

January 27, 2021

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Charles Schumer
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Robert C. “Bobby” Scott
Chairman, Committee on Education and Labor
U.S. House of Representatives
Washington, DC 20515

The Honorable Bernie Sanders
Chairman, Budget Committee
U.S. Senate
Washington, DC 20510

Dear Speaker Pelosi, Leader Schumer, Chairman Scott and Chairman Sanders:

On behalf of the Partnership for Medicaid Home-Based Care (PMHC), we would like to bring to your attention a critical concern that needs immediate Congressional action related to raising the wages and standard of living of the home care workforce. PMHC strongly supports policy reform that recognizes and protects this dedicated workforce.

At present, however, inadequate Medicaid rates prevent these professionals from receiving compensation commensurate with the value they produce for our nation with the majority earning just above current state minimum wage levels. As you debate increasing the federal minimum wage to \$15 per hour, we urge you to incorporate a requirement that state Medicaid programs at least match the federal minimum wage increase with corresponding reimbursement rate increases for Medicaid home and community-based services (HCBS).

There are over three million frontline home care workers delivering high-quality, cost-effective Medicaid HCBS services to millions of seniors and individuals with disabilities. Throughout the COVID-19 pandemic, home care workers continue to reduce the risk of COVID-19 infection by providing essential health sustaining long-term supports and services to at-risk Americans safely in their homes.

Home care workers are predominately female (87%), people of color (62%), immigrants (31%), over the age of 55 (32%), and nearly half live in low-income households. Forty-three percent of home care workers rely on public health care coverage, such as Medicaid, and 16% are uninsured.¹

¹ PHI, Direct Care Workers in the United States: Key Facts, September 8, 2020.

The home care workforce consists of personal care aides and home health aides.

- Personal care aides, also referred to as personal care attendants are home care workers “who assist with activities of daily living (ADLs) and/or instrumental activities of daily living (IADLs), and who may also support individuals with employment and other aspects of community and social engagement. Personal care aides are employed either by a home care agency or directly by a consumer or consumer’s family.”²
- Home health aides are home care workers “who assist consumers with activities of daily living (ADLs) and instrumental activities of daily living (IADLs), and who may also perform certain clinical tasks under the supervision of a licensed clinical professional. In the home care context, nursing assistants may fulfill the same duties as home health aides.”³

PMHC supports the Biden Administration’s goal of expanding access to home and community-based services by removing the institutional bias within the Medicaid law and regulations. However, without a robust home care workforce that is compensated at the appropriate level of wages reflecting the health care services being delivered, the goal of increasing access to Medicaid HCBS will fail.

If the minimum wage is increased yet there is a failure to require states to increase reimbursement rates for personal care services covered under Medicaid HCBS programs, it will further limit both access to care delivery and significantly limit Medicaid HCBS providers’ ability to recruit home care workers into the healthcare workforce.

The home care workforce deserves compensation that reflects the tremendous human, clinical, and fiscal value of the care they provide every day. When compared to other health care workers, home care aides’ visits are more frequent, longer in duration, and very intimate by nature of the assistance being delivered. Although it goes unmeasured due to the existing silos of healthcare expense between Medicare and Medicaid, it is widely recognized that care provided by home care aides leads to significant reductions in hospitalization, emergency room visits and other costly care interventions that would otherwise be borne by the Medicare Program.

The members of PMHC represent home care agencies, state home care associations, managed care organizations and other payers, and business affiliates who have come together to improve the quality and integrity of Medicaid funded home and community-based services (HCBS). Recognizing the integral role of HCBS, PMHC is dedicated to advancing and supporting public policies that strengthen the Medicaid program.

² PHI, *Envisioning the Future of Home Care: Trends and Opportunities in Workforce Policy and Practice*, October 15, 2019, 2.

³ *Ibid.*

We stand ready to assist Congress in developing policy proposal that will benefit and increase the wages of the home care workforce that America relies on to be cared for safely at home.

Thank you for your leadership and consideration of our request. PMHC welcomes the opportunity to serve as a resource to Congress. If you have any additional questions or would like to discuss our proposal in more details, please contact Stacey Smith at (202) 742-5274 or ssmith@medicaidpartners.org.

Sincerely,

A handwritten signature in black ink, appearing to read "David J. Totaro". The signature is fluid and cursive, with the first name "David" being the most prominent.

David J. Totaro
Chairman

cc: The Honorable John Yarmuth, Chairman, House Committee on the Budget
The Honorable Ron Wyden, Chairman, Senate Committee on Finance
The Honorable Frank Pallone, Chairman, House Committee on Energy & Commerce