



Thank you, Chairman Casey, Ranking Member Braun, and Members of the Committee, for the opportunity to testify on the importance of investing in the home care workforce. My name is Pam Lowy, Executive Director of Great Bay Services, a provider of Home & Community Based Services along the northern coast of New England. Our organization was founded in 1954. We started the first NH school for children with disabilities, opened a training center to provide employment for adults with disabilities, and helped close down the last NH institution for disabled citizens.

We serve adults with intellectual and developmental disabilities such as those with Down Syndrome, Autism, and Cerebral Palsy. This population is low income, most with co-occurring mental health diagnoses (most commonly depression and anxiety), and 60% of whom live with caregivers over the age of 60. My own brother, David, is a Great Bay Services client who lives at home with our 89-year-old father.

We facilitate the independence and personal fulfillment of the people we serve, putting a lot of time, thought, conversation, and effort into what each person considers to be a meaningful day. For some, this includes working, in which we support them. For others, this includes volunteerism – my brother David, after volunteering at a soup kitchen, at the ASPCA, or greeting returning servicepeople at Pease Air Base, always tells me: “I helped today. I’m proud of myself.”

Caregiving is essential work and that work is only accomplished with skilled caregivers. However, we are experiencing a significant shortage. One reason is the wages for a caregiver. The Massachusetts Institute of Technology Living Wage calculator estimates the living wage for an adult with one child in our region is approximately \$35 per hour, working 40 hours per week. The current wage we are offering Direct Service Professionals (DSPs) is \$16/hour and the majority of the supports we offer are contracted by Medicaid for a maximum of 30 hours/week. DSPs live paycheck to paycheck. When their vehicle needs repairs, or they have out of pocket medical expenses they have to make very difficult decisions.

Because our supports and workforce are such an integral part of our clients’ daily lives, going fully remote – even for a short time – at the start of the COVID-19 pandemic significantly affected their wellbeing. One program participant’s mental health suffered so greatly that he was hospitalized. Others needed emergency one-on-one supports to ensure they wouldn’t experience a similar breakdown.

As Executive Director I have found myself repeatedly in situations where I've had to make the ethical choice – raising wages and mileage reimbursement despite Medicaid not covering the increase, temporarily closing programs after COVID exposures – and pray that it wouldn't bankrupt us. The average wage for DSPs in our region is \$13-15/hour. We have a starting wage of \$16 and it's still not enough. We continue to lose potential workers to other employers. I regularly am forced to advise interviewees who state they cannot afford to accept my job offer that they would earn more working elsewhere.

Staff in our field are financially struggling, barely making ends meet, but constantly agonizing over what would happen to the people we support if they don't come to work. DSPs in general tend to be older workers. Our average staff age is 46, with over 10% of our staff being 65 or older. Our longest-serving staff came to us straight out of college in the early 1970s & 80s. They have decades of experience in the field and decades-long relationships with our clients.

The average wage for DSPs across the US is not a living wage. One of our staff members confided in me that they had been homeless for their first few years in the field, struggling to raise a child on what was then barely above minimum wage. The ARPA funding Congress provided enabled us to pay tenure-based bonuses to our staff who stayed with us through COVID. One staff member cried in my office in gratitude that they could pay their oil bill as a result of that bonus. We were able to offer new hires bonuses as well as more robust trainings to all staff because of the increased funding. This has had an important impact on our hiring & retention, but it will not be a lasting impact.

External financial stressors regularly impact the individuals we employ and can spill over into their work and their interactions with our clients in obvious ways (such as vehicle breakdowns) and less obvious ones (a stressed human support worker is less able to provide the empathetic, compassionate support our clients deserve). These DSPs are individuals from whom we expect a similar if not higher level of skill compared to other positions which (unlike DSPs) have Standard Occupational Classifications such as Certified Nursing Assistants, Home Health Aides, and Personal Care Assistants. DSP work is complex and goes well beyond caregiving, requiring skills including behavioral assessment and prevention, medication administration, and many personal and intimate caregiving tasks.

I ask Congress to provide adequate funding for HCBS to keep Great Bay Services and organizations like ours from going bankrupt and to keep our staff able to provide the necessary daily supports for Americans with disabilities. We make it possible to keep older adults and people with disabilities safe, stable, and in their homes, workplaces, and out in their own communities in which they play a vital role and where they prefer to be.

Thank you for the opportunity to share my story, which is similar to that of thousands of providers across the country. I look forward to answering your questions.