

# House Resolution No. 205

of the Regular 2017 Legislative Session

*By Representative Chris Broadwater*

From

## **Strategies for Addressing the Shortage of Direct Support Professionals**

*Louisiana Department of Health's*

*Office for Citizens with Developmental Disabilities and the Office of Aging and Adult Services*

*Prepared by: Louisiana Department of Health*

*Julie Foster Hagan, OCDD Assistant Secretary*

*Tara LeBlanc, OAAS Deputy Secretary*

*Charles Ayles, OCDD Deputy Assistant Secretary*

and

*Louisiana Workforce Commission*

*Kenneth A. Burrell, Deputy Executive Director & Chief of Staff*

*Shannon Joseph, Director Office of Workforce Development*

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## Executive Summary

House Resolution No. 205 by Representative Chris Broadwater urges and requests the Louisiana Department of Health (LDH) and the Louisiana Workforce Commission (LWC) to organize a committee to discuss and develop strategies for addressing the shortage of direct support professionals and to submit a quarterly report to the House Committee on Health and Welfare and the House Committee on Labor and Industrial Relations.

Since the beginning of 2017, prior to HR 205, both departments have been working in collaboration to address the workforce concerns and challenges raised by providers who deliver services for populations in the areas of home and community-based service (HCBS) waivers, intermediate care facilities, and aging, which are administered by the Office for Citizens with Developmental Disabilities (OCDD) and the Office for Aging and Adult Services (OAAS).

This report captures the efforts expended to date by both agencies. This workforce initiative came about in 2016, after OCDD leadership made numerous one-on-one provider visits and heard the concerns that were expressed by providers about the unfunded mandates and workforce obstacles.

LDH immediately looked to develop strategies to address these issues, which included meetings with providers, Senate Resolution 6 authored by Representative Regina Barrow, several legislative funding requests, along with robust conversations and meetings with the LWC.

The Department values the role of providers in our service delivery system and has been working in tandem to identify viable solutions to not only address the concerns expressed in HR 205 but many others as well.

LDH also researched national efforts to address this concern for guidance and best practices. This yielded information from the American Network of Community Options and Resources (ANCOR)<sup>1</sup>, publications such as *The Direct Care Workforce – Retooling for an Aging America* by the Institute of Medicine<sup>2</sup> along with a five state case studies from the Department of Health and Human Services<sup>3</sup> regarding this concern.

In conclusion, based on the information contained in this report, both departments request these activities be considered satisfactory in meeting the requests outlined in HR 205 for Representative Broadwater.

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<sup>1</sup> <http://amplifier.ancor.org/DSPWorkforce?0>

<sup>2</sup> <https://www.ncbi.nlm.nih.gov/books/NBK215401/>

<sup>3</sup> <https://aspe.hhs.gov/basic-report/state-based-initiatives-improve-recruitment-and-retention-paraprofessional-long-term-care-workforce> and <https://www.disabilitycoop.com/2017/05/09/severe-shortage-care-crisis/23679/>

## **Recommendations**

Because the issues outlined in HR 205 primarily pertain to addressing the shortage of direct support workers/professionals, for the next steps, LDH recommends the various provider agencies and/or provider associations work directly with the Louisiana Workforce Commission and/or the various American Job Centers to fulfill their workforce needs by conducting customized regional job fairs aimed at hiring direct support workers/professionals.

In regard to training and any on-going educational requirements, LDH recommends that the provider agencies and/or provider associations work in conjunction with the Louisiana Community and Technical Colleges, in collaboration with LWC, to create a curriculum and/or short-term courses that would be of value to individuals seeking employment in this industry.

Both agencies have also recommended that providers and the various provider agencies disclose as much details (i.e., compensation, benefits, work expectations, job description, background check, driving record check, drug screen and skills required) as possible to potential individuals seeking to work in this healthcare industry as direct support workers/professionals.

No cost resources, such as the YouTube video entitled the “Cost of Companion,” which chronicles the day in the life of this type of worker should be prominently made available on the provider’s website or during the hiring and screening phase, prior to onboarding.

Finally, providers are requesting that funding from the Louisiana Legislature be appropriated to assist them in their pursuit of providing services to the state’s most vulnerable population.

## Section 1 – Background and Need for Workforce Collaboration/Initiative

Providers who deliver services to individuals with developmental disabilities and the elderly through the Louisiana Department of Health's Office for Citizens with Developmental Disabilities (OCDD) and the Office for Aging and Adult Services (OAAS) respectively, have expressed that their biggest challenges in providing quality services are relative to certain workforce issues within the health care industry. Last year, OCDD began conducting one-on-one personalized visits with more than 65 providers (see Appendix I for detailed information).

### Subsection 1.1 – Demand Occupation

Providers have repeatedly stated that there is a statewide shortage of workers to fill critical direct support workers /professional positions within their organizations. Recruitment for this occupation is somewhat difficult due to the complexities and responsibilities that the position carries, which are outlined below. There is also a high rate of turnover because a majority of providers often pay minimum wage or slightly above due to pressures to comply with unfunded mandates. For FY18, the Department put forth several funding requests for legislative consideration, which were aimed at assisting providers. [Please refer to Table 2.2.1 (OCDD) and Table 2.2.2 (OAAS) for LDH Budget Requests Regarding HCBS Providers/Services.]

Direct support workers/professionals are people who work directly with individuals with intellectual, developmental, and physical disabilities, along with the elderly, with the aim of assisting individuals to become integrated into their community or the least restrictive environment. A direct support worker/professional is a person who assists/prompts an individual with a disability to lead a self-directed life and contribute to the community and assists with activities of daily living (ADLs) such as feeding, bathing, dressing, grooming, work, and leisure activities, if needed. They also encourage attitudes and behaviors that enhance community inclusion.

A direct support worker/professional may provide supports to a person with a disability at home, work, school, church, and other community places. A direct support worker/professional also acts as an advocate for the individual with the disability, in communicating his/her needs, self-expression and goals.

- Direct support workers/professionals providing developmental disability services must pass a background check, motor vehicle check, and go through initial as well as annual training. Depending on the size of the provider organization, providers have stated that average onboarding cost range from \$95-\$200 per person.
- Direct support workers/professionals providing services to people with disabilities often have additional duties of provision of active treatment and community inclusion to assist people with leading meaningful lives.

Personal Care Attendants (PCAs) are also known as personal care aides. They are often referred to as homemakers or companions. These staff work directly with the elderly and with individuals with cognitive disabilities, chronically illnesses, physically challenges, as well as hospice patients and those in various stages of rehabilitation or recovery. These workers primarily assist with activities of daily living (ADLs) or everyday duties, which cannot be performed by the individual.

## Subsection 1.2 – OCDD and OAAS Services and Populations

OCDD offers community-based services and supports for people with intellectual/developmental disabilities through Medicaid home and community-based services waivers. These waiver programs allow Louisiana citizens to have greater flexibility to choose where they want to live, and the waiver services and supports that best suit their needs, while still receiving Medicaid benefits. Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID) are facilities licensed to provide residential care for four or more individuals with intellectual/developmental disabilities that meet the criteria for 24 hours/day of active treatment.

### OCDD – Home and Community Based Waiver Services

- Approximately 11,600 individuals served
- Approximately 500 provider agencies
- Approximately 40,000 direct support workers employed by these agencies

### OCDD - Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID)

- Approximately 4,250 individuals served
- Approximately 539 facilities
- Approximately 20,000 direct support workers employed in these facilities

OAAS offers community-based services and supports for people who are elderly or have adult onset disabilities through Medicaid home and community-based services (HCBS) waivers. These waiver programs provide supports and services to assist Louisiana citizens to remain living in their home. OAAS also oversees the state plan service, Long-Term Personal Care Services (LTPCS), which provides personal care services to adults with Medicaid who meet the medical criteria for this service. Nursing homes are facilities licensed to provide residential and acute care for individuals that meet nursing home level of care.

### OAAS - Home and Community-Based Waiver Services and Long-Term Personal Care services

- Approximately 21, 790 individuals served
- Approximately 568 provider agencies
- Approximately 37,360 direct support workers plus adult day health care workers employed (personal care attendants) by these agencies

## Subsection 1.3 – Unfunded Mandates for Providers

In-home support providers have not received a rate increase since 2010. In 2016, the Affordable Care Act (ACA) required in-home support providers to offer health insurance to 95 percent of agency employees without the provision of state or federal dollars to cover the mandate. Also, in 2016, the U.S. Department of Labor (DOL) overtime rule became effective, which required in-home support providers to begin paying overtime rates to their employees without the provision of state or federal dollars to cover the mandate. Direct support workers/professionals were previously exempt from the overtime payment laws.

During a January 2017 Community Provider Association conference, survey results regarding a variety of issues were reported and ranked according to those to be considered very problematic to extremely problematic. The following was reported as it relates to workforce issues:

- 100% reported DOL rules to be very – extremely problematic.
- 93% reported workforce to be very – extremely problematic.
- 74% reported Affordable Care Act (ACA) requirements to be very – extremely problematic.
- 67% reported onboarding to be very – extremely problematic.

#### Subsection 1.4 – Legislative Funding Requests for Providers

In order to address the concerns of providers, LDH made several funding requests to aid providers in their ongoing efforts to deliver services to the state’s most vulnerable citizens.

##### **LDH Provider-Related Budget Requests:**

- Rate increase to Cover Overtime for Providers
- Rate Methodology/Rate Increase for Personal Care Attendants (PCAs)
- Rate Increase for Providers (PCA services)

##### **OCDD Requests:**

- Mixed Waiver Offer Request
- Individual and Family Support (IFS) Enhanced Rate
- Supports Waiver IFS Hours Request
- IFS Night Rate Increase
- Intermediate Care Facility for Individuals with Intellectual Disabilities (ICFs/IID) Rebasing

##### **OAAS 2018 Budget Request Items for Discussion:**

- Filling of Waiver Opportunities (Slots) – Community Choices Waiver (CCW) and Adult Day Health Care (ADHC)
- Rate Increase for the Program of All-Inclusive Care (PACE) and Increase in PACE Slots/Capacity
- ADHC Transportation Rate Increase

## Section 2 – Goal of Interagency Workforce Collaboration/Initiative

The two-pronged approach initiative focused on these actions:

- 1.) Educate more than 652 providers of disabilities and aging services by helping to raise awareness of the Louisiana Workforce Commission (LWC) no-cost resources and services that address business and workforce needs identified by providers - The expected outcome is for providers to streamline and improve the following: hiring practices, retention rates, onboarding costs, and identification of training opportunities. These efforts will also indirectly help to improve the quality of care of the individuals within the LDH system by offering continuity in care and a trained workforce.

In collaboration, both departments will host regional provider workforce summits that will outline the goal of the initiative, explain the benefits of using LWC, the value of a customized recruiting event (arrange, set up hiring event, prescreen, etc.) to hire direct support workers or other staff members, and a retention pilot. These summits will focus on working directly with two to three providers in each region. A call to action will be given so providers can self-identify themselves for participation in the pilot project.

- 2.) Educate and provide outreach to potential/interested persons who want to pursue employment opportunities as a direct support worker/professional or personal care attendants - The goal is to address and meet the workforce shortage in this particular healthcare industry that OCDD and OAAS providers have identified as being difficult to recruit/hire. This would focus on workforce resources, such as use online job tools [e.g., Helping Individuals Reach Employment (HiRE<sup>®</sup>)], use of local Business and Career Solution Centers in their area, and information such as how to become job ready, what it means to be a direct support worker, along with job expectations, job requirements, and qualifications.

### **Preliminary Groundwork Performed Prior to HR 205, which is future detailed in Section 2.3 and 2.4:**

- Researched workforce needs which are impacting this provider/healthcare industry.
- Identified which services provided by the LWC will be of most value to this provider/healthcare industry.
- Developed a strategic work plan that included input from both agencies and approval from high-level officials prior to implementation/delivery.
- Drafted/developed, reviewed/edited and finalized any collateral material, which will be used for dissemination at regional summits, meetings, teleconferences, provider visits, websites, and social media.

### **Subsection 2.1 – OCDD Provider and Stakeholder Outreach 2016-2017**

The Office for Citizens with Developmental Disabilities (OCDD) has established strong communications and ties with its stakeholders, primarily with families and individuals with developmental disabilities. Since last year, the Office has been working to strengthen its relations with providers and provider organizations. OCDD extended an invitation to providers for an unofficial visit of their facilities to learn more about their agencies, structure, best practices and any operational challenges that they may face when interacting with the Office, so work could be done to resolve the issues. Numerous providers requested and continue to request a voluntary visit, which has been led by members of OCDD leadership, in teams of two. To date, visits to providers range from large-scaled operations to smaller agencies from



across the state. OCDD initiated provider calls, which were originally scheduled monthly but are now occurring bi-monthly on the first Thursday. The goal of the calls is to ensure ongoing communication with the provider community regarding relevant issues and concerns. OCDD also provides information on issues that impact provider operations through webinars and meetings. [See Appendix I for OCDD Provider and Stakeholder Outreach Activities; the information in the appendix does not include training and visits by staff regarding home and community-based services setting rule, technical assistance and guidance or Accountability and Implementation Plan (AIP) monitoring visits to local districts.]

### Section 2.2 – LDH Budget Requests Regarding HCBS Providers/Services

**Table 2.2.1 – OCDD Budget Requests Regarding HCBS Providers/Services**

		37.55%	62.45%
	TOTAL	STATE	FEDERAL
DOL – OVERTIME MITIGATION	\$34,288,109	\$12,875,185	\$21,412,924
RATE REIMBURSEMENT METH – IFS NIGHT 1 PERSON	\$25,801,622	\$9,688,509	\$16,113,113
TOTAL RATE ENHANCEMENT REQUEST	\$60,089,731	\$22,563,694	\$37,526,037

**Table 2.2.2 – OAAS Budget Requests Regarding HCBS Providers/Services**

		37.55%	62.45%
	TOTAL	STATE	FEDERAL
DOL – OVERTIME MITIGATION	\$8,462,836	\$3,177,795	\$5,285,041
RATE REIMBURSEMENT METH – CCW \$2.79 to \$3.37 and LTPCS from \$2.85 to \$3.37 per 15 mins.	\$52,651,400	\$18,309,335	\$33,362,065
TOTAL RATE ENHANCEMENT REQUEST	\$61,114,236	\$21,487,130	\$38,647,106

### Section 2.3 – Interagency Collaborative Workforce Actions Prior to HR 205 – LDH Led Efforts

**Table 2.3.1 – Provider Outreach and Education for Workforce Initiative (April-June 2017)**

Steps/ Tasks	Education & Outreach to OCDD and OAAS Providers	Education & Outreach to Potential Direct Support Workers/Professionals
1 April-June 2017	Identified tools and methods to disseminate information to providers (such as Survey Monkey, OCDD webpages, links to LWC website, monthly provider calls/teleconferences, tutorials, one-on-one provider visits, and	Education and outreach to potential/interested persons who want to pursue employment opportunities as Direct Support Workers/Professionals to address and meet the workforce shortage in this particular healthcare industry

	regional District and Authority meetings).	that OCDD and OAAS providers have identified as being difficult to recruit/hire. <ul style="list-style-type: none"> <li>• How to use HiRE®</li> <li>• How to become Job Ready</li> <li>• Flier- What it means to be a direct support worker</li> <li>• Job expectations</li> <li>• Job requirements/qualifications</li> </ul>
2 April- June 2017	Notified providers of workforce initiative/goal by conducting a provider survey aimed at (1) gathering background information from the providers regarding their company/agency, human resource concerns, workforce challenges, and (2) gauging if they are already currently using any LWC services/resources to address their workforce needs to get a better picture of the problem and possible strategies to develop and focus on.	
3 April- June 2017	Analyzed survey results and shared them with LWC, which will help to determine the severity of their workforce situations and/or validate provider concerns. Also shared the results with providers through various mediums (i.e., website, teleconference, and in-person through regional meetings).	
4 April- June 2017	Provided providers with concentrated information /links/background about LWC's business services/resources along with the names of key staff involved with the initiative. <ul style="list-style-type: none"> <li>• April-Role of the Business and Career Solution Centers and HiRE® for job postings</li> <li>• May-Training programs/ incentives (e.g., Incumbent Worker Training, Apprenticeship, Work Opportunity Tax Credit, Fidelity Bonding, etc.)</li> <li>• June-Labor Market Information</li> </ul>	
5 April- June 2017	Started the process/logistics of setting up and arranging regional workforce summit meetings that will be held in July. The meetings will include department leaders and representatives from LWC/OCDD, providers/provider	

	organizations, Business and Career Solution Center staff, regional Districts/Authority staff to provide a full presentation of LWC's service array (workforce development, unemployment insurance, workers' compensation, etc.)	
6 April- June 2017	Finalizing press release and outreach materials to inform providers about the regional workforce summits and the importance of attending.	
7 April- June 2017	Hold large-scaled Regional Workforce Summits during July in Baton Rouge, Metairie, Lafayette, and Alexandria to outline goal and purpose of a customized recruiting and retention pilot. Pilot will focus on working directly and intensively with two to three providers in each region.	
8 April- June 2017	During each summit, a call to action will be given to providers, with a small window/timeframe to self-identify themselves for participation in the pilot project. Once the maximum number is reached, possibly create a waiting for a next pilot round.	

**Customized Regional Recruiting Pilot/Job Fair (July)**

1	Start the process of working directly with the two to three providers per region who have self-identified that they want to participate in pilot. Begin by conducting a gap analysis of their workforce needs, determine how many staff members they will need now and in the next six months to a year, gain a better understanding of their current process to hire, onboarding cost, and efforts to retain workers. Explain the benefits of LWC and what is involved in the process of having a customized recruiting event (arrange, set up hiring event, prescreen, etc.) to hire direct support workers or other staff members.	Host regional recruiting events aimed at hiring Direct Support Workers/Professionals and Personal Care Attendants to fill positions identified by OCDD and OAAS providers.
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**Workforce Metrics to Gauge Outreach and Education Efforts:**

- A voluntary survey was administered to all providers who participated in the workforce summits to gauge if the resources explained during the outreach and education timeframe would be utilized and determine which services presented were considered the most beneficial and/or helpful. Please refer to Section 2.6 for details regarding feedback from participating providers.
- Determine how many providers have created new Helping Individuals Reaching Employment (HiRE®) accounts
- Determine how many DSWs were hired by providers during the designated initiative timeframe
- Identify and create a mechanism to track progress with pilot providers to gather if onboarding cost have decreased, the rate of retention has improved, advertising and training dollars have been saved

**Health Metrics to Gauge Outreach and Education Efforts:**

- Greater client satisfaction

**Section 2.4 – Interagency Collaborative Workforce Actions Prior to HR 205 – LWC Led Efforts**

Collectively it was agreed that LWC would assist with the following activities to address the provider identified needs.

<b>Task</b>	<b>Status</b>	<b>Notes</b>
Develop Provider Survey to identify which LWC resources are currently used and specific workforce needs	Completed	03.21.17 - Initial sit-down meeting with LDH 03.29.17 - Follow-up meeting re: Survey
Disseminate Provider Survey	Completed	04.24.17 - LDH closed provider survey
Review Provider Survey Results and identify education/outreach activities	Completed	05.23.17 - Face-to-face meeting to review surveys/next steps
Attend Provider Organization Quarterly Meetings. Request 30-45 minutes to present an introduction of LWC resources & gauge interest in Regional Workforce Summits.	Completed	05.24.17 -Thibodeaux, LA (LDH) 06.07.17 - Lake Charles, LA (LWC) 06.08.17 - Monroe, LA (LWC) 06.09.17- Bossier City, LA (LWC)
Create Regional Workforce Summits focusing on Education & Training Resources	Completed	06.12.17 - Proposed Agenda sent 06.16.17 - Meeting to review agenda 06.22.17 - Finalized agenda approved
Identify Workforce Summit: 1. Locations 2. Presenters 3. Mobile Unit	Completed	06.22.17 - Summit dates approved 06.27.17 - Locations confirmed

		06.27.17 - Invitations sent to SMEs
Create Press Release for Workforce Summits	Completed	06.28.17 - LWC received draft press releases from LDH to review. 06.30.17 - LWC PR team approved Press Releases and supplied LHD PR team our official logo to be included via email.
Press Release Disseminated – <a href="http://dhh.louisiana.gov/index.cfm/newsroom/detail/4286">State Agencies to Host Regional Health Care Provider Workforce Summits</a> <a href="http://dhh.louisiana.gov/index.cfm/newsroom/detail/4286">http://dhh.louisiana.gov/index.cfm/newsroom/detail/4286</a>	Completed	07.05.17 - Release Date
<i>Workforce Summit #1 (Southeast Louisiana)</i> <b>Location:</b> Jefferson Parish East Bank Regional Lib. 4747 W. Napoleon Ave, Metairie, La 70001	Completed	Date: Tuesday, July 11, 2017
<i>Workforce Summit #2 (Lafayette/Lake Charles)</i> <b>Location:</b> Chenier Center Town Hall 220 Willow St., Lafayette, La, 70501	Completed	Date: Thursday, July 13, 2017
<i>Workforce Summit #3 (Central and North La)</i> <b>Location:</b> Pinecrest Support & Service Center Gym 100 Pinecrest Dr., Pineville, La 70360	Completed	Date: Friday, July 14, 2017
<i>Workforce Summit #4 (South La)</i> <b>Location:</b> LDH Bienville Building, Conference Room 118 628 North 4 <sup>th</sup> Street, Baton Rouge, La 70802	Completed	Date: Friday, July 28, 2017

### Section 2.5 – LDH/LWC Provider Workforce Survey Results

Roughly 112 providers participated in a voluntary survey, which was intended to gain insight of their organization’s framework, demographics and workforce challenges to better assist the LWC in understanding the hiring needs of providers, in order to ensure the most appropriate topics, training and presenters for the workforce summits.

According to the recent LDH/LWC Workforce Development Survey the providers identified the following top workforce challenges:

- Availability of qualified applicants
- Overtime regulations
- Healthcare costs/ benefits
- Retention of staff
- Hiring practices
- Training cost

When asked what specially impacts their recruitment and retention rates, providers identified the following barriers:

- Background check results prohibit hiring
- Candidates lack access to transportation
- Understaffed and unable to take current employees off assignment for training
- Candidates lack sufficient writing and soft skills required

Through this process, it was also learned that many of the providers did not know of or utilize LWC services. As such, it was decided that Regional Workforce Summits were an excellent mechanism to not only educate but link providers to their local American Job Centers to receive further assistance in addressing their specific workforce development needs.

More in-depth information regarding the initial survey results can be found [here](#) or by using the link below: <https://www.surveymonkey.com/results/SM-SYTV7FB/>

### Section 2.6 – LDH/LWC Regional Provider Workforce Summits

DATE	REGION (NUMBER OF PROVIDERS IN ATTENDANCE)
July 11, 2017	New Orleans Regional Workforce Summit (17)
<p><b>Survey Results</b> - Thirteen (13) employers participated in the survey and all rated LWC with a ‘5’. They agreed that the information provided addressed their current workforce challenges; information was presented in a clear manner; presenters were professional; and questions were answered and that they would recommend LWC services to others. Additional comments suggested that the Summits should be mandatory for all providers and the information presented on Unemployment Insurance (UI) was greatly needed.</p>	
<p><b>Survey Scale</b> - (5 – Strongly Agree, 4 – Agree, 3 – Neutral, 2 – Disagree, 1 – Strongly Disagree)</p>	
<p><b>Working Table / Resources</b> - During this session, six (6) employers participated and we obtained 6 employer registrations and 2 job orders that will be input into HiRE by the local Business Services Representative (BSR) from the Jefferson Parish American Job Center (AJC).</p>	
<p><b>Number of employer registrations obtained</b> - 6</p>	
<p><b>Actual Number of employers registered in HiRE after session</b> – 1</p>	
July 13, 2017	Lafayette Regional Workforce Summit (35)
<p><b>Survey Results</b> - Seventeen (17) employers participated in the survey; of the 17, approximately 90% of the employers rated LWC with a ‘5’ while the remainder rated a ‘4’. Additional comments suggested the summit was informative; agenda was well thought out; and UI presentation was extremely useful and needed since this is a big challenge for many providers</p>	
<p><b>Survey Scale</b> - (5 – Strongly Agree, 4 – Agree, 3 – Neutral, 2 – Disagree, 1 – Strongly Disagree)</p>	
<p><b>Working Table / Resources</b> - Five (5) employers participated during this session, but we did not receive any employer registrations. Even though we provided the employers with a tutorial on the HiRE system (registration and how to place job orders), answered questions concerning Incumbent Worker Training Program (IWTP) and Small Business Education and Training (SBET), and Stephen Harris answered questions relating to employee separation, 1099 and misclassification.</p>	
<p><b>Number of employer registrations obtained</b> – 5</p>	

July 14, 2017	Alexandria Regional Workforce Summit (39)
<p><b>Survey Results</b> - Twenty (20) employers participated in the survey; of the 20, approximately 85% of the employers rated LWC with a '5'. Additional comments suggested the summit was very informative; presenters were well prepared and knowledgeable; UI information was extremely useful, especially as it relates to misclassification of employees; and the summits should be done annually.</p> <p><b>Survey Scale</b> - (5 – Strongly Agree, 4 – Agree, 3 – Neutral, 2 – Disagree, 1 – Strongly Disagree)</p>	
<p><b>Working Table / Resources</b> - Five (5) employers participated during this session and we obtained 5 employer registrations that will be put into HiRE by the local BSR in the Alexandria AJC.</p>	
<p><b>Number of employer registrations obtained</b> – 5</p>	
<p><b>Actual Number of employers register in HiRE after session</b> – 5</p>	
July 28, 2017	Baton Rouge Regional Workforce Summit (36)
<p><b>Survey Results</b> - Twenty-one (21) employers participated in the survey; of the 21, approximately 87% of the employers rated LWC with a '5 to 4'. Additional comments suggested the summit was very informative; presenters were well prepared and knowledgeable; UI information was extremely useful, especially as it relates to misclassification of employees; and the summits should be done annually. It was also suggested that the industry come together to communicate the overwhelming need for legislative change as it relates to reimbursement rates.</p> <p><b>Survey Scale</b> - (5 – Strongly Agree, 4 – Agree, 3 – Neutral, 2 – Disagree, 1 – Strongly Disagree)</p>	
<p><b>Working Table / Resources</b> - Twelve (12) employers participated during this session. We guided them through the HiRE registration process and points of interest as questions arose.</p>	
<p><b>Number of employer registrations obtained</b> – This information was not captured.</p>	
<p><b>Actual Number of employers registered in HiRE after session</b> – This information was not captured.</p>	

**LWC Subject-Matter Experts (SMEs) for Regional Summits:**

LWC formally invited the following SMEs to participate during the Summits. The agenda for each Regional Summit was updated depending upon the personnel available to participate.

Subject-Matter Expert	Name of Expert	Response/Notes
Business Services & Work Opportunity Tax Credit (WOTC)	Cheri Blanchard: Michael Pritchard:	Baton Rouge Alexandria/Lafayette
Incumbent Worker Training Program (IWTP) & Small Business Employee Training (SBET)	Michelle Martinez James Taylor	New Orleans/Lafayette Alexandria
AARP IWTP	Michael Taylor	All Regions
Unemployment Insurance	Stephen Harris and Gregory Anders	All Regions
Optional Education/Training Working Tables	Industry Sector Specialists and/or Local Business Service Representatives	All Regions

**Section 2.7 – Worker Misclassification**

Based on questions from providers at the first regional summit, both agencies discussed the need to correct the misclassification of workers and the definition of independent contractor versus an employee. The misclassification of employees as independent contractors presents one of the most serious problems

facing affected workers, employers, and the entire economy. From LWC's perspective, it was important to convey not only this critical message but also how the unemployment insurance is funded, best practices, reporting wages, and integrity in the workplace. Employers who fail to do "the right thing" can save 30 to 40 percent of labor costs by misclassifying employees, which creates an enormous opportunity to underbid those who are playing fair. Louisiana employers are required to properly classify employees and to pay appropriate unemployment insurance taxes and workers' compensation premiums.

According to LWC, the highest rates of misclassification occurs within the healthcare and construction industries. Employees, in this case direct support workers, often do not understand why they do not qualify for unemployment benefits or workers' compensation benefits simply because their employer (provider) classified them incorrectly. Whether intentional or not, misclassification can be disastrous for workers who do not find out until it is too late. Misclassified employees often are denied access to critical benefits and protections they are entitled to by law, such as the minimum wage, overtime compensation, family and medical leave, unemployment insurance, and safe workplaces.

Questions that can help a direct support worker determine if the provider is engaging in misclassification include:

**If you answer "YES" to the following questions, you may be an employee.**

1. Does the business tell you what to wear to work?
2. Does the business tell you what to do?
3. Does the business tell you how to do the job?
4. Does the business tell you when to do the job?
5. Does the business take taxes out of the money it pays you?
6. Does the business provide the facilities, equipment, tools, materials and supplies you use to perform the job?
7. Does the business pay you back for expenses you incur to do the job?
8. Do you turn in a time sheet or record to the business?
9. Does the business provide you paid sick leave, vacation, pensions, bonuses, personal days or insurance?
10. Is there a continuing relationship between you and the business?
11. Does the business consider you an "employee"?
12. Do you perform manual labor for the business, i.e., do you use your hands and body a lot to perform your job?

**If you answer "YES" to the following questions, you may be an independent contractor.**

1. Did you enter in to a written or verbal agreement with the business to perform a job for a set price or set payments?
2. Did you enter in to a written or verbal agreement with the business that you would be paid a specific amount(s) at a scheduled time or times for the job?
3. Do you provide your own tools, materials and supplies to perform the job?
4. Is there a specific time when the job will end? Example: one month, seventy-two hours, etc.
5. Can you perform jobs for other businesses during regular business hours?
6. Before performing this job, did you submit orders, plans, or other documents to the business for approval?
7. Does the business have the right to terminate you without cause?
8. Can either you or the business terminate the business relationship without incurring any penalty or liability?



Employee misclassification generates substantial losses to the federal and state governments in the form of lower tax revenues, as well as to state unemployment insurance and workers' compensation funds. Based on some of the feedback from providers, it was brought to the attention of both agencies that isolated pockets of misclassification among some providers across the state could be occurring. The offenses and penalties were also disclosed, as well as the partner enforcement agencies, which include LWC in addition to the Internal Revenue Service (IRS), the Office of Workers' Compensation, the United State Department of Labor Wage and Hour Division, and the Louisiana Department of Revenue. In order to create a fair and level playing field in Louisiana, it was critical that this information was shared with providers during the summits.

## Section 2.7 – Citations

1. American Network of Community Options and Resources (ANCOR) 2017 Addressing the Disability Services Workforce Crisis of the 21<sup>st</sup> Century Report, Electronic Version.
2. Retooling for an Aging America, Building the Health Care Workforce, Institute of Medicine (US) Committee on the Future of health Care Workforce for Older Americans, National Academies Press, 2008, Washington, DC.
3. U.S. Department of Health & Human Services, Office of the Assistant Secretary for Planning and Evaluation (APSE)m State-Based Initiatives to Improve the Recruitment and Retention of the Paraprofessional Long-Term Care Workforce, 2003, and the Severe Shortage of Direct Care Workers Triggering Crisis, Judith Graham, Kaiser Health News, May 9, 2017.

*Louisiana Department of Health*  
628 North Fourth Street, Baton Rouge, Louisiana 70802  
(225) 342-9500  
*www.ldh.la.gov*

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<b>OCDD Provider and Stakeholder Outreach 2016-2017</b>
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**Provider Visits/Tours**

<b>Date</b>	<b>Name of Provider - Location (Executive Staff Member in Attendance)</b>
6/24/16	Louisiana Health and Rehab - Lafayette (Mark Thomas and Tiffany Dickerson)
6/24/16	Leading Healthcare of Louisiana - Lafayette (Mark Thomas and Tiffany Dickerson)
7/8/16	Southwest Independent Living Center - Lake Charles (Mark Thomas and Tiffany Dickerson)
7/8/16	Calcasieu Arc - Lake Charles (Mark Thomas and Tiffany Dickerson)
7/14/16	Arc of Acadiana - New Iberia (Mark Thomas, Tiffany Dickerson and Julie Foster Hagan)
7/15/16	Magnolia Community Services - New Orleans (Mark Thomas, Tiffany Dickerson and Julie Foster Hagan)
7/30/16	A-1 Absolute - New Orleans (Charles Ayles and Paul Rhorer)
7/30/16	Crossroads - New Orleans (Charles Ayles and Paul Rhorer)
9/30/16	ResCare - Opelousas (Mark Thomas and Tiffany Dickerson)
10/25/16	Pinecrest Supports and Services Center - Alexandria (Mark Thomas and Tiffany Dickerson)
10/26/16	Holy Angels - Shreveport (Mark Thomas and Tiffany Dickerson)
10/28/16	House of Mercy - Baton Rouge meeting facility located in Ville Platte (Mark Thomas, Tiffany Dickerson, Julie Foster Hagan, and Paul Rhorer)
1/5/17	Evergreen Community Home Visits (Mark Thomas, Tiffany Dickerson, Julie Foster Hagan, and Mike Kelly)
1/24/17	VOA Shreveport (Mark Thomas, Tiffany Dickerson and Julie Foster Hagan)
1/26/17	VOA Baton Rouge (Mark Thomas, Tiffany Dickerson and Julie Foster Hagan)
1/28/17	VOA New Orleans (Mark Thomas and Tiffany Dickerson)
2/10/17	LaFourche Arc (Mark Thomas, Tiffany Dickerson and Paul Rhorer)
4/10/17	EasterSeals Region 3 (Julie Foster Hagan, Teresa Frank, Janae Burr)
5/4/17	EasterSeals Region 9 (Julie Foster Hagan, Teresa Frank, Janae Burr)

**Provider Calls** – The number participating in the teleconferences range from 175 to 250 providers.

<b>Date</b>	<b>Topics</b>
7/7/16	Provider visits, Electronic Visit Verification (EVV), Louisiana Service Reporting System (LaSRS), Home and Community-Based Services (HCBS) Settings, Medication Delegation documentation, Independent Contractor / Direct Service Worker, Department of Labor (DOL) Rule Exemption [OCDD and Statistical Resources, Inc. (SRI) presenters]
8/5/16	Critical Incident reports, NOW Renewal, EVV, LaSRS/ Louisiana State Tracking System (LAST), 508 Denials (OCDD, SRI, and Medicaid presenters)
9/1/16	Emergency Preparedness, Flood Related information, NOW Renewal and Manual, Act 333 of 2008 legislative sessions related to family as workers, Statewide Transition Plans (OCDD presenters)
10/6/16	Mandatory provider training on HCBS settings / employment reminder, Complaints Decision Tree, Checks for Excluded Individuals, Re-Enrollment letters for waiver

	participants in Managed Care Organization (MCO) [OCDD and Health Standards Section (HSS) presenters]
11/3/16	Checks for Excluded Individuals, Legislative Audits, OCDD Initiatives, EVV/LaSRS (OCDD, Program Integrity, and SRI presenters
3/2/17	OCDD Tiered Waiver Project; OCDD Request for Services Registry Project; ICF/IID Programmatic Unit; DD Council Partnership; Late reporting of critical incidents; New Critical Incident Reporting system; Criminal Background checks (HSS)
5/4/17	Fiscal Initiatives and Priorities; Rate adjustment for HCBS providers; OCDD Maintenance of Effort waiver offers; Workforce Collaboration; Electronic Visit Verification (SRI); Comprehensive Plan of Care timelines; Hurricane Season preparation; Critical incident reporting; NOW Rule Notice of Intent
6/1/17	HCBS Settings Rule extension granted by Center for Medicare and Medicaid Services (CMS)

#### Provider Meetings/Conferences

Date	Provider (approximate number in attendance)
1/28/16	Supported Living Network Quarterly Meeting (123)
3/9/16	Community Provider Association Meeting (58)
3/18/16	ARC of Louisiana/Louisiana Conference of Executives (72)
5/10/16	Arc of Caddo-Bossier Annual Leadership Luncheon (47)
5/11/16	Community Provider Association Meeting (42)
7/13/16	Community Provider Association Meeting (39)
9/8/16	Meeting with the Blaneys and Senator Regina Barrow (11)
9/23/16	American Association on Intellectual and Developmental Disabilities (AAIDD) Louisiana Conference (139)
10/21/16	Meeting/webinar with providers regarding HCBS settings and employment (more than 200)
1/31-2/1/17	Community Provider Association Legislative and Public Policy Conference (more than 100)
2/6/17	ARCO Monroe Volunteer and Employer Appreciation Luncheon (more than 100)
3/31/17	Home and Community-Based Services Settings Rule Training, Gonzales (40)

#### Provider Trainings - Request for Services Registry Initiative

Date	Locations
9/27/16	Alexandria
9/28/16	Metairie
10/6/16	Baton Rouge

Roughly 251 individuals from local governing entities (LGEs) and support coordination agencies participated.

#### Stakeholder Engagement

Frequency	Group
Monthly	OCDD Core Advisory Stakeholder Group
Bi-monthly	Regional Advisory Council/State Advisory Council
Quarterly	Louisiana Developmental Disability Council
Yearly	Partners in Policymaking