February 10, 2011

Senator Mark DeSaulnier, Chair  
Assembly Member Holly Mitchell, Chair  
Senate Budget Subcommittee #3 on Health and Human Services  
Assembly Budget Subcommittee # 1 on Health and Human Services  
State Capitol – Room 5019  
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Sacramento, CA 95814.  
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RE: Department of Social Services (Budget Item 5180) In–Home Supportive Services

Dear Assembly Member Mitchell and Senator DeSaulnier,

The Governor’s proposal to make sweeping changes to In-Home Supportive Services program and eligibility will deny thousands of frail Alameda County residents the assistance they need to continue living safely in the community. I urge your committees to reject these cuts.

IHSS helps people remain living safely at home – at a fraction of the cost of nursing homes, emergency rooms and hospitals. Over 73,000 Bay Area elders, children and adults with disabilities rely on IHSS to help them live safely in the community – In Alameda County, over 17,600 people receive in-home care through IHSS.

Reduction in Hours - The Governor proposes to reduce all IHSS recipients’ hours by 8.4%.

- This is on top of the 3.6% reduction in hours enacted by the current year budget signed in October 2010, so the number of hours of care would be reduced by 10%. But a frail elderly person’s need for assistance does not lessen. In fact, with less care, that person may decline, may be less safe, may wind up needing more care.
- UCLA Center for Health Policy Research finds that cutting back IHSS hours would cause elderly and sick people, as well as those with disabilities, to cut back on food and medicine so they could continue receiving care and live in their homes.
- This cut does more harm to those who are most fragile. Because the cut is a percentage of hours, IHSS recipients with the most hours would lose more hours than recipients with fewer assigned hours. But in fact, those with the most hours have higher level of care needs, are sicker or more disabled, and can least afford to lose care hours.

Elimination of Domestic Services - The Governor proposes to eliminate domestic services (including housework, shopping for food, meal preparation and cleanup, and laundry) for IHSS recipients who live with their IHSS provider or other people.

- Cooking, cleaning, laundry... these instrumental activities of daily living (IADLs) contribute to a person’s health and safety. IHSS Social Workers already evaluate these IADLs when assessing level of care and assigning IHSS hours. Social Workers take into account who lives with the elder, their availability and ability to provide care.
Often the other people who live with the IHSS recipient are unable to provide many of the instrumental activities of daily living, either because they have other employment or because they are not physically capable of performing the task. Sometimes the other person is also an IHSS recipient.

The fact that an IHSS recipient lives with the IHSS worker suggests two things: 1) the recipient is receiving far more care hours than are paid through IHSS, and 2) the worker has chosen to provide care in lieu of other employment.

The Legislative Analysts Office estimates that IHSS recipients would lose an average of 14 to 16 hours per month. This will force many caregivers to seek other employment, leaving the IHSS recipient without needed care.

**Doctor’s Certification** - The Governor’s proposed budget would require all IHSS recipients to have a physician’s written certification that IHSS services are needed to avert out-of-home placement.

- No standard exists for physicians to use to determine the need for in-home services, nor are physicians familiar with or trained for this type of evaluation. This is expertise that social workers possess, and IHSS social workers have used in determining the need for IHSS services.
- While many IHSS recipients would be eligible for nursing home placement today, others have chronic medical conditions or disabilities that can be managed with help. They are able to avoid serious medical complications – and nursing home level of need – thanks to the supportive care they receive through IHSS.
- This month, a study from UCLA Center on Health Policy Research reports that frail elders who lose supportive services will not seek nursing home admission, but will instead attempt to “make do,” a situation that will lead to increased emergency room visits and hospitalizations.

A legislature that considers making such ill-conceived and harmful cuts to IHSS, but does nothing to consider real cost-saving measures such as replacing IHSS antiquated paper payroll system with an electronic solution (last year’s SB 886), is not being honest or serving California’s need for real budget solutions. I ask you to do no harm; I urge you to reject the Governor’s proposal and to seek savings and revenue approaches that will, in fact, balance the budget.

Sincerely,

Kathleen A. Kelly,
Executive Director