

Submitter: Jared Weekly

On Behalf Of:

Committee: House Committee On Rules

Measure, Appointment or Topic: HB3838

To the honorable members of the budget committee,

Ongoing discussions by those in favor of this bill focus on a need to address staff wages, staffing levels, and needed studies to determine the standard in order to obtain more funding from the legislature to increase wages for direct care staff. They are correct, we need higher wages and higher staffing levels. Why do we need to create a board and ask it to do another study? The state has already paid an outside agency at the direction of the legislature to determine what the funding realities for direct care services are in Oregon. The study shows that services are dramatically underfunded in Oregon, and the rate study undertaken at the direction of the legislature has recommendations to rectify that. The study shows providers that pay higher wages to direct care staff have done so at the cost of staffing levels for the people they support, and those that have maintained the higher staffing levels that the state desires have had to hold off on raises and increases to benefits to do so. The most effective way to remedy these issues is to fund services as outlined in the studies we have already done.

In the testimony given, while talking about the dire state of workers' wages, those in favor of the wage board have been clear that a study by the wage board needs to be done first with a completion date of 2028 and wage recommendations by 2030. This bill clearly isn't about fixing wages now, trying to learn what's going on in the system, or determining what funding is needed for wages. All three of those things are part of the current rate study. This bill is entirely about empowering the union, through the board, to take control of direct care services, as unionization attempts in our field have historically failed because unionization has not increased wages and benefits when the state controls the funding for services, and margins are so slim.

We already have our study done to address funding. Creating a committee with the promise of a better system to come out of it will not do this. Especially without a clear picture on how it will benefit the people who rely on these services or make life better for those who provide those services. We should not create more cost and regulatory systems in such an uncertain time without a clear path forward for the benefit of direct care staff and the people they support.