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# **Attendant Workforce Data Collection for Consumer Directed Services (CDS) Programs**

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**HHSC Rate Analysis Department**

# Community Attendant Workforce Issues

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- Historically high turnover among community attendants across Texas.
- Meanwhile, the demand for attendants is rising as the population ages.
- HHSC is launching efforts to improve community attendant workforce stability.
  - Enhanced data collection is an important component of this effort.



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# CDS Programs with Attendant Services

Program Name	Type of Attendant Service
<b>Community Living Assistance and Support Services</b>	Transportation-habilitation, respite, Community First Choice (CFC) personal assistance services/habilitation
<b>Consumer Managed Personal Attendant Services</b>	Personal assistance services
<b>Deaf-blind with Multiple Disabilities</b>	Transportation-residential habilitation (less than 24 hours), respite services, CFC personal assistance services/habilitation
<b>Home and Community-based Services</b>	Transportation-supported home living, respite, CFC supported home living, CFC personal assistance services/habilitation
<b>Primary Home Care, Family Care, Community Attendant Services</b>	Personal assistance services



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# CDS Programs with Attendant Services (cont.)

Program Name	Type of Attendant Service
Texas Home Living	Respite, transportation-community support services, CFC community support services, CFC personal assistance services/habilitation
STAR Health MDCP	Respite, flexible family support
STAR Kids	Personal care services, CFC personal assistance services/habilitation
STAR Kids MDCP	Respite, flexible family support
STAR+PLUS	Personal care services, CFC personal assistance services/habilitation
STAR+PLUS HCBS	Personal assistance services, respite



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# Handouts

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- Rider Text from 2018-19 & 2020-21 General Appropriations Acts, Title II
- Workforce Turnover Questions in Cost Reports



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# Outline

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- Rider 207 (85R, 2017)
- Rider 157 (86R, 2019)
- Current Data Collection for Non-CDS Programs
- Discussion



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## Rider 207 (85R, 2017)

- Second and final Rider 207 report will be submitted to the Legislative Budget Board and Governor on August 31, 2019.
- Second report followed up on data collection proposals from first report.
- During the 86th legislative session (2019), Rider 207 was expanded in Rider 157.
- (See handout for text).



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# Cost Report Turnover Data Excerpt

## Texas Attendant Turnover in HCS/TxHmL and RC, 2018

Attendant Type	Average Wage	Average Percent Turnover	Average Estimated Days to Fill Vacant Positions	Average Percent Work Hours Filled with Overtime or Non-Scheduled Staff
<b>Home and Community-based Services / Texas Home Living (HCS/TxHmL)</b>				
Residential Attendant	\$10.38	72.4%	36	24.1%
Non-Residential Attendant	\$10.81	39.8%	31	22.1%
<b>Residential Care (RC)</b>				
Attendant	\$10.20	104.6%	13	16.5%

Note: This data is self-reported and cannot be verified by HHSC.





## **Rider 157 (86R, 2019)**

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- Data expansions in Rider 157 text; we would like to include consumer-directed programs in our data.
  - Will help establish a baseline to measure the progress of future initiatives and inform future policy decisions related to consumer directed services.



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## **Rider 157 (86R, 2019)<sub>(cont.)</sub>**

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- Separately, (a)(3)(B) mentions CDS:
  - “The plan shall include...ways to increase the use of consumer directed services”
- Rider 157 strategic plan is due on November 1, 2020.
- (See handout for text).



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# Current Data Collection for Non-CDS Programs

- Workforce turnover data is now captured in cost reports for the following programs with community-based settings as of 2019:
  - Community Living Assistance & Support Services (CLASS)
  - Day Activity & Health Services (DAHS)
  - Home and Community-based Services / Texas Home Living (HCS/TxHmL)
  - Primary Home Care (PHC)
  - Residential Care (RC)



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# Current Data Collection for Non-CDS Programs (cont.)

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- This data is also being collected for other Long-term services and supports programs with institutional settings.
- (See handout for sample questions in HCS/TxHmL).



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# Discussion

- Capturing workforce data on consumer-directed programs will require special consideration.
- Data collection design and feasibility
  - Design for operationalization
    - Participation across programs
    - Accessibility for all employers
      - i.e., internet access
    - Employer surveys, Financial Management Services Agency surveys, or other
  - Other limitations/concerns?



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## Discussion (cont.)

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- Other indicators
  - Any CDS-specific indicators that are missing from the non-CDS cost report tables?



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# Thank you

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# **Rider Text from 2018-19 & 2020-21 General Appropriations Acts, Title II**

## **Rider 207 (85R, 2017)**

**207. Recruitment and Retention Strategies.** Out of funds appropriated above in Strategy L.1.1, HHS System Supports, the Health and Human Services Commission (HHSC) shall develop recruitment and retention strategies for community attendants.

HHSC shall submit an annual report by August 31 to the Legislative Budget Board and the Governor reflecting actual expenditures, cost savings, and accomplishments implementing recruitment and retention strategies for community attendants. (Conference Committee Report Rider 142)

## **Rider 157 (86R, 2019)**

**157. Community Attendant Workforce Development Strategies.** Out of funds appropriated above, the Health and Human Services Commission (HHSC) shall develop strategies to recruit, retain, and ensure adequate access to the services of community attendants.

- (a) These strategies shall include the following:
  - (1) Gathering comprehensive data regarding attendants providing home and community-based services in both fee-for-service and managed care, including:
    - (A) number of attendants;
    - (B) turnover rates for attendants;
    - (C) vacancy rates for attendants;

- (D) number of attendants paid at the base wage rate;
  - (E) number of attendants paid above the base wage rate;
  - (F) average wage rate in the lowest-paying programs;
  - (G) historic wage levels in Texas community care, adjusted for inflation;
  - (H) any financial incentives that are passed directly to community attendants;
  - (I) factors that impact access to reliable attendant care;
  - (J) average cost of community care as compared to nursing facility care; and
  - (K) any other data the agency deems necessary to develop a plan to improve recruitment and retention of the community attendants and inform the Legislature about the challenges facing the provision of community attendant services.
- (2) Estimating the demand for community attendant services utilizing demographic trends and any other necessary information and the required community attendant workforce capacity required to meet that demand for the period from fiscal year 2022 to fiscal year 2031.
- (3) Convening a cross-agency forum to develop a state workforce strategic plan for retention and recruitment of community attendants. The plan shall include:
- (A) recommendations for the Legislature to consider related to potential dedicated sources of funding for community attendants;
  - (B) ways to increase the use of consumer directed services;
  - (C) innovative ideas for recruitment and retention of community attendants, which may include the following:
    - (i) wage and benefit incentives;
    - (ii) quality-based payment systems in managed care;
    - (iii) training people with disabilities to be community attendants;

- (iv) options to develop internships for students in health-related fields such as medicine, nursing, occupational therapy, physical therapy, and others; and
    - (v) recruiting retired seniors to work as community attendants.
  - (4) Developing enhanced network adequacy standards for Medicaid managed care organizations ensuring sufficient member access to community care attendants.
- (b) HHSC may conduct surveys or other methods as necessary to collect the data described in subsection (a)(1) if it is not available from existing sources.
- (c) In developing the strategic plan, HHSC shall work in consultation with the Aging and Disability Resource Center Advisory Committee, State Medicaid Managed Care Advisory Committee, Texas Council on Consumer Direction, and any other advisory committees and stakeholders as determined by the Executive Commissioner of HHSC.
- (d) HHSC shall submit the strategic plan and recommendations for implementation of the plan by November 1, 2020 to the Governor, the Legislative Budget Board, and permanent committees in the House of Representatives and the Senate with jurisdiction over health and human services.



# Workforce Turnover Questions in Cost Reports

## Example of Workforce Turnover Questions in 2018 HCS/TxHmL Cost Reports

Below are new tables that were added to the Home and Community-based Services / Texas Home Living (HCS/TxHmL) cost reports that will assist with data gathering on staff recruitment and retention, particularly for direct care workers such as attendants. Equivalent tables were also added to the Community Living Assistance & Support Services (CLASS), Day Activity & Health Services (DAHS), Primary Home Care (PHC), and Residential Care (RC) cost reports, but they were tailored for program-specific staff position types.

For the 2019 cost reports collected in 2020, the tables shown will be slightly refined based on the analysis of the staff recruiting information reported in the 2018 cost reports.

To collect data in a similar format for consumer-directed services, the tables would only include the attendant position type and would not include the question about the client enrollment count.

**Staff Recruiting Information**

Position Type	Difference in recruiting new staff from 1/1/2018 - 12/31/2018? Please select one option for each Position Type
<b>Residential Attendants</b> (Supervised Living/Residential Support Services (SL/RSS))	1 - Situation is worse (Harder to recruit)
<b>Non-Residential Attendants</b> (Supported Home Living/Community Support Services (SHL/CSS), Day Habilitation, Respite)	0 - No staff of this type
<b>Employment Services</b> (Supervised Employment (SE), Employment Assistance (EA))	0 - No staff of this type
<b>Nurses</b> (Registered Nurses (RNs), Licensed Vocational Nurses (LVNs))	2 - No difference
<b>Specialists</b> (Physical Therapists (PT), Occupational Therapists (OT), Dieticians, etc.)	1 - Situation is worse (Harder to recruit)
<b>Central Office Staff</b>	3 - Situation has improved (Easier to recruit)
<b>Administrative and Operations Staff</b>	2 - No difference

*Note: the second column in the above table has drop-down lists in each row with choices 0, 1, 2, and 3.*

Staff Retention Information

		Number of staff who left:						
Position Type	Number of staff (Full-time, Part-time, Temp, Medicaid, Non-Medicaid & Private Pay combined) on 12/31/2018	1/1/2018 - 6/30/2018	7/1/2018 - 12/31/2018	Number of vacancies on 12/31/2018	Percentage of work hours filled w/OT or non-scheduled staff (Estimates accepted if unknown)	Average number of days to fill vacant positions (Estimates accepted if unknown)	Current starting wage for this type of position within your agency in 2018 (Hourly Rate)	Average wage for this type of position after 2 years of employment (Hourly Rate)
Residential Attendants (SL/RSS)					%		\$	\$
Non-Residential Attendants (SHL/CSS, Day Hab, Respite)					%		\$	\$
Employment Services (SE, EA)					%		\$	\$
Nurses (RNs, LVNs)					%		\$	\$
Specialists (PT, OT, Dietary, etc.)					%		\$	\$
Central Office Staff					%		\$	\$
Administrative and Operations Staff					%		\$	\$
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>				

Length of Time with your Agency	Using the total number of staff from above, what is the length of time they have been with your agency?
LESS than 6 months	
BETWEEN 6 and 12 months	
OVER 12 months	
<b>Total Staff by Length of Time</b>	<b>0</b>
Number of HCS/TxHmL clients (Medicaid, Non-Medicaid, Private Pay, etc. combined) actively enrolled on 12/31/2018	

**Staff Benefits Information**

In addition to wages, does your agency offer benefits to staff? If Yes, check all that apply	Full-Time Staff	Part-Time Staff
Medical Insurance (paid in whole or in part by agency)		
Dental Insurance (paid in whole or in part by agency)		
Retirement (paid in whole or in part by agency)		
Paid Sick Leave		
Paid Vacation		
Short-Term Disability		
Long-Term Disability		
Jury Duty Leave		
Bereavement Leave		
Vision Insurance		
Employee Assistance Plan		
Life Insurance		