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Nevada Home Care Employment Standards Board

Nevada Home Care Employment Standards Board 2022 End of Year Report

Department of Health and Human Services Division of Public and Behavioral Health

For submission to the Director of the Department of Health and Human Services.

No later than one (1) year after the first meeting of the Home Care Employment Standards Board shall the Board submit to the Director of the Department a report of its findings and recommendations.

On behalf of the Council:

Cody Phinney – Chair
Maxine Hartranft – Representing Employers
Kristi De Leon – Representing Employers
Robert P. Crockett – Representing Employers
Shanieka Cooper – Representing Employees
Farren Epstein – Representing Employees
Safiyyah AbdulRahim – Representing Employees
Gerardo Luis Gonzales – Representing Recipients
Stephanie Schoen – Representing Recipients
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Brett K. Harris – Nevada Labor Commissioner

Special Acknowledgements:

The Council would like to recognize the contributions of our technical and administrative support team.

Kayla Samuels
Pierron Tackes
Shannon Litz
Joseph Filippi
Isabelle Eckert
Rex Gifford

The Council would like to thank the various departments and organizations who lent their knowledge and expertise for the Home Care Employment Standards Board's investigation of the home care industry.

“Investing in quality home care through raising the reimbursement rate and minimum wage will lead to better health outcomes for consumers and long-term savings for the State. [...] Home and community-based services are the future. [...] The community is the one that reaps the benefits. All of us, all of us as citizens, all of us as people reap the benefits. It’s not just the individuals who need the services. [...] Families, economy, communities, we all reap the benefits when we invest in home and community-based services.”

- *Farren Epstein, Board Member Representing Home Care Employees*

“Home care is a crucial area for the State to invest in. Since I receive home care services, I don’t have to go to the hospital as much as I might have, and I don’t have to go to expensive nursing homes. This service saves Nevada state taxpayer money and home care services are very positive for the environment and for the well-being of the State. Also, for the well-being of individuals because if you are not forced to move out of your house, it makes a big difference in your long-term care. You’re surrounded by people that you are familiar with. You can continue with your normal routine and do the things that you enjoy.”

- *Gerardo Luis Gonzales, Board Member Representing Home Care Recipients*

“In this industry, you know, it’s a choice to become a caregiver, and when you make that decision, you made that decision based on knowing the rate. You know what it includes. I think it is beneficial to be able to get paid to care for your family members and to do a service. To me the service is in my heart, it is what I love to do, but I know it is a career choice as well. That’s why we’re here right? Because it’s not really our decision, you know, to give the amount that we give. And that’s why we’re here. We’re here to fight for that because we agree, and we stand together with the workers in the field to say we have a very important job and we make a difference, and we need to be appreciated. To be appreciated is to be reimbursed more.”

- *Kristi De Leon, Board Member Representing Home Care Employers*

Introduction

[Senate Bill \(SB\) 340](#) of the 81st Session of the Nevada Legislature, codified into [Nevada Revised Statutes \(NRS\) 608](#), allowed for the creation of the Nevada Home Care Employment Standards Board (HCESB). This board is tasked with the review and investigation of the improvement of working conditions in the critical home care industry. Home care is non-medical personal care assistance provided by a personal care agency or an intermediary service organization.

HCESB has strived to meet monthly since December 2021, with the following subcommittees meeting intermittently as needed:

- Subcommittee on the Medicaid Home and Community Based Services Plan
- Subcommittee on Systemic Racism and Economic Injustice

Staff have given reports regarding HCESB recommendations and activities to the Nevada Silver Haired Legislative Forum and Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs, and has garnered support from these councils.

This report fulfills the duty, detailed in NRS 608.640, for HCESB to submit to the Director of the Department of Health and Human Services (DHHS) a report of its findings and recommendations no later than one (1) year after the date of the first meeting of the Board.

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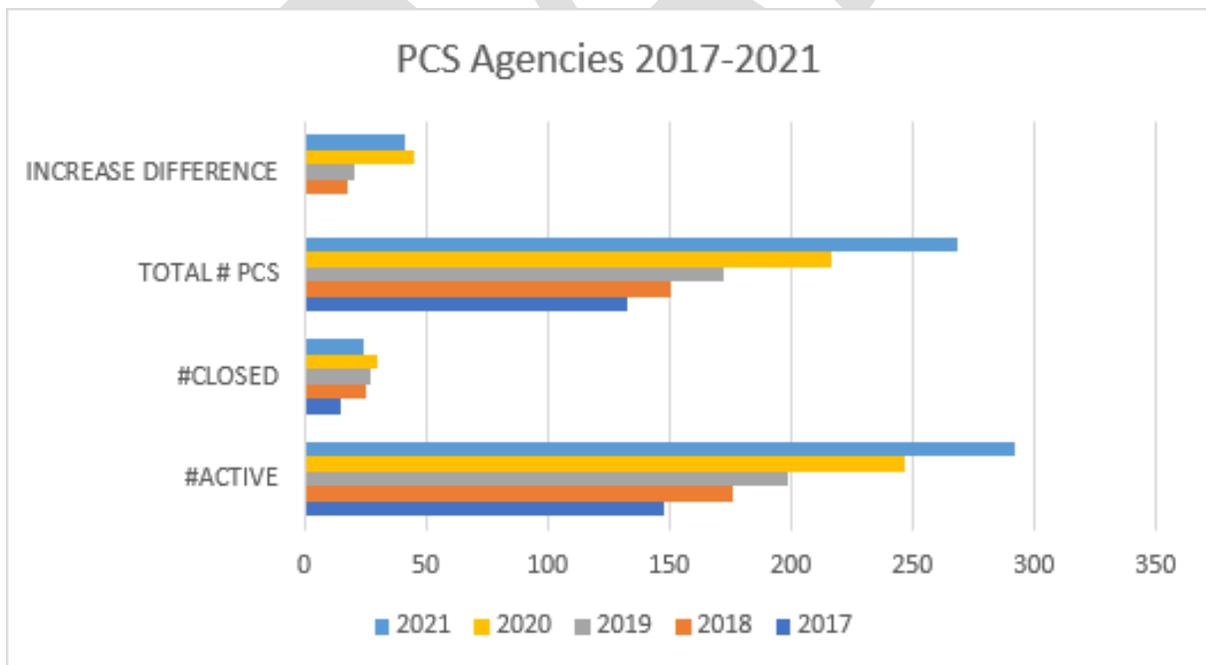
Effects of Home Care on the Overall Healthcare Industry

The presentation detailing the [effect of home care on the healthcare industry](#) and why robust home and community-based services are beneficial to state spending was approved by HCESB for inclusion in this report during the August 23, 2022 meeting of the Board.

Nevada has seen a notable increase in Personal Care Services (PCS) Agencies from 2017 to 2021 and is currently home to more than 13,000 home care workers who provide older Nevadans and persons with disabilities personal care, attendant care, homemaker, companion, respite, and chore services.

Fluctuation of PCS Agencies, 2017-2021

YEAR	#ACTIVE PCS's	#CLOSED PCS's	TOTAL # PCS's	PCS INCREASE DIFFERENCE BY YEAR
2017	148	15	133	
2018	176	25	151	18
2019	199	27	172	21
2020	247	30	217	45
2021	292	24	268	41



HCSEB Surveys

HCSEB created and distributed two surveys, one for [home care employers](#) and one for [home care workers](#), that was open for voluntary participation May 2022 through July 2022.

The survey was distributed as follows:

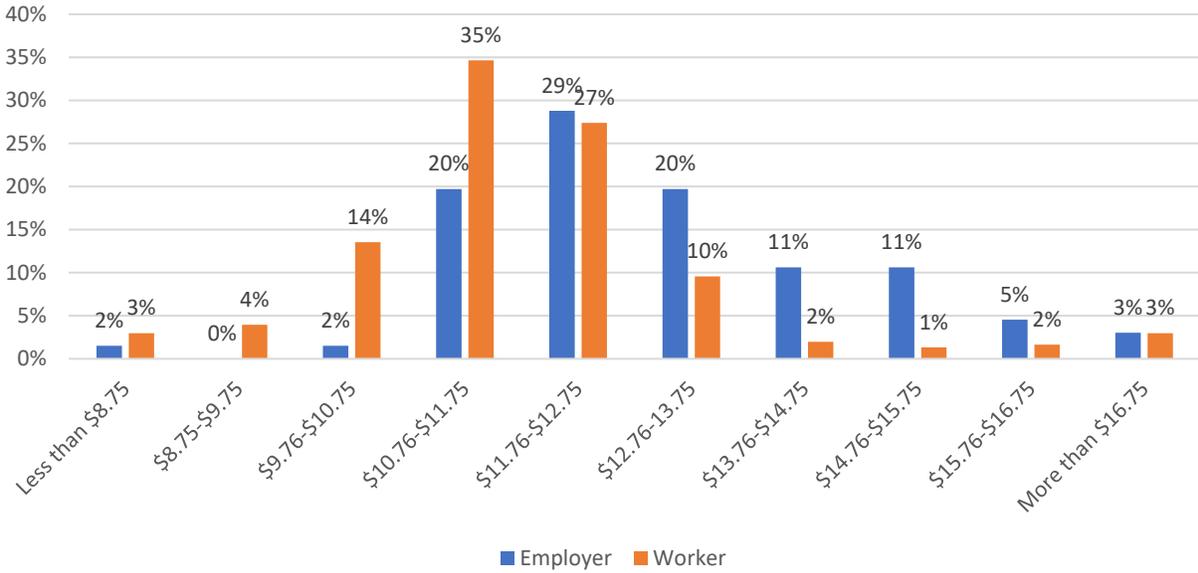
- Distribution to employers via State Listserv that asked employers to complete their survey and distribute the worker survey to all employees
- Campaigns on Division of Public and Behavioral Health social media accounts
- Distribution requests to partners (Nevada Medicaid, Service Employees International Union (SEIU), Office of the Labor Commissioner)

Survey results were used to inform requests for information and recommendations from the Council.

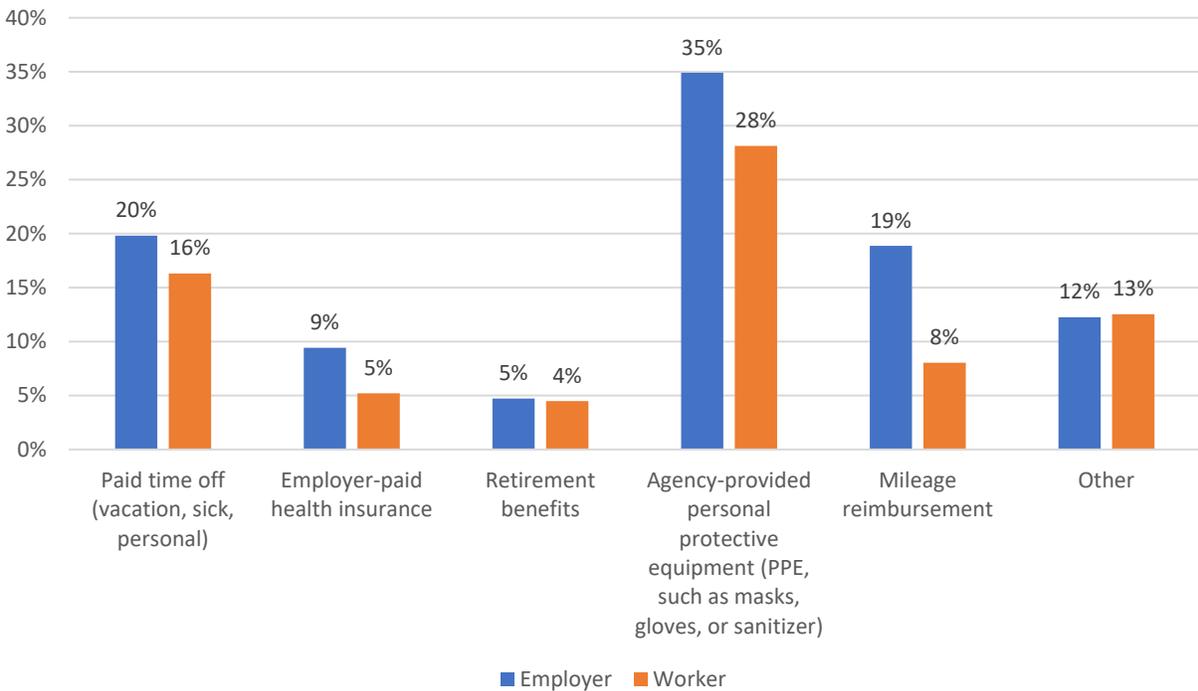
Notable Findings

- 78% of home care workers identify as women.
- 61% of home care workers are workers of color.
- Average respondent worked ten (10) years as a home care worker.
- 54% of workers provide home care for a family member.
- 78% of employers are contracted with Nevada Medicaid and report that an average of 70% of their clientele are Medicaid recipients.
- 67% of employers say the current Medicaid reimbursement rates hurt what they pay in personal care worker wages.
- 81% of workers reported that their employer reviews the consumers' service plan with them.
- 23% of workers reported having worked more than 40 hours in a week and not receiving paid overtime.
- 75% of workers who care for more than one (1) client reported not knowing their employer's mileage reimbursement policy.
- Employers reported an average of 74% turnover rate of home care workers in 2021. 88% report losing personal care workers to higher paying jobs that require fewer skills.

Employer vs Worker Reported Wages



Employer vs. Worker Reported Benefits Provided or Received



Caveats and Considerations

Employer Survey

- Responses from approximately 48% of PCS agencies
- Open response, anyone may take survey

Worker Survey

- Responses from approximately 3% of home care workers
- Responses appear representative of the industry given that the demographic data aligns with data from the Guinn Center and PHI
- Possibly could have gotten more responses if able to distribute survey in Spanish, HCESB and supporting staff did not have resources to create a Spanish version of the survey.
- Unable to distribute survey directly to workers. Had to go through employers and request they distribute survey to workers.
- Open response, anyone may take survey
- Survey heavily features career home care workers. Findings may have differed if focused on newer workers.

Recommendations

Rates & Wages

One of the primary goals of HCESB was to address the current Medicaid reimbursement rate for home care services and the minimum wage paid to home care workers. After considerable investigation into current wages of home care workers in Nevada, average wages across similar occupations in the state, average costs of living, and costs of operating a personal care agency, HCESB determined a reimbursement rate of \$25 and minimum wage of \$15 would be a meaningful improvement. The [recommendation](#) was made during the June 28, 2022, meeting.

Since making the recommendation, Nevada Medicaid has taken this direction into consideration when evaluating budget initiatives of the next legislative session. Additionally, DHCFP is utilizing American Rescue Plan Act (ARPA) funding to conduct a rate study. A legislative mandate is necessary for DHCFP to require an enrolled provider to direct a percentage of a Medicaid reimbursement rate to an employee, which the Board hopes will occur in the 2023 legislative session.

NAC 449.3973 – Paid Trainings

At the March 8, 2022 meeting, HCESB made a [recommendation](#) that Nevada Administrative Code (NAC) 449.3973, detailing the duties and responsibilities of a personal care agency administrator, be updated so that required trainings must be paid for by employers to lessen the financial burden of being a home care worker.

The proposed changes are currently undergoing the regulatory process and are expected to continue to the Legislative Commission for approval before the 2023 legislative session.

Medicaid Home and Community Based Services Plan

The Board and subcommittee passed [recommendations](#) during the April 26, 2022, May 2, 2022, and May 24, 2022, meetings regarding the Medicaid Home and Community Based Services Plan to reopen the first round of \$500 supplemental payments to home care workers, make application for these supplemental payments mandatory for home care employers, and to require that Nevada Medicaid obtain mandatory spending reports from personal care agencies detailing how the 15% supplemental payments were spent.

A survey has been sent out by the Division of Healthcare Financing and Policy (DHCFP) to enrolled Medicaid providers of personal care services to inquire why an organization did not apply for the first round of \$500 payments. DHCFP has reopened applications for the first round of \$500 payments to survey respondents who have expressed interest in applying and has encouraged providers to apply for the second round. HCESB has been informed that it is not within the scope of DHCFP to require personal care employers to apply for the \$500 payments to workers.

DHCFP has developed a voluntary survey to send to all providers who received the 15% supplemental payment that inquires what activities the enhanced funding was spent on by providers.

Employee Requirements for Personal Care Agencies

After findings suggested home care workers may be wrongly classified as independent contractors and thus not entitled to the benefits of being an employee, HCESB made a [recommendation](#) during the June 28, 2022 meeting that DHHS request a hearing on the Medicaid manuals that affect personal care to make a change that requires personal care agencies to only be permitted to hire W2 employees and ban the hiring of independent contractors by personal care agencies.

DHCFP has assured the Board that the Division will collaborate with the Bureau of Licensure and Certification to determine potential next steps since the recommendation relates to enrollment of personal care services organizations.

Know Your Rights

Passed at the August 23, 2022 meeting, HCESB has [recommended](#) distributing a Know Your Rights bulletin to all home care workers after the document has been approved by the new Labor Commissioner upon appointment.

Finalization of the Know Your Rights Bulletin is being addressed by the new Labor Commissioner.

Job-Related Expenses

In an attempt to lessen the financial burden of training and hiring on both workers and employers, HCESB passed a [recommendation](#) at the August 23, 2022 meeting to make all required job-related expenses be paid by the employer and for HCQC to look for opportunities for regulatory relief that does not compromise health and safety.

Respite

At the October 4, 2022, meeting, the Council made a [recommendation](#) for personal care respite services to be reimbursed at the same waiver rate of the service the respite worker is providing.

Consumer Direction Options Counseling

In order to improve conditions for both personal care workers and recipients, HCESB [recommended](#) the implementation of options counseling by case managers where recipients of personal care services would be educated on the Intermediary Service Organization (ISO) and agency models, and the recipient would be required to sign off on their delivery model selection.

Acknowledgement of Systemic Racism

Following considerations in the Subcommittee on Systemic Racism and Economic Injustice, at the October 4, 2022, meeting, HCESB approved the [recommendation](#) for DHHS to release a public acknowledgement regarding the low wages and systemic racism present in the home care industry.

Investigation of Discrimination

At the October 4, 2022, meeting, HCESB approved a [recommendation](#) from the Subcommittee on Systemic Racism and Economic Injustice for an industry-wide investigation to be conducted with the goal of developing policy solutions to systemic racism.

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Additional Goals and Suggestions

Housing Security

The Board has repeatedly expressed concern over the struggles home care workers face in securing affordable housing. HCESB member, Shanieka Cooper, addressed her personal experience with the issue in an [interview with Las Vegas KTNV Channel 13 Action News](#). The Board hopes to see continued efforts in finding solutions for the current housing crisis.

Medicaid Electronic Visit Verification (EVV) System

HCESB suggests the continual assessment and improvement of the Medicaid EVV system. Board members expressed dissatisfaction with the current system and possible improvements during the [April 26, 2022](#) meeting.

Rates and Wages

The Council stands behind their recommendation for a \$25 Medicaid reimbursement rate for home care services and a \$15 minimum wage for home care workers. After the implementation of this recommendation, HCESB urges continual assessment of the rates and wages in home care and to raise the Medicaid reimbursement rate as needed to allow employers to cover expenses while paying workers competitive wages. Board members expressed strong support for subsequent increases in the Medicaid rate and minimum wage for home care workers in the [June 28, 2022](#) meeting.

Recommendation Implementation

The Board is interested in conducting follow-up investigations into the implementation of approved recommendations.

Systemic Racism

The Council thanks Governor Sisolak for declaring racism a public health crisis and urges continued work on addressing injustice in the health care system.



“Family caregivers face so many obstacles from isolation, high levels of stress, exhaustion, lack of respite care, and physical demands no matter what our age or medical situation. I wake up every four hours, every night, to turn my son Evan, who is an incomplete quadriplegic. That interrupted sleep really drains you. We suffer from a lack of hope for our future and our loved one’s future.

“Many of us have given up careers because we couldn’t find help for our loved ones. We have been the ones who

have stepped up in this caregiver shortage crisis, especially during Covid, and we need to be supported. Because of our commitment to our loved ones, we fill in the gaps in the workforce caused by low funding, meager wages, and lack of benefits. We urgently need to raise the Medicaid reimbursement rate to \$25 an hour and set a \$15 minimum wage for caregivers.”

**Remarks by Farren Epstein, home care worker and consumer
Home Care Employment Standards Board member**



“Every day, we are in a desperate struggle to survive on \$11 an hour with the cost of living going through the roof. Every day, we have to make painful choices about whether to feed our kids, pay the rent, pay the electric bill, fill up our gas tank, or buy essential medications. Every day, home care workers are leaving the field to work in other industries that pay double the wages with benefits and less stress.

“We need to all acknowledge that systemic racism is at the heart of why we are so underpaid for our essential work and why we have no healthcare, paid time off, or other benefits. Like the recent Standards Board survey showed, our workforce is 77% women and 61% people of color. Because we’re majority women and people of color, we’ve been exploited, undervalued, underpaid, and held down for so long. The recommendations of the Standards Board have to become a reality to lift up caregivers and address racial inequality in the industry, so we can continue to be there for our clients.”

**Remarks by Safiyyah AbdulRahim, home care worker
Home Care Employment Standards Board member**



“I’ve been caring for a military veteran since 2013, and we’ve built a strong relationship. Home care is very intimate work, on both a physical and emotional level. I help my client with bathing, get him dressed, and put lotion on his skin because the air here is so dry. I also talk with him a lot and give him gifts on his birthday. I love what I do because I know it makes such a big difference in his quality of life.

“The pandemic has been very hard on seniors, and home care workers have been a lifeline for our clients. We’ve risked our lives to keep our clients safe at home and made sure they don’t get lonely or isolated. But for my essential work, I only make around \$10.50 an hour, and every day is a struggle to make ends meet. We’ve stuck with our clients through the pandemic in order to provide loving, kind, helpful care. Now we need elected leaders to care for us and implement the recommendations of the Standards Board.”

Remarks during public comment by Rozetta Love, home care worker



“Home care is one of the most important jobs in America, especially with the aging population, but it is probably one of the worst industries in terms of pay and benefits. It’s shameful that we dedicate our lives to providing compassionate healthcare to others’ family members, but only 5% of us have employer-paid health insurance for ourselves.

“My family and I recently experienced homelessness because our landlord raised the rent by \$200 and basically gave us three days to pack our bags and get out. My son is paralyzed and in a wheelchair, so he of course couldn’t help with the packing or moving. It was a real struggle living out of a hotel room with my son and three young grandchildren. The whole process of the Standards Board has been about speaking out for what we deserve and what we’re worth, and creating urgent solutions.”

**Remarks by Shanieka Cooper, home care worker
Home Care Employment Standards Board member**



“Home care clients like myself are facing a healthcare emergency every day, and it’s critical that we do everything in our power to raise standards, funding, wages, and benefits. I’ve had to rely on home care workers, including my mom, in order to have a life of dignity and well-being. My mother’s hard work allows me to continue to live in our home and community. But she’s in her late 70s, and we’re both increasingly worried that, because of the workforce shortage, we won’t be able to find workers to fully take over from her when the time comes.

“We need to solve this crisis so workers are able to survive and provide for their families, and can be there for seniors and people with disabilities like me. When I receive care in my home, I don’t have to go to an expensive nursing home, and that saves taxpayers money. Raising the reimbursement rate and wages will have so many long-term benefits for the health of clients and the economy of our entire state.”

**Remarks by Gerardo Gonzales, home care client
Home Care Employment Standards Board member**



“I’ve cared for seniors and people with physical and mental disabilities in their homes since 2006. Home care work has always been essential, especially during this pandemic, but with some of my clients I only make minimum wage, which was \$9.75 an hour and recently went up to \$10.50. It’s sad that for such important work many of us only get paid the bare minimum. Like most home care workers, I live paycheck to paycheck. I often don’t have the money to pay for utilities; but the bill collectors don’t care, they want their money. Sometimes, I don’t even have enough money to buy food. I used to be on SNAP, the government Supplemental Nutrition Assistance Program, but then they kicked me off because they said I made too much to qualify.

“It takes a special person to do home care work. We’re performing very intimate tasks that take strong muscles, a strong mind, and often a strong stomach. We all know people aren’t lining up to become home care workers. I’m passionately calling for higher wages as soon as possible, which would help solve the workforce shortage and be a major positive step forward for both workers and our clients.”

Remarks during public comment by Dawn Ralenkotter, home care worker