

LDs 400, 1059, 1078, and 1364

Direct Care Workers' Task Force

Monday, December 14, 2009 1:00 to 4:00
DHHS @ 442 Civic Center Drive - Conference Room 1B

Agenda and Minutes

Participants; Cathy Bouchard, DeeDee Strout, Elise Scala, Elizabeth Gattine, Dawn Worster, Don Harden, Diana Scully, Joanne Rawlings, Rick Erb, Nicole Brown, Susan Linet, Molly Baldwin, Cheryl Ring

- I. Review and discuss draft recommendation on statewide classification system for personal care job titles and workforce development Elise Scala, Elizabeth Gattine
.....Helen Hanson, Cheryl Ring

- Classification systems are designed to look at equity in pay and training, primarily. Many other issues exist. Establishing this system is not easy.
- Q: any precedent for this kind of classification? Ans: not really. But, barriers are huge, particularly with DSA III.
- Suggestion: classify 1,2,3 , but separate by skilled and non-skilled.
 - * Need a new language: "skilled" is medically-drive, as opposed to family or client driven: very-proscriptive-by-funding-sources.
- Will need to re-open the issue of Nurse Delegation, which will require statutory changes
- Look at career path.

Draft Recommendation:

The Worker Group concludes that organizing job titles and job functions into a rational, consistent and clear framework is an essential first step to developing a quality, sustainable workforce and the equitable policies necessary to support it. With the goal of consolidating and redefining Direct Support Assistance jobs, in order to:

- o Enhance portability to enable workers to move among various direct care disciplines
- o Improve recruitment and retention of Direct Service Workers for providers, to facilitate recruitment
- o Promote a standard foundation of core training with specialized modules designed to meet the needs of populations with specialized diagnosis
- o Amend statute and rule to reflect these consolidated and redefined Direct Support positions

Accordingly, the Worker Group recommends that Commissioner Harvey and the Legislature implement a statewide classification system for the personal care job titles and initiate a workforce development plan for this vitally important part of Maine's home and community-based services and long-term care sectors.

- II. "Affordable Health Insurance for Uninsured Low Income Part-time and Seasonal Workers – Expanding Dirigo Health" (aka HRSA¹ grant) Trish Riley

Trish Riley updated the group on the HRSA grant, including background and its present status. In order to apply for funding, states needed to demonstrate the ability to have a program able to be implemented January 1, 2010. Maine had a strong advantage due the existing infrastructure of Dirigo and its enabling legislation.

The HRSA grant focuses on direct care and part time workers (the latter defined as 30 hours or less). For the January 2010 roll out, the program is employer-based coverage and is limited to employers who have over fifty employees. Individuals who are eligible and who are below 300% of poverty level will be issued a voucher to help pay for their insurance premiums. Although employers may be encouraged to contribute, the grant permits employers to participate with no employer match. The grant has targeted 3500 individuals to receive funding. The program will be expanded in July 2010, including ways to offer a specialized product for those workers whose employer may not offer insurance. Funding is for one year with the possibility to renew.

The group talked about ways of getting the word out to eligible employers before the January 1, 2010 start date.

- III. Brief planning discussion on how best to proceed with Montana's Department of Public Health & Human Services' Work Group; i.e. All

Elise: are the design components of the MT plan being incorporated into Dirigo's HRSA plan?. MT plan doesn't speak to affordability for the workers.

MT plan requires additional money to allocate to.... Insurance? Wages? Paid holidays?

Competing issues and priorities need to be factored in: HRSA grant, wage rates, federal health reform, state budget

Continue to keep the MT plan in mind as an intriguing area to offer coverage, but need to see what happens with these other issues.

set up conference call with MT and the members of the Direct Care Workers Task Force

Has Mt's budget impacted this area? # of employers signed up? Premiums? # of workers who enrolled? Surprises – good or bad?

- IV. Next meeting?..... All

Produce a draft report. Circulate report in early January.

¹ HRSA = U.S. DHHS' Health Resources and Services Administration – "the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable." <http://www.hrsa.gov/about/default.htm>