

Talking Points for IHSS Budget issues Domestic & Related Services

- **There is a real-life impact that will hurt people by cutting essential IHSS hours** for “Domestic and Related Services. Domestic and related services include: meal preparation and clean-up, housekeeping, laundry, food shopping, shopping and errands. Emphasize what types of essential services would be lost if the 18% cuts are enacted. For example:

“I currently receive the maximum number of hours authorized by the recent quality control initiatives and standardization of the IHSS program:

Meal Preparation	8.68 hours/week
Meal Cleanup	1.75 hours/week
Laundry	2.50 hours /week
Shopping for Food	1.00 hours/week
Other Shopping Errands	0.50 hours/week

Total Hours per Week 14.43 hours/week

Total Hours per Week Cut at 18% Equals -- 2.60 hours/week

Which day shall I select not to have Meal Preparation?”

- **There are negative domino consequences** on seniors and people with disabilities with the multiple proposed cuts on IHSS, SSI/SSP, Medi-Cal, Adult Protective Services, and regional centers.
- **We need a fair balancing of this deficit crisis with a combination approach** that includes some revenue raising as well as targeted program cuts to non-essential services (as opposed to across the board cuts). The budget situation is not a spending crisis; it’s a revenue crisis. We do not believe that the health and welfare of seniors and people with disabilities, as well as the providers who provide essential home care services, should be compromised in order to balance the budget.
- **We object to the underlying premise** from the Administration is that IHSS “family providers” will continue to provide these services for no pay.. “Family providers” includes relatives who do not live with the consumer, who have no obligation to work for free, and who are doing this work instead of other work which might pay more. This cut will result in a loss of workers available, a higher rate of worker turnover, a loss of services, and very likely a reduction in the quality of care. Many providers in

the IHSS program already live in poverty and many are eligible for food stamps, and few have access now to health insurance.

- **The proposed cut is a double-hit on IHSS consumers who have already had their hours reduced to take into account shared living arrangements.** When the consumer lives with a roommate or attendant, the assessment of need for domestic and related services is prorated and reduces the number of hours approved for domestic and related services.
- **The proposed cuts contradict the recent state-funded IHSS Quality Assurance program and its Hourly Task Guidelines** and many consumers will fall below the minimum number of hours needed to remain safely in their homes. Those guidelines, along with new training of social workers, was designed to accurately and consistently assess service needs and assign appropriate hours of IHSS service... This proposed 18% cut to domestic and related services completely undermines the entire concept of conducting individual assessments to provide sufficient hours to *“ensure the health, safety, and independence of the recipient”*.
- **The IHSS program is a cost-effective part of California’s long-term care system**, enabling thousands of Californians - including seniors and persons with disabilities - to stay out of nursing homes other institutions. The Legislative Analyst’s Office has estimated that annual spending on each IHSS recipient is \$9,924 – as compared to nursing home costs of approximately \$55,000 a year.
- **The cut in IHSS hours means less income for home care providers, and that will result in a more limited supply of home care providers**, making it difficult to remain safely in their homes and possibly forcing them into institutions such as nursing homes. The 2005 report, “Living Wages and Retention of Homecare Workers in San Francisco” by Candace Howes, shows that wages and especially benefits have a significant impact on the retention of providers; in San Francisco when the wages increased from \$5 per hour to \$10 per hour and health insurance was added between 1997 and 2002, the one year retention rate for new providers increased from 33 percent to 61 percent.
- **Many IHSS providers will lose their health benefits** because the cut in hours could put the workers below the eligibility limits set by the Public Authorities (San Francisco requires 25 hours of service per month and Marin requires 85 hours of service per month to qualify for health benefits).
- **The cut to IHSS undermines California’s compliance with the landmark 1999 Supreme Court decision in Olmstead**, – in which the Court affirmed that unnecessary institutionalization of people with disabilities violates the Americans with Disabilities Act.

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