

TO: Human Services Reform Committee,

From: Vaughn Family Home AFC

re: Family Foster Care Rate Methodology

In matters regarding the change of the rate methodology for calculating the pay for Family Adult Foster Care Homes

When considering these changes, were any family home providers included in the process of conducting this study?

After reading the, Blue Ribbon Commission on Health and Human Services Report and the Legislative Report, Disability Waiver Rate System Family Foster Care Rate Methodology Study Disability Services Division January 2020.

Here are a few things that are not properly addressed from what I have been able to find:

- Family home providers are not provided the same level of representation as corporate providers
- Family home providers have to do the same amount of bookwork as corporate providers
- Family home providers are not paid at the same rate as corporate providers
- Family home providers are available to the people we serve 24-7
- Family home providers don't get to take a vacation
- Family home providers don't get a day off

The argument seems to be that because we live in our homes, we therefore don't do the same amount of work as a corporate home or need the same number of staff or do the same amount of paperwork, so we shouldn't get paid as much as we do. The fact is that the number of staff is about the only difference.

We develop our own policies and procedures using the 245D sample policy format and licensing requirements, accounting, scheduling, provide taxiing, go through the same licensing process, are subject to the same inspection and accountabilities, etc. What we don't get is time off.

The Blue Ribbon Commission on Health and Human Services Report suggests that because we live in our homes, that keeping personal time separated from WORK time is difficult. That's because for most of the people served, there is no personal time.

There are worksheets and calculators to use to determine the separation of hours and for daily rate calculation which really isn't hard to use, the issue is finding it in the system, this could be corrected simply by education to providers, county and social workers to assure that everyone is on the same page for staffing hours. If DHS has a concern about staffing hours have the provider explain by a process similar to the exception request.

Taken from the, Blue Ribbon Commission on Health and Human Services Report;

1) This priority strategy addresses the following aspect of the Commission's charge (select only the one that represents the best fit):

Identify evidence-based strategies for addressing the significant cost drivers of State spending on health and human services.

The #1 factor seems to be the cost of services to the 1,725 people (**Vulnerable Adults**) that received family foster care and supported living services, in a daily unit, during fiscal year 2019.

2) Please describe the populations impacted by this strategy: The populations that are affected by this strategy are "**providers of family foster care and supported living services**" paid for through the Developmental Disabilities (DD), Community Access for Disability Inclusion (CADI), Community Alternative Care (CAC), and Brain Injury (BI) waivers (collectively referred to as the "disability waivers").

The report says the populations that are affected by this strategy are "**providers of family foster care and supported living services**". The reality is the ones who will be affected are those we serve, **They are the Vulnerable Adults who need your protection.**

3) Problem statement

a) What is the primary problem the strategy is expected to mitigate or resolve relative to the focus area?

Family foster care and family supported living services (collectively referred to as "family foster care") are residential services available under the disability waivers that are administered within a provider's own home.

WHY IS THIS A PROBLEM?

b) What is the secondary problem(s) the strategy is expected to mitigate or resolve relative to the focus area and/or other focus areas?

This strategy will also result in administrative simplification. The current DWRS rate calculation requires the provider and county/tribal nation staff to work together to determine and agree upon the number of hours a person receives services in a family foster care setting. This can be a difficult and time-consuming process because the service provider lives in the service setting, making it harder to define what actions are considered part of the family foster care service versus part of everyday living in one's own home. This strategy would eliminate the discussion of service hours as part of the rate determination process.

The tools for doing these tasks are already available if you make them easier to find. In fact, this would not be an issue if you were to educate those who need the proper tools to do this correctly (small cost, education). The current system which has only been implemented for a year, needs time to develop rather than to redevelop an entirely new system (LARGE COST)?

The Blue Ribbon Commission's main reason to change to the 3 tier system is to save money by having a system with flat rates. They believe the DWRS system caused family providers to get an increase in pay by 20.4%. But we did not design the DWRS system, but instead of changing we must learn how to use it and follow what it says.

They listed that the higher rates do not relate to the costs or services we provide in our homes.

Have they visited our homes?

How many providers were on the committee?

How did they hear that what we do is of lessor value?

When they noticed a fiscal problem why did they not look to fix the problem then. Again, we did not have or give input into development of this but we are the ones that in 9 months will have our budgets dramatically changed and will still expected to provide the same quality services for less. With DWRS all providers were given 5 years to get used to the financial changes that could happen. Now, family providers will only get 9 months, how fair is that? Do all family providers even know this is going to happen?

If this new rate structure goes forward this is going to create a burden to not only the home providers but also the county and state because there will be some home providers that will not continue to offer their homes as family foster care settings. Then there will be the need to have the people served, relocated to other facilities, if you can find one. The people served in our homes are offered the same, if not in most cases, better care, because they get better one on one care and time.

Time off is nonexistent in a family home setting. Because we chose to have the people we serve living in our home, this means they are with us on outings of every sort, which is part of the "People Centered Living" accountability of state mandates. If we need to leave our home, including going on vacation, we have to take them with us or hire staff to come into our home and care for them while we are gone and that is not an issue, but if rates get cut, we will not be able to afford to pay staff for this service.

In conclusion, this just scratches the surface of the issue but, we as family home providers want to continue to provide a valuable service to the people we serve. We need and desire to be included in the decisions that affect us. Working together we could solve this issue.

Please reconsider the effect of the budget cuts on the Family Home Foster Care Providers.

Respectfully submitted:

Vaughn Family Home AFC