

House Health and Human Services Committee Interim Charge 4

Examine Texas Long-term Services and Support Systems

Comments by Susan Murphree

On Behalf of Disability Rights Texas

Sept. 25, 2020

Thank you for seeking stakeholder input on the Health and Human Services Committee Interim Charge 4 to examine Texas long-term services and support (LTSS) systems. These comments are on behalf of Disability Rights Texas (DRTx), Texas' designated protection and advocacy agency for individuals with disabilities. I am Susan Murphree, Sr. Policy Specialist with Disability Rights Texas.

Workforce Challenges

While it is problematic to recruit and retain a high quality, dependable workforce in institution as well as in the community, it is the community workforce that is the most underfunded. The community workforce also typically lacks benefits such as sick leave or insurance. This is applicable to all Texas home and community based services programs generally, not just in Texas Star+Plus program. We support increasing the base wage for community attendant/direct support professionals services to \$15 dollars per hour, as well as rate enhancements for community services. Otherwise, there will continue to be significant turnover in community programs, putting individuals in the programs at risk of harm and unnecessary institutionalization. Community alternatives must be viable options that provide continuity of care according to assessed needs. Without a stable, quality workforce, community options are either not chosen or not successful. In the aggregate, community services are more cost effective than institutional services.

Current and Future Resources for Community Supports and Services

As the population of Texas grows and ages, more resources must be available to help individuals remain in the community and return from institutional settings to their homes and communities by having a comprehensive and effectively working Promoting Independence Plan and an interest list that moves at a reasonable pace across all programs. This is best done through recreating a formal Promoting Independence Advisory Committee. Coupled with access to community services and a sufficient, quality workforce, Texans can have the quality of life they desire and deserve in the most integrated setting - their communities. Texas will benefit by avoiding higher cost

institutional care and keeping friends and family close and engaged in the lives of individuals with disabilities of all ages and according to the individuals' preferences. Additionally, add-on rates should be available to meet the needs of those with more complex disabilities to prevent institutionalization, incentivize high-quality care and ensure access to providers statewide.

Community Waiver Enrollments

It is critical to use all methods possible to continue assessments for and enrollments in community programs during the pandemic and other disasters. Delays in processes to continue, (through alternative methods like telehealth or telemedicine), assessments, service planning, service authorizations and enrollments are harmful to individuals and the system. Enrollments from interest lists, for diversion to avoid admission to an institution and to transition from an institution to the community should be funded, vigorously implemented and not waived for long periods of time during a pandemic or other disasters. At a time when congregate care environments pose a greater danger to health and safety due to difficulty managing infection controls, transitions to smaller settings or to one's own home are urgently needed.

Thank you again for the opportunity to provide feedback.