NATIONAL DOMESTIC W*RKERS ALLIANCE

Comments in Support of HB462/SB328 Nursing Home Staffing Crisis Funding Act of 2024 Funding for Wages and Benefits for Nursing Home Workers

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Submitted via:

https://mgaleg.maryland.gov/mgawebsite/MyMGATracking/WitnessSignup

The National Domestic Workers Alliance ("NDWA") submits this testimony in support of **HB462/SB328**, **the Nursing Home Staffing Crisis Funding Act of 2024**. This Act helps to recognize the essential role the direct care workforce plays in delivering long-term care (LTC), improve health outcomes and quality of life for older adults and people with disabilities, and grow the economy overall.

NDWA is the leading voice for the estimated 2.2 million domestic workers who work as direct care workers, nannies and house cleaners. Founded in 2007, NDWA works to raise wages and strengthen industry standards to ensure that direct care and domestic workers achieve economic security and protection, respect, and dignity in the workplace. NDWA reaches and engages over 400,000 workers on a regular basis through our 70 affiliate organizations in 50 cities and 19 states, our state and local chapters in North Carolina, Georgia, Houston (TX), San Jose (CA), Philadelphia (PA), the DMV (Washington D.C., Virginia & Maryland), New York, and through our digital platforms.

Although nursing home workers care for the most vulnerable members of our society, their work is largely undervalued. They are underpaid, overworked, and experience some of the highest rates of workplace injury. The median annual earnings for Nursing Assistants (NAs) were just \$25,748 in 2021 (the most recent year available), 39 percent lived in or near poverty, and 40 percent relied on public assistance programs to meet their basic needs. The demographics of the direct care workforce is largely the same across both institutional and home-based long-term care (LTC), and NDWA's membership often works across these settings. Whether receiving care in nursing homes or within private homes or community living, the challenge for consumers is largely the same, namely access to quality

and stable long term care. Because these jobs are largely held by women of color and the long term facilities primarily serve communities of color, considerations of equity require that Maryland take steps to improve both quality of jobs and quality of care.

Care work is the foundation upon which strong economies and societies are built. Care workers- the mostly Black and women of color who do the tremendous labor of caring for our aging and disabled loved ones, who educate and nurture our children, and who care for our homes- are the essential workforce that holds us all together. From birth to end-of-life, we all share the need for care and we must develop an infrastructure that meets the needs of those seeking care AND those providing care. The work of care workers has historically been devalued by society due to longstanding racism and sexism that contributes to the failure to recognize and value caregiving as the essential work it is in our society. It is the goal of the National Domestic Workers Alliance to make visible the critical work performed primarily by women of color and raise working standards for this workforce.

As the baby-boom population ages and the elderly population grows, the demand for the services of health aides and personal care aides will continue to increase.¹ Over 127,000 residents of Maryland need help with daily activities such as bathing or dressing.² Fifteen percent of the Maryland population over the age of 65 have reported difficulties with activities of daily living (ADLs) or instrumental activities of daily living (IADLs) - and the need only continues to grow.³ In Maryland, the number of older adults was predicted to grow by 75 percent in the 30-year period from 2015 to 2045 - from 837,500 to nearly 1.5 million.⁴ During the same period, the number of adults aged 85 and over will increase by nearly 200 percent. With only 5 percent expected growth among working-age adults, the ratio of working-age adults to those aged 85 and above in the state will shrink from 32:1 in 2015 to just 12:1 by 2045.

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¹ U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment Statistics (OES). 2018. May 2007 to May 2017 National Industry-Specific Occupational Employment and Wage Estimates, available at: https://www.bls.gov/oes/current/oessrci.htm.

² Paul, Rafal, & Houtenville. 2020. Annual Disability Statistics Compendium: 2020 (Table 1.8). University of New Hampshire, Institute on Disability, available at: https://disabilitycompendium.org/sites/default/files/user-uploads/Events/2021_release_year/Final

^{%20}Accessibility%20Compendium%202020%20PDF_2.1.2020reduced.pdf ³ PHI, *The Direct Services Workforce In Long-Term Services And Supports in Maryland and The District Of Columbia*, September 21, 2018, available at:

http://phinational.org/resource/the-direct-services-workforce-in-ltss-in-md-and-dc/ ⁴ ld.

This legislation aims to improve nursing home transparency, address the staffing crisis, and protect quality of care for nursing home residents. Starting in 2026, legislation calls for an 8% increase in Medicaid provider reimbursements to skilled nursing facilities while mandating that 75% of that increase be allocated towards direct patient care staffing.

Nursing home workers take pride in their work and care deeply for their residents. When staffing levels are too low, these committed workers are unable to carry out the duties of their jobs and residents too often do not receive the quality care they deserve. While a variety of factors, such as wage levels and employment benefits, contribute to job quality, it is clear that understaffing leads to stress, burnout and moral hazard, sometimes causing these workers to leave the industry altogether. When facilities are understaffed, workers must make impossible choices about how to prioritize the various care needs of their residents, sometimes having to forgo certain tasks altogether simply because they do not have enough time to get to everything. Understaffing negatively impacts the health and safety of both the residents and direct care workers.

NDWA supports the transparency provision of the rule which it hopes will shine a light on whether nursing homes use the public dollars they receive to pay the workers who deliver the bulk of care and support services, or whether they divert those funds to profits. In addition, the 75 % mandate is crucial for ensuring that public dollars go to care for residents and not corporate profits.

For these reasons, the National Domestic Workers Alliance (NDWA) fully supports HB462/SB328, the Nursing Home Staffing Crisis Funding Act of 2024.

Sincerely,

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