

2022 STATE AND FEDERAL ISSUE PRIORITIES



COLLABORATION ADVANCES HF692

In 2021, HF692, sponsored by Representative Michael Bergan, passed the House Human Resource Committees with unanimous support but did not advance further. The bill called for 1) expansion of the direct care worker/nurse aide registry and 2) creation of a voluntary public portal of caregivers.

The Iowa Departments of Human Services/Public Health (IDHS/IDPH) and Iowa Medicaid Enterprise (IME) included HF692 in their American Rescue Plan Act (ARPA) spending plan, which was approved by the Centers for Medicare and Medicaid Services (CMS).

A comprehensive state-based centralized direct care worker database (registry) will be the foundation of a strong, diverse and professional direct care workforce. As a resource, the database will be a tool for employee recruitment and retention; provide direct care workers with permanent and portable records of their credentials or certifications; provide people with disabilities, older Iowans, and family caregivers with access to a pool of caregivers, highlight the skills and experience of Iowa's direct care workers (DCWs) and help focus Iowa's direct care workforce initiatives.

We look forward to working with the State and stakeholders to advance this worthy initiative and appreciate the support it's been given.

Other Considerations for Direct Care Worker Education

- Provide additional funding to community colleges so they can increase opportunities for quality and portable training as a path to salary growth, rewarding and lasting careers, improved retention, smooth transitions between care settings, and clear pathways to expanded career options.
- Achieve greater equity in the delivery of health and long-term supports and services by recognizing the increased diversity in Iowa's direct care workforce and in the consumers and families receiving services, and provide incentives for expanded cultural awareness and competencies.

PREPARE

Direct care workers, employers, family caregivers, state policy makers, and Iowans of all ages and abilities will benefit from a centralized database of direct care workers by expanding the Iowa Direct Care Worker Registry and creating a voluntary public portal of caregivers.

PROTECT

Essential workers risk their own safety to care for others. They deserve to know if they are infected and at risk of infecting those they serve or their loved ones.

Direct care workers and family caregivers are essential to the delivery of health and long-term services and support in Iowa. This critical role has never been demonstrated more fully than in the COVID-19 pandemic. Serving on the front lines, these individuals care for Iowans of all ages and abilities and work in people's homes, public health agencies, assisted living, nursing homes, hospices, group homes, hospitals, and throughout our communities.

The pandemic has exposed many of the long-known issues within this high demand essential workforce. While vaccines promise to bring the virus under control, Iowa's lawmakers must take action to rebuild Iowa's exhausted workforce. We haven't begun to realize the full impact that worker burnout and post traumatic stress syndrome will have on our ability to recruit and retain a stable direct care workforce to meet the needs of Iowans and respond to COVID-19 and future public health emergencies or disasters.

- Protect DCWs who "speak up" about workplace issues that impact the treatment of people served, the ways services are being delivered, or their personal safety without fear of retaliation.



BUILD

Pay and benefits are not reflective of the importance of caregivers in delivering health and long-term supports and services (LTSS). The work is often undervalued and viewed as “just a job,” “low skill,” or “entry-level” rather than a chosen career.

There are many parallels between Direct Care Workers (DCWs) and Child Care Workers (CCWs). They are essential to Iowans and Iowa's economy. "They are the workforce behind the workforce" and in some ways interdependent.

Meet the needs of current caregivers by:

- Utilizing American Rescue Plan Act (ARPA) funding and new federal funding for direct care worker wages, bonuses, or income tax credits for ALL direct care workers regardless the population served or setting within which they work.
- Continuing support of services and training to address their emotional wellbeing, burnout, and mental health.
- Providing childcare and financial support for additional costs due to COVID-19 associated with changes in any future school closures or hybrid and other classroom models that require more childcare for working parents.
- Ensuring health care coverage and paid leave especially when forced into isolation or quarantine due to COVID-19 or other risk factors.
- Including representatives of direct care in Iowa's post-pandemic analysis and after-action reporting and planning to better prepare for future emergencies and disasters.



- Ensure the health, long-term care, and home and community-based service sectors that rely on Medicare and Medicaid payments can compete with the private sectors and enable significant raises in direct care and childcare worker wages.
- Charge Iowa Workforce Development with the following:
 - Repeating the 2019 Direct Care Worker Wage and Benefit Survey. <https://bit.ly/35oEU7J>
 - Repeating the “unemployment rate and high demand occupations by legislative district” report without a \$15 hourly wage threshold. <https://bit.ly/3AFqg8V>
 - Assessing the impact of COVID-19 on the direct care workforce and Iowa's ability to recruit workers post-pandemic.
 - Creating grant opportunities under Future Ready Iowa for nonprofits that focus on more global and systemic supports that aid recruitment and retention of direct care workers.

PLAN

Direct care worker-specific data is critical to state planning. Outdated state and federal regulation hamper the direct care worker, credential portability, and recruitment efforts.

Federal

- Amend federal law to enable direct care workers to maintain their certifications and eligibility to work by implementing a state-approved continuing education standard.
- Monitor the COVID emergency waiver on nurse aide training to ensure it does not become permanent and assess whether the waiver is contributing to staff turnover.

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