. This process is traumatizing for the person in crisis, costly, time consuming, and is a major drain on law enforcement resources,” said Kit Kerschensteiner, Survival Coalition Co-Chair. “Regional centers will ultimately reduce the need for people in crisis to be transported across the state to Winnebago Mental Health Institute, and will allow them to receive assistance closer to their community.”