Direct Service Workforce Intensive







State of the Direct Service Workforce







The Basics

Majority Women

- 85% women
- 15% men

Majority Minority

- 27% Black or African American
- 23% Hispanic or Latino
- 9% Asian or Pacific Islander

Older Workforce

45% between the ages of 45 and 64

Many are Immigrants

• 31% of the home care workforce

Chart Source: The percentages shown in the race and ethnicity figure do not total 100 percent because they are rounded to the nearest whole percentage. Ruggles, Steven, Sarah Flood, Ronald Goeken, Megan Schouweiler and Matthew Sobek. 2022. IPUMS USA: Version 12.0. https://doi.org/10.18128/D010. V12.0: analysis by PHI (June 2022).

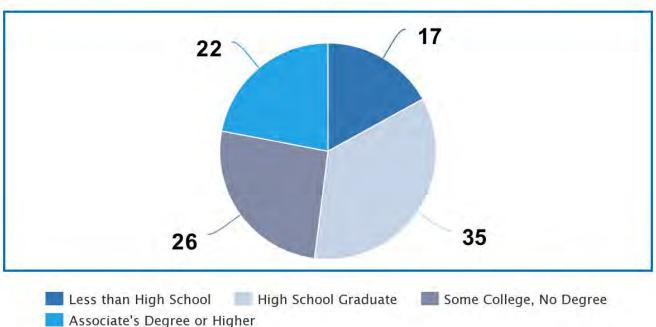
To help illustrate...





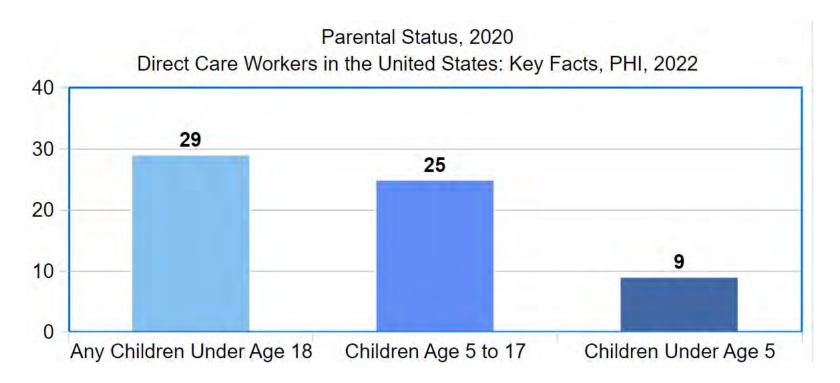
Home care workers – More Stats

Educational Attainment, 2020
Direct Care Workers in the United States: Key Facts, 2022, PHI





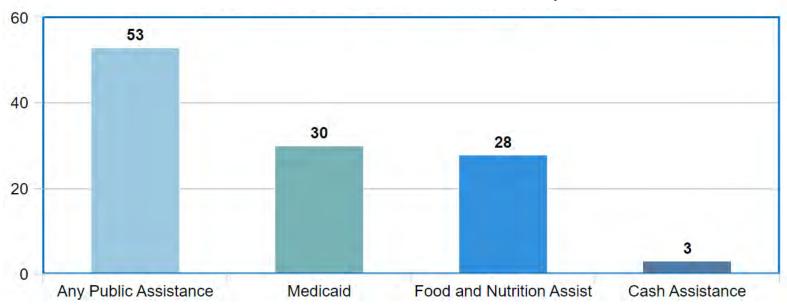
Home care workers – More Stats



• Chart Source: Ruggles, Steven, Sarah Flood, Ronald Goeken, Megan Schouweiler and Matthew Sobek. 2022. IPUMS USA: Version 12.0. https://doi.org/10.18128/D010.V12.0; analysis by PHI (June 2022).

Home care workers – More Stats

Accessing Public Assistance, 2020
Direct Care Workers in the United States: Key Facts, PHI, 2022



• Chart Source: Ruggles, Steven, Sarah Flood, Ronald Goeken, Megan Schouweiler and Matthew Sobek. 2022. IPUMS USA: Version 12.0. https://doi.org/10.18128/D010.V12.0; analysis by PHI (June 2022).

2021 Survey of HCBS Agencies:

- 77% have turned away new referrals
- 58% have discontinued certain programs or services
- 84% have delayed programs due to staffing shortages (ANCOR 2021).

https://www.macpac.gov/wp-content/uploads/2022/03/MACPAC-brief-on-HCBS-workforce.pdf



2021 NCI-IDD State of the Workforce Survey Report

- 29 participating states and 3,838 provider agencies included in the report
- Weighted average turnover ratio was roughly 43%
- Of the DSPs who left employment in 2021, 56% had been employed less than 12 months
- Average ratio of 10 DSPs to 1 frontline supervisor

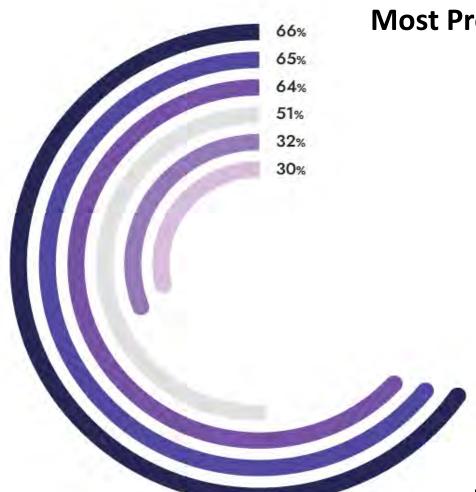




Reasons for Retention Issues

- Low pay, minimal benefits, if any
- Feeling unprepared; lack of training
- Limited support, respect, recognition
- Gender and racial inequities
- Injuries on the job





Most Preferred Methods of Recognition

- Provide professional development opportunities
- Provide new leadership/career opportunities
- Private recognition directly from my supervisor
- Offer a reward (e.g., gift cards)
- Public recognition in front of my organization/CEO
- Public recognition in front of my team

https://www.relias.com/resource/dsp-survey-report



ADvancing States Initiatives



DSW Initiatives in ARPA Spend Plans

 Public awareness and marketing campaigns to attract new workers

- Providing training
- Focusing on workforce wellness
- Offering internship opportunities
- Environmental scans
- Transportation
- Development of mentoring/peer support programs



ARPA Analysis





Job Postings & Auto Match

• Providers and those self-directing can create job posts and be automatched

Trainings

• A portal to add, manage, or recommend trainings for workers

Candidate Profiles

Workers can create and maintain a profile page

Reports

• States can self-generate reports whenever needed

Credentialing Repository

• Take trainings recommended by the state, obtain certificates, renew annually





Employers a way to efficiently post job descriptions and fill staffing gaps quickly through automatching capabilities



States with actionable data about workforce needs and the ability to communicate directly with providers and workers

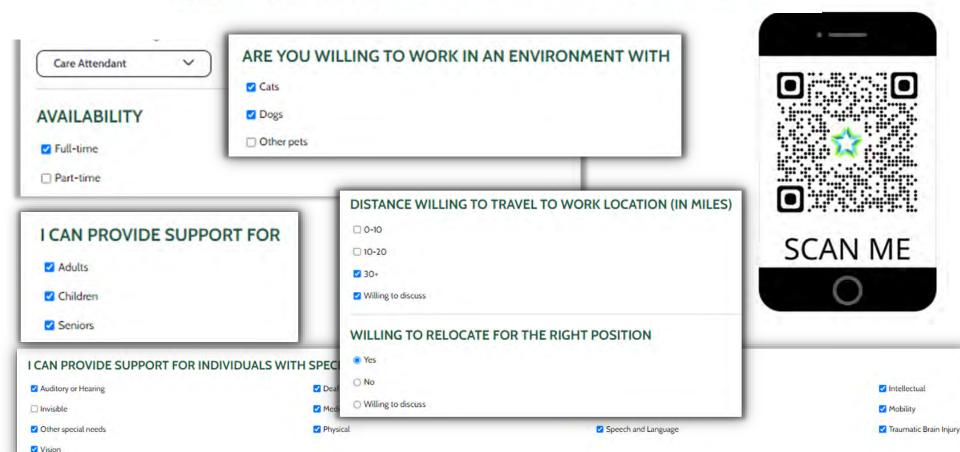


Employees/Candidates with a way to find and apply for jobs, connect to and communicate with various employers, verify certification, and obtain more education and/or credentials in one platform









State of the Workforce Survey – Aging and Disabilities

Measures key workforce data within aging and physical disabilities systems

Information comes from provider agencies

Aggregated data is available by state once the data collection period has ended

Annual report posted

Sister survey: https://idd.nationalcoreindicators.org/staff-providers/





SoTW-AD Topics Included

Demographics of state DSW workforce

Information on providers in the state (ex: size, number of people served)

DSW turnover rates

Length of DSW employment

Vacancy rates

Hourly wages

Benefits

Recruitment and retention strategies

States may add 10 of their own questions





ADvancing the Workforce State Collaborative

- We are better together!
- How are your ARPA initiatives going?
- Hear from other states about their strategies to address the workforce crisis
- Share what's working in your state and ask questions of your fellow ADvancing States members







Collaboratively Engaging with Direct Service Workers



Indiana's Direct Service Workforce Plan

2023 HCBS Conference Direct Service Workforce Intensive

Peggy Welch, Chief Advocacy Officer
Indiana Family and Social Services Administration

Thursday, August 31, 2023



Presentation Agenda

1. Long-term Services and Supports Reform in Indiana

2. Indiana Direct Service Workforce Plan

3. Indiana's Direct Service Workforce Advisory Board



Why Reform Indiana's Long-Term Services and Supports System?

Drivers:

- From 2010 to 2030 the proportion of Hoosiers ages >65 will grow from 13% to 20%.
- Indiana recognized the need to reform its LTSS system to meet growing demand for personcentered, home and community-based services (HCBS) and to ensure <u>choice</u>, drive <u>quality</u>, and manage <u>cost</u>.

Overall Objectives:

- 75% of new LTSS members will live and receive services in a home and community-based setting
- Faster eligibility
- Move to managed LTSS (now "Indiana PathWays for Aging") in early 2024
- Pay for outcomes, not transactions
- Integrate LTSS data systems
- Recruit, train, support, and retain HCBS direct service workforce
- Create "Home Health Roadmap"
- Integrate Section 1915(c) Medicaid HCBS waivers



Indiana PathWays for Aging and Direct Service Workforce Plan Milestones

2021 — Design Program and Procure Health Plans ('21-'22)

- Co-designed program with stakeholders over the course of a year to release an RFP in June 2022. Health
 plans bid on the RFP for a contract with the state through a competitive process facilitated by the Indiana
 Department of Administration.
- FSSA engaged ADvancing States and Bowen Center for Health Workforce Research and Policy and began developing the Indiana Direct Service Workforce Plan.

2022 — Implementation and Readiness ('22)

FSSA conducted systematic review of staffing, policies, processes, documents, subcontracts, system
capabilities and provider network to ensure state and health plans were ready for the program launch.

2023 — Award Health Plan Contracts and Onboard ('23-'24)

- Recommended managed care entities announced in April 2023
- Continuing readiness review activities to ensure state and health plans are ready for the PathWays for Aging program launch

2024 — Health Plans Contracts Signed ('24)

Contracts will be finalized in early 2024 with plans which complete readiness

Program Go-Live ('24)

• Program will launch in summer 2024



Indiana's Direct Service Workforce Plan: Vision, Partners, and Priorities

Indiana's Vision:

• Create and implement a data-driven, community-informed, statewide plan—the Indiana Direct Service Workforce Plan—to improve the recruitment, training, support and retention of direct service workers across home and community-based settings.

Partners for Impact:

- Direct Service Workforce Advisory Board Members
- State Departments (e.g., Health), Agencies (e.g., Disability and Rehabilitative Services), and Offices (e.g., Communications)
- Managed Care Entities' Workforce Development Administrators
- Consultants
- Diverse array of stakeholders (e.g., advocates, provider agencies, academic researchers)

Priorities:

- Equitable access to person-centered services and supports for direct service workers
- High-touch and coordinated transitions across employers and community-based settings



Indiana's Direct Service Workforce Plan: Key Results

Key Result #1: Recruit

- Launch statewide marketing campaign, including development of a multi-purpose hub
- Work with the finance team to ensure that direct service worker rates and wage and benefits efforts are competitive with other employers
- Coordinate and align recruiting efforts with the four recommended managed care entities (MCEs)

Key Result #2: Train, Support, and Retain

- Develop career lattice and ladders and training/micro-credentials/macro-credentials
- Standardize core competency training that allows for portability
- · Address benefits cliff
- Develop worker-centered opportunities for job satisfaction and success with different types supports
- Simplify/standardize/refine direct service worker scopes of work
- Coordinate and align retainment strategy efforts with the four recommended MCEs

Key Result #3: Data Strategy

- Develop comprehensive data system dedicated to direct service workforce
- Coordinate and align data strategy efforts with the four recommended MCEs



Indiana's Direct Service Workforce Plan: Workgroups

Action Areas and Workgroups:

- 1. Training and Pathways definition; roles; training core competencies; and direct service worker registry (legislative mandate)
- 2. Wages and Benefits Medicaid HCBS provider rate increase; investment of ARPA funds in the form of grants to providers with allocation and reporting recruitments
- 3. Promotion and Planning statewide, multimedia campaign; eventual resource hub for direct service workers, providers, and consumers
- 4. Data Strategy comprehensive, robust data strategy to track direct service worker demographics, training and employment status, and workforce trends
- 5. Untapped Pools of Direct Service Workers workforce development pipeline to include persons with disabilities, immigrants, retirees, and former family/informal caregivers
- 6. Benefits Cliff ongoing access to needed benefits and social supports in context of reimbursement increases



Indiana's Direct Service Workforce Plan Reports

INDIANA DIRECT SERVICE WORKFORCE PLAN

Introduction



The Indiana Family and Social Services Administration is committed to individuals living in their community of choice and being supported to achieve their vision of an active life of their own design. To achieve this comminment, a diverse, stable and well-trained workforce is essential to providing quality person-centered services and supports. We recognize investment in this workforce—our direct service workers—is essential to the objective to serve more Hoosiers in their homes and communities.

These DSWs include certified nursing assistants, home health aides, direct support professionals, personal care aides and other non-licensed personale. This work force is historically understaffed in Indiana and across the nation. The ongoing challenges of low wages and the intense demands of these occupations were brought to light more so during the COVID-19 nandemic.

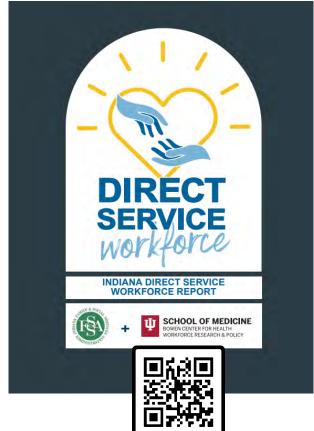
The need for these workers will only increase as Indiana's aging population continues to grow and persons with disabilities live more independently, resulting in an increased demand for home- and community-based services.

To better understand the HCBS landscape, FSSA has been intently engaging for several years with individuals with lived experiences. This includes hosting more than 70 listening sessions with individuals and families supported through the Division of Disability and Rehabilitative Services and the Division of Aging, Feedback from these sessions clearly pointed to the desire of individuals to be supported in living a life of their own design, with the support of a Direct Service Workforce to help them realize their goals.

Using this feedback as a centering principle, FSSA began a more focused effort in 2021 to study the Direct Service Workforce shortage so that the state is best positioned in the coming years, especially as managed long-term services and supports is implemented in 2024. The effort has included direct input from individuals with lived experiences, DSWs and other stakeholders, and engaging the Indiana Unive.

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Indiana's Direct Service Workforce Advisory Board

- Who: Seventeen (17) direct service workers who come alongside of older adults and people with disabilities to work and live where they want, including individual homes, assisted living facilities, and group homes. Members were selected through a competitive application process and are compensated for their participation.
- What: Examples of what FSSA wants and needs to learn from direct service workers throughout the implementation phase:
 - » What is **important to you** in your role as a direct service worker?
 - » What training(s) would be helpful in your role as a direct service worker?
 - » What, if any, barriers exist to staying and/or advancing in your role as a direct service worker?
 - » What types of support would enable you stay in your role as a direct service worker?
- The Direct Service Workforce Advisory Board has met eight (8) times since January 2022. During these
 meetings FSSA staff, consultants, and external stakeholders provided updates and solicited feedback
 from Advisory Board members. FSSA also connects frequently with Advisory Board members via e-mail and
 texting.
- In addition, Advisory Board members have participated in FSSA stakeholder meetings (i.e., strategy sessions, workgroup meetings) and conferences.







Quotes from Advisory Board Members

"... we are like their protector, their advocate. There is a lot more that goes into it than just taking them to a store."

"[My client needs] support and feeling that safeness, to go out into the community and know that somebody is going to help protect him and be with him and guide him and do all those other things that we do."

"I feel that we bridge that gap and help the general public understand while giving comfort and security to our consumers within the community. I love that."

"It's not a livable wage, especially with all the money I'm putting out to do my job. There's so many other jobs where I don't have to worry about ... all of the things that goes into worrying and caring for my client. I could just go to the car wash and spray cars and make the same money and not be putting out any money and not driving anywhere."



Questions? Comments?

Peggy Welch, Chief Advocacy Officer Indiana Family and Social Services Administration peggy.welch@fssa.in.gov

(812) 325-7555



Colorado's Collaborative Approach to Long Term Stability of its Direct Care Workforce

Direct Care Workforce Collaborative

- Stakeholder-Led Initiative
 - Stakeholders include providers, advocacy agencies, government, direct care workers, individuals receiving services & their family members
 - ➤ Volunteer participation
- Quarterly meetings of 80-90 attendees
- Bi-Monthly Action Group meetings of 20-25 attendees
 - > Compensation & Benefits
 - Value & Awareness
 - > Training & Career Advancement

Building a STAR Collaborative

Benefits of having different perspectives at the table



Value & Awareness

- Direct Care Workers
- Individuals Receiving Services & Family Members
- **State Legislators**

Networking

- Shared Passions
- Information Disseminators

Education Partners

Toolkit Overview

- Step 1: Identify Purpose & Vision
- Step 2: Fill in Your Starfish
- Step 3: Stakeholder Asset Mapping
- Step 4: Summit/ Kickoff Event
- Step 5: Identify Leaders
- Step 6: Role Clarification
- Step 7: Revisit Purpose & Vision
- Step 8: Meeting Cadence
- Step 9: Troubleshooting
- Step 10: Growth & Maintenance

Want a copy of the toolkit?



Email HCPF_DCWorkforce @state.co.us



HCBS Conference

Direct Service Workforce Intensive

August 31, 2023

Brenda Gallant, State Long-Term Care Ombudsman



Maine's First Direct Care and Support Professional Advisory Council Mission: Create a strong collective voice that offers expertise and guidance to policymakers and legislators on key workforce issues and initiatives

Vision: Recognized by policy makers as Maine's primary resource for workforce issues

Maine's Workforce Challenges

- 85% of long-term care facilities in Maine reported staffing shortages that are either very serious or at a crisis level
- 20% of long-term care facilities reported 20 or more openings (Maine Health Care Association survey 1/22)
- Many facilities are limiting admissions
- 5 nursing homes closed in Maine in 2022
- Average of 10,000 hours/week of unstaffed home care across the state

Maine's Workforce Initiative

Grant from Maine Health
Care Access Foundation
and funding from Maine's
Office of Aging and
Disability Services
supported this Initiative

LTCOP partnered with ETHOS Marketing to conduct focus group sessions





Results from recent focus groups aimed at understanding the most pressing issues experienced by workers

10 virtual focus groups session conducted

Nov 2021 – Jan 2022

58 direct care and support professionals participated

Recommendations from Focus Groups



Form

Form the Direct Care & Support Professional Advisory Council to provide a voice for Maine's direct care professionals

Elevate

Elevate the status of Direct Care & Support Professionals in the eyes of the public as well as employers, policy makers, and payers with the objective of increasing wages and benefits over time.

Create

Create a "Walk in my Shoes" documentary of a "day in the life" of Maine's direct care professionals that highlights the challenges they encounter

Promote

Promote entry level direct care work as a means of starting a career in healthcare

Quotes from Focus Group Participants

"I love care. I like caregiving... it's just in me to want to, to take care of people. It makes me feel good at the end of the day as well, knowing that you help someone meet their needs... to give them quality of life."

"...the people who are in these homes and doing this work are angels walking this earth, but there aren't enough of them..."

"Sometimes I get told I care too much. How can you care for a human being too much?"

Direct Care and Support Professional Advisory Council



17 Direct Care and Support Professionals from across LTSS representing the diversity of the direct care and support professional workforce in Maine



Meet Maine's Direct Care and Support Professional Advisory Council



"Working together to make a difference."

PHI Training with Council Members

Council Members have attended four interactive training sessions on teamwork, communication, connection and influence.

Survey Results of Upcoming Trainings

ANSWER CHOICES		RESPONSES	
The Legislative and Policy Process in Maine		88.89%	8
Understanding and Impacting the State Budget		44.44%	4
Using Social Media in Advocacy		66.67%	6
How to Recruit New Council Supporters		22.22%	2
Organizing and Holding Council Events		22.22%	2
Total Re	espondents: 9		
#	OTHER (PLEASE SPECIFY)	DATE	
	There are no responses.		

Council Activity

Council Members have:

- Met with representatives of DHHS Office of Aging and Disability Services that are planning and developing workforce initiatives
- Served on a panel for the Maine Association for Community Service Providers
- Participated in the DOL's Caring for Maine campaign marketing and attended statewide hiring events
- Met with Maine's Women's Lobby and discussed the Family Medical Leave Act
- Participated in a campaign project to promote the new Helping Voice warmline that serves as a connection for direct care professionals to talk about mandated reporting
- Participated in Power of Care Vaccination Campaign
- Participated in PHI Building Advocacy Power Training Sessions focused on teamwork, communication, connection, and influence
- Attended presentation before the Health and Human Services Committee
- Attended Caucus on Aging at the State House





Learn more here >>

 In early October, the Maine Long-Term Care Ombudsman Program (LTCOP), in partnership with ETHOS, Maine CDC, DHHS Office of Aging and Disability Services and Licensing and Certification launched the Power of Care campaign.

The objective of the campaign is to increase vaccination rates for both COVID-19 and influenza among direct care staff employed in long-term care facilities and home care.

In addition to the Power of Care campaign utilizing social media a peer-to-peer approach is being used called an Ambassador. The Ambassador provides and shares information on the important of vaccination to their peers in direct care.

QUESTIONS?

Maine Long Term Care Ombudsman Program

- ☐Brenda Gallant
- □ mltcop@maineombudsman.org





Recruit, Retain, Support...Repeat

Tennessee's Comprehensive Workforce Development Strategy



- Support provider organizations with recruitment and retention efforts
- Support the direct care workforce through high-quality competency-based training, progressive certifications, professionalization, and additional career development opportunities
- Provide financial incentives for implementing evidence-based best workforce development practices, as well as financial incentives for specific workforce and quality of life outcomes
- Continue to collaborate with multiple partners and stakeholders
- Evaluating efforts through continued survey and data collection



Recommendation: Support Organizations to Implement New Recruitment/Selection Tools



- TN-specific targeted marketing flyers and public service announcements to recruit new populations to the workforce
- Efforts to recruit a diverse workforce including "Encore" employees, New Americans, and High School/College students (ex: <u>Leaders in Inclusive</u> <u>Services (LINCS)</u>
- TN-specific realistic job preview to help select the right people for the workforce
- Align current training practices and requirements for HCBS Programs in TN



Recommendation: Retain Direct Support Professionals and Front Line Supervisors through Competency Based Training and Wage Incentives



- Training for Caregivers/DSPs and FLSs
- Strategic Partnerships (ex: NADSP E-Badge Academy, Tennessee Board of Regents, Tennessee Department of Labor, etc.)
- Promote Career Path opportunities

- Invest resources in a competencybased training model for Direct Support Professionals and Frontline Supervisors in TN
- Expansion of DSP Apprenticeship to include credentialing and career ladder program



Recommendation: Continue Collaborative Efforts with Managed Care Organizations

- TN Regional Workforce Development Community of Practice To continue to support the ongoing development, implementation and evaluation of workforce strategies that improve workforce stability across the state of Tennessee at the organizational, regional and state levels.
- Statewide WFD Stakeholder Committee To glean insight into the current workforce development climate in Tennessee as well as increase the effectiveness and focus on strategies to address issues facing Tennessee provider agencies.
- Quality Improvement in Long Term Services and Supports Workforce Strategy Comprehensive
 document to support provider organizations to see a more stable and highly trained workforce over time
 and support the direct care workforce through high-quality competency-based training, progressive
 certifications, professionalization, and creating additional career development opportunities.
- MCO Provider Supports Offerings include Organization Readiness Reviews, Workforce Consultations, Workforce Coaches, etc.
- MCO Provider Workforce Development Series Providers are invited to join virtual quarterly workforce development workshops planned with providers in mind.

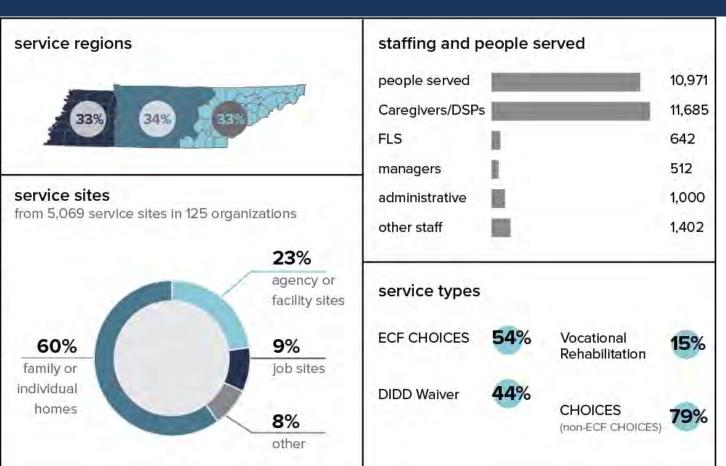
Recommendation: Survey and Data Collection and Evaluation

- Understand the sample and consider the composition
- Improve the representativeness and stability of the sample
- Gather quality data
- Measure the effectiveness of the tools and strategies used in recruitment and retention efforts





Tennessee LTSS Workforce Quality Improvement Initiative 2021 Survey Results



Organization Characteristics

https://tenncare.ici.umn.edu/



UHC Pathways Internship Program

John Camperlino
Employment Strategy Director
UnitedHealthcare – TN Community and State



UHC Pathways Program Overview

• Created by UnitedHealthcare in Tennessee to offer a paid internship program for people with disabilities

• Interns identified through school systems, current members, or state partners

Interns are paired with a trained mentor or mentors

Total inclusion

• PT/20 hours per week, virtual experience following orientation



Our "Why?"

• Lead as a company in disability inclusion that aligns with our company culture

Limited opportunities with competitive pay

• Offer a genuine healthcare career experience

Connect interns to resources and equip interns upon graduation

Grow the workforce, internally and externally (interns and current employees)

UHC Pathways and Workforce Development

Focus on skill building AND exposure to a variety of external opportunities

• Intern exposure and collaboration with community service providers

Roll of an advocate, DSP and employment provider

Assist in creation and trainings for DSPs and internal teams

Prioritize career exploration and discovery for interns



UHC Pathways Today and Beyond

- Session three of interns graduated in March 2023
- Partnered with five internal teams and growing
- Three interns have gained permanent employment at UnitedHealthcare
- Two interns have gained permanent employment in the DSP workforce
- Continued support from internal teams and LTSS leadership



Thank you for your participation today!





California Direct Care Workforce Initiatives





CalGrows Program Goals and Approach



Direct Care Workforce Training & Stipends

"Training and stipends will be available to Direct Care Workforce (non-IHSS) that provide services to Medicaid participants in a range of home and community-based settings, in order to both improve care quality, respond to severe worker shortages in the sector, and prevent unnecessary institutionalization. These training and stipends... will improve the skills, stipend compensation, and retention of direct care workforce sector that Is either employed by Medicaid HCBS waiver programs (e.g., CBAS, MSSP, PACE) or delivering the direct care services to Medicaid participants that are referenced in Appendix B [of the Spending Plan]"

Direct Care Worker Survey



Most common barriers to training:





Direct Care Worker Survey



High interest in the following topics:

- Managing physically, mentally, and/or socially complex care
- Hands-on care
- Caregiver Self-care
- Professional development

CalGrows INNOVATION FUND

Grants to Train Workers and Provide Incentives



CalGrows Innovation Fund



Incentives for training and retention

 Accessibility and Career Advancement

- Training Design
- Outreach



CalGrows Innovation Fund



- 76 grantees
- Approximately \$87 million in grants
- Statewide
- Courses offered in 16 languages



Highlights of Innovation Fund Grantees



- A learn-by-play training system built with videogame technology
- A Virtual Reality training platform
- Connecting training to promotions
- On-the-job shadow training



CalGrows So Far... (as of July 31, 2023)



- 2,482 participants since mid-May launch
- 1,748 caregivers have completed courses
- Over \$150K in incentives



QUESTIONS?

info@calgrows.org

www.calgrows.org









Direct Service Workforce Innovations



Direct Service Worker Assistance Program (DSWAP)

August 31, 2023



Opening exercise

- Everyone stand
- Remain standing if you didn't worry about who would watch your kids while you worked during the past year
- Remain standing if you didn't worry about how to get to work during the past year
- Remain standing if you didn't worry about how to pay your rent / mortgage during the past year



Indiana Pathways for Aging

75% of new LTSS members will live and receive services in a home and community-based setting

- Faster eligibility
- Move to MLTSS (now Indiana Pathways for Aging) in early 2024
- Pay for outcomes, not transactions
- Integrate LTSS data systems
- Support the growth, retention and training of the HCBS direct service workforce
- Create Home Health Roadmap
- Integrate HCBS waivers





Problem statement

In the absence of consistent access to childcare, transportation, wages, and counseling (behavioral, legal, financial), Direct Service Workers (DSWs) are unable to consistently provide services and care to individuals utilizing Indiana Pathways for Aging. Thus, these individuals are unable to live in a home and community-based setting and receive services in their preferred location.





Milestones

Aug 2022	Indiana Association for Home and Hospice Care (IAHHC) and UnitedHealthcare (UHC) strategize on the creation of a formal resource program to address the SDOH needs of Direct Service Workers identified in the Bowen Center DSW stakeholder meetings.
Jan 2023	UHC provides resources to IAHHC to develop, launch and manage the Direct Service Worker Assistance Program (DSWAP).
Apr 2023	IAHHC forms DSWAP Advisory Group with inclusion of small, medium, and large DSW agencies. Additional SDOH needs data gathered during HCBS Listening Sessions.
Apr 2023 – Mar 2024	DSWAP Advisory Group continues collecting feedback from DSW stakeholders, ongoing program development, and sustainability model finalized.
Apr 2024	IAHHC soft launch of two instances of DSWAP (one rural and one urban).
Jul 2024	IAHHC launches Direct Service Worker Assistance Program statewide in Indiana.



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Key questions

- What are the DSW personas and what barriers exist for each?
- Which of the barriers could be addressed by navigation to / amplification of existing resources?
- Which of the barriers will need a new low dose approach?
- Which of the barriers will need a new high dose approach?
- Who should have skin in the game?
- How can DWSAP be sustained long-term?



DSWAP components



Dedicated staff and governing board



Access criteria



Service navigation and/or amplification



Dynamic pay



Catastrophic events

Direct DSW Assistance





Coming to Indiana in July 2024!





INNOVATIVE SOLUTIONS FOR THE 21ST CENTURY CAREGIVER – EARNED WAGE ACCESS



PRESENTING TODAY



JASON SMITH
Business Development Specialist

EXPERIENCE

Business Development and Marketing Team Lead, with Palco for almost 5 years in several key roles.

Bachelor of Science in Business from Pennsylvania State University – "We Are Penn State"!

Working in self-direction and Medicaid LTC for 10+ years

My experience ranges from Client Engagement, Program and Project Management, Implementation, Program Compliance, Training, Payroll and Enrollments.



PALCO PARTNER HIGHLIGHTS

Arkansas



Est. 1999

Colorado



Est. 2019

Idaho



Est. 2023

Kansas



Est. 2019

New Mexico



Est. 2020

Nevada



Est. 2013

Ohio



Est. 2022

Pennsylvania



Est. 2018

PROGRAM SNAPSHOT

→ Participants/EORs served: 10,808

→ Caregivers Paid: 21,246

→ 600 unique vendors paid each payroll

→ Annual Payroll Processed: Over \$500,000,000.00

→ Additional states currently in implementation

phase scheduled for late 2023 and 2024





CAREGIVER CRISIS

Caregiver shortage becoming a crisis, advocates and people who need care say

David Wahlberg | Wisconsin State Journal May 22, 2023

Families of Baby Boomers

elderly loved ones golder



ூ Editor's note: First of a two-part series on Wisconsin's caregiver crisis and t.

generation.

OPINION | LETTERS | Follow

Initiative targets home-caregiver workforce shortage

The Caregiver Crisis and the Future of Aging

America's population is aging fast, and we don't have the workforce to meet these demand.

The Caregiving Crisis A Listen (1 min) :





New Survey Highlights Severity of America's Caregiver Crisis

Family Caregiving is Taking a Toll on Mental Health, Careers, and Einancial Wallbaing

MAGAZINE

The Crisis Facing Nursing Homes, Assisted Living and Home Care for America's Elderly

Hundreds of thousands of workers are leaving the caregiving industry. Unless immigration policies and industry standards change, an aging U.S. is going to face drastic consequences.

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CAREGIVER CRISIS



The median wage for direct care workers was just \$14.27 per hour in 2021, with variability by occupational role and geographic location (among other factors)



Median earnings were only \$21,700 per year in 2020.



As a result, 40 percent of this workforce lives in or near poverty and 43 percent rely on public assistance programs to make ends meet.

According to a June 2020 Aspen Institute report titled "The True Cost of Caregiving²," professional caregivers are among the lowest-paid workers in the nation, and many do not have access to labor protections or workplace benefits.

¹ https://www.phinational.org/policy-research/key-facts-fag/

² https://www.aspeninstitute.org/publications/the-true-cost-of-caregiving/



SOCIAL DETERMINANTS

Maslow's Hierarchy of Needs

Need categories	Need examples
Self-actualization needs	Self-fulfillment; Growth; Unity; Understanding; Beauty; Morality; Transcendence; Exploration; Play
Esteem needs	Positive self-evaluation; Dignity; Achievement; Mastery; Competence; Independence; Reputation; Prestige
Social needs	Giving and receiving affection; Intimacy; Friendship; Tenderness; Affiliation; Love; Belongingness
Safety needs	Security; Stability; Predictability; Protection; Freedom from fear; Structure; order; Law; Limits
Physiological needs	Nutrition; Water; Air; Sleep; Shelter; Clothing (temperature control); Reproduction

SO, WHAT DO WE DO







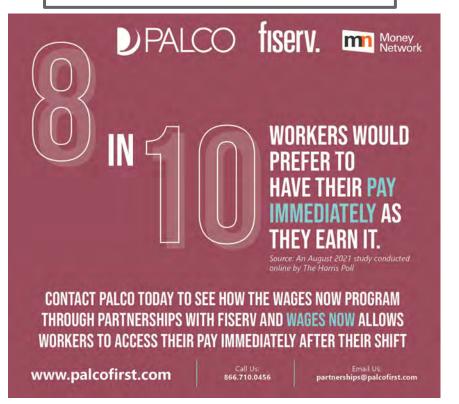


A study* of U.S. workers completed by The Harris Poll for the company Ceridian in August 2021 found that 4 in 5 U.S. workers (83%) between the ages of 18 and 44 believe they should have access to their earned wages at the end of each workday/shift. Workers in home care are no different!

PALCO



INNOVATION WITH MEANINGFUL BENEFITS





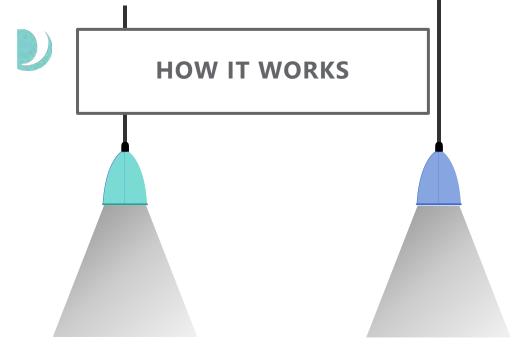
WAGES NOW- AN EARNED WAGE SOLUTION FOR THE 21ST CENTURY CAREGIVER



Palco's Earned Wage Access provides caregivers working in a traditional agency model, agency with choice model, and Self-Direction F/EA model access to a portion of their pay after every shift.

This allows workers to pay bills sooner, borrow less, and save more, alleviating stress from the debt cycles of payday loans.

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STEP ONE

Enrolled caregiver completes a shift with their Employer.

STEP TWO

Caregiver receives a push notification* to their phone with an offer to collect a portion of their pay from that shift.

*Must have a Money Network Card

SAFEGUARDS

Quality assurance and validations ensure that caregivers do not receive more pay than they should and that an adequate amount is remaining for taxes and pay day.

STEP THREE

Caregiver accepts offer and Pay is deposited into their account.

THERE ARE NO FEES TO THE CAREGIVER OR EMPLOYER EVER!



STATISTICS





TESTIMONY

"Accessing my pay when I need it has brought me major stress relief when it comes to putting gas in my car and buying food. I am grateful to the Palco program and my employer for having this resource, so I don't have to look for work elsewhere."

-Palco Self-Directing Caregiver

2023

PALCO



CONTINUED INNOVATION

As the caregiving crisis continues, Palco will continue to seek solutions to ease the payroll processing challenges of self-directing participants, support caregivers, and serve eligible Medicaid recipients across the country.



ADDITIONAL RESOURCES



CHECK OUT OUR WHITEPAPER FOR STATE/MCO ADMINISTRATORS ON WAGES NOW AVAILABLE IN THE ROOM OR AT WWW.PALCOFIRST.COM





THANK YOU FOR YOUR TIME!

For more information about Palco or to bring Wages Now to your State/Program, visit:

https://www.palcofirst.com

Email: partnerships@palcofirst.com

Contact: 1-866-710-0456

Thank you!





2023 Home and Community-Based Services Conference