



California Association of Public Authorities
for In-Home Supportive Services

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May 21, 2009

The Honorable Noreen Evans, Chair
The Honorable Denise Ducheny
The Honorable Robert Dutton
The Honorable Mark Leno
The Honorable Alan Lowenthal
The Honorable Mimi Walters
The Honorable Kevin de León
The Honorable Bob Blumenfield
The Honorable Roger Niello
The Honorable Jim Nielsen
California State Capitol
Sacramento, CA 95814

RE: PROPOSED IHSS CUTS
CAPA Position: OPPOSE

Dear Budget Conference Committee members,

More than 400,000 low-income disabled, blind and elderly Californians will suffer under the deep cuts proposed to the In-Home Supportive Services program. The proposed cuts, totaling almost \$500 million, will slash hours of service, reduce provider wages to substandard levels, and force many disabled and elderly Californians out of their homes and into institutions, or into homelessness and no place at all.

The California Association of Public Authorities, whose members serve as local employers of record for IHSS and operate the provider registries, urges you consider the following:

With the cuts, California would renege on its obligation to implement the Olmstead decision.

The 1999 US Supreme Court decision declared that unjustified institutional isolation of people with disabilities violates the Americans with Disabilities Act. California has worked hard to develop cost-effective community-based services to prevent or delay institutionalization. The service-hour cuts, along with the wage reductions that will jeopardize access to care, will force many Californians now living safely at home to lose their independence.

In addition, the Governor's proposal to eliminate the IHSS share-of-cost buy-out means that for many eligible recipients, affordability rather than consumer choice will determine whether they access community-based services or institutional care.

IHSS recipients needing minimal physical assistance or only supervision are often equally at risk to those who need much more assistance.

The Governor's proposal to cut \$301.5 million by ending services to consumers needing "supervision only" wrongly assumes that elimination of seemingly minimal services will not seriously threaten the health and safety of those consumers. In truth, many consumers are unable to fix meals for themselves or even operate a microwave oven. They will skip meals if it is hard or confusing for them to prepare or even reheat meals themselves. The likely result is poor nutrition that can lead to other complications, including mental health problems, fainting, weakness, falling, etc. Diabetics and heart patients are at increased risk of poor health as a result of poor or inadequate diet and nutrition.

Consumers with poor memory or insufficient problem-solving capability will fail to obtain prescriptions and over-the-counter healthcare products, grooming supplies, and basic items that maintain health and help consumer to live independently at home and within their community.

The proposed cuts will result in more emergency room visits, hospital stays, premature institutionalization, referrals to Adult Protective Services, and incidence of social isolation and depression. In the end, the cuts will cost more than they save.

Cuts in IHSS service hours are based on false assumptions about the precision of the functional index score, and, therefore put many consumers at risk of institutionalization.

The Governor's proposed elimination of Domestic and Related Services for consumers with a functional index score below four will result in poorer health and poorer quality of life for tens of thousands of California seniors and disabled.

A consumer with a functional index score of 3 can accomplish a task with "some" human assistance. However, the score does not take into account factors such as the consumer's geographic or social isolation. Additionally, a consumer with a rank of 3 may have been assigned that score if they can perform the task on their own on some days but not at all on other days, typically owing to fluctuations in health conditions.

Better wages and health benefits have improved the quality of in-home care services and reduced provider turnover.

The proposal to cut IHSS provider pay to the State minimum wage of \$8.00 per hour, plus \$0.60 per hour for benefits will force many qualified care providers to seek other work, disrupting many successful care arrangements and threatening consumer access to care.

A drop to minimum wage, which is lower than the living wage in many counties, would put pressure on counties to make up for what amounts to a wage cut of up to 36 percent. However, no county has the resources to backfill the state's share of wages. And because the provider workforce itself is largely low-income, the wage cut would result in more providers turning to public services themselves.

Cuts to the IHSS Program service hours represent a cost shift, not a cost savings.

The Legislative Analyst's Office has estimated that annual spending on each IHSS recipient is \$13,300, several times less than the average nursing home cost of approximately \$55,000 per year. Without needed services, more IHSS recipients will be put at risk for premature institutionalization.

Even if a consumer is not institutionalized, higher medical costs and worsened health would result from (1) the loss of errand and shopping time, because people with disabilities need adequate and fresh food as well as regularly filled prescriptions; (2) decreased cleanliness in the home and higher risks from environmental hazards such as clutter, mold, and pests.

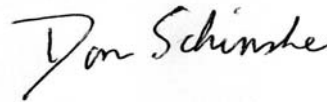
In addition, the reduction or elimination of Domestic and Related Services hours will mean that many that IHSS providers will lose their health benefits, eligibility for which is often based on hours of work. The cost of health care for those workers without health insurance would shift to safety net hospitals and clinics who serve the uninsured.

CAPA appreciates your consideration of these points, and urges you to protect the thousands of Californians who depend on IHSS services to live safely, independently, and with dignity in their own homes and communities.

Sincerely,



Trula M. LaCalle, PhD
Executive Director



Don Schinske
Legislative Advocate