RESPECT US, PROTECT US, PAY US: CARE IS AT THE CENTER OF A JUST ECONOMY

THE BIDEN-HARRIS ECONOMIC PLAN INVESTS IN BLACK, LATINA AND ASIAN WOMEN TO BUILD A CAREGIVING INFRASTRUCTURE TO MAKE CARE JOBS GOOD UNION JOBS FOR ESSENTIAL CARE WORKERS OF ALL RACES.

CARE WORK IS A CORNERSTONE OF THE AMERICAN ECONOMY, AT THE CENTER OF OUR COMMUNITIES AND OUR FAMILY LIFE. IT HELPS OUR LOVED ONES LIVE WITH DIGNITY. Care workers who provide long term services and supports (LTSS) -- in people's homes and in facilities -- provide essential services. Care jobs should be good jobs--jobs that are well paid, with benefits and training, and all care workers should have the freedom to join a union and engage in collective bargaining. Long term care services should be accessible and affordable. The Biden-Harris economic plan would build a desperately needed caregiving infrastructure that includes jobs that you can sustain a family on and quality care that maintains the dignity and independence of aging adults and people with disabilities.

HOME CARE JOBS ARE THE FUTURE OF WORK. THE CAREFORCE IS THE FASTEST GROWING WORKFORCE IN THE COUNTRY. MAKING THESE JOBS GOOD, UNION JOBS THAT PAY AT LEAST $15 AN HOUR WILL LIFT UP MILLIONS OF WOMEN OF COLOR WHO MAKE UP THE OVERWHELMING MAJORITY OF THE CARE WORKFORCE. As more families need care, this creates a demand for services that may far outstrip the number of workers prepared to do the work. In order to address the need for a sufficient number of qualified, reliable caregivers, our public Medicaid dollars would go toward good jobs, rather than toward poverty wages that leave care workers unable to provide for their own families while caring for others. Investing in the careforce would also allow families to access care without facing financial ruin. It will increase financial security for Black women, Latinas, and Asian women and for immigrants of all races who do the bulk of care work. Equally important, it will begin to address the racist, sexist decision to leave care workers out of our outdated labor laws and finally usher care jobs into the 21st century to achieve racial and gender equity.

CARE WORKERS HAVE BEEN ON THE FRONTLINES OF THE COVID-19 PANDEMIC. Nursing home and home care workers have held our loved ones’ hands as they have died, otherwise alone, in facilities devastated by the coronavirus, or isolated in their homes and often unable to see their families. Far too many care workers themselves have been infected, and far too many have died because their employers or state authorities failed to provide adequate personal protective equipment, testing, affordable healthcare and paid leave. Care workers have risked their own families’ health to care for others, and many have had to make the impossible choice of going to work unprotected or staying at home without pay. During relief efforts, they have been among the first to lose income and among the last to receive support. Direct care workers --in times of stability or crisis-- are essential to our society, yet are treated as expendable.

NOW, NURSING HOME AND HOME CARE WORKERS ARE UNITED IN CLEAR DEMANDS: RESPECT US, PROTECT US, AND PAY US. Every caregiver should have the chance to join a union, organize and have a seat at the table to establish health, safety, and employment standards, to deliver the best possible care, and to transform low-paying, often dangerous jobs into good, union jobs. Public Medicaid dollars should be directed to improve standards for direct care workers and the quality of care they provide for seniors and people with disabilities.
CAREGIVING WORKFORCE PLAN

THE BOLD BIDEN-HARRIS BUILD BACK BETTER PLAN IS ONE OF THE FIRST ECONOMIC RECOVERY PLANS IN HISTORY TO CENTER THE WORK OF BLACK WOMEN. Biden and Harris recognize the inextricable link between race and the economy: care jobs are underpaid and undervalued because they are historically done by Black women and by immigrants. The poor standards facing the care workforce are a lens into the reality of work for millions of women of color. With direct investment in long term care work, working people of all races — Black, Latina white, Asian Pacific Islander, and Indigenous peoples — will benefit. By treating caregiving work as essential social infrastructure and creating good union jobs that pay at least $15 an hour and provide benefits, we can build a more inclusive, resilient America.

THE CAREGIVING WORKFORCE PLAN ADDRESSES THE RISING DEMAND FOR HOME- AND COMMUNITY-BASED CARE. Some 20 million seniors and people with disabilities need long-term services and supports (LTSS). Most prefer to receive those services at home or in the community. That demand is on the rise; Americans over the age of 65 will total 78 million people — 20 percent of the population — by 2035. Home care workers form the backbone of the LTSS workforce, helping aging Americans and people with disabilities live with dignity and maximum independence by providing essential assistance with activities of daily living, such as bathing, toileting and dressing. They also help with meal preparation and housekeeping, among other tasks.

THE CAREGIVING WORKFORCE PLAN RECOGNIZES THAT THE LONG TERM CARE SYSTEM IS FRAGMENTED, UNDERFUNDED, AND MUST BE TRANSFORMED TO MOVE OUR COUNTRY FORWARD. Over the next decade alone, demand will grow by 46 percent, with more than one million new home care jobs needed. Yet when it comes to meeting that need, the U.S. faces twin crises, both of which limit access to services.

Financing: An inadequate and imbalanced LTSS financing system severely limits access to home care services, leaving families to fend for themselves. Women, who disproportionately are in charge of care needs for their family, are often forced to leave paid jobs to provide unpaid care. The current recession unleashed by the pandemic is sidelining even more women as they make hard decisions to leave the workforce to take care of family members. This can have a negative long-term impact on women’s earning power for generations to come.

Workforce: Low wages, lack of benefits, such as affordable healthcare and paid sick leave, contribute to a significant turnover and shortage of home care workers. For decades, these workers, primarily women of color, have been intentionally excluded from basic labor protections. They also work in isolation, with little access to training or opportunities for professional development. The result is high turnover rates, which, in turn impact continuity and quality of care. It also means that even families that can afford to pay out of pocket for care often can’t find someone who meets their needs.

THE OPPORTUNITY FOR UNIONS FOR ALL WORKERS IS THE BEST WAY TO RAISE WAGES, IMPROVE WORKING CONDITIONS, CREATE FAMILY-SUSTAINING JOBS, AND BUILD A MORE INCLUSIVE, RESILIENT ECONOMY. By joining together in unions, home care workers gain a stronger voice to advocate for new funding and service expansion, to create training programs, and to fight for a fair shot at building a better life by winning higher wages and secure benefits. Federal action is required to create new accountability measures to ensure that taxpayer dollars that go to care providers and facilities guarantee dignified, safe care for all families and residents and invest in good jobs for all care workers — regardless of where they work, where they are from, or the color of their skin.

1. (https://phinational.org/caringforthefuture/itstimetocare/)
NEW FUNDING to expand access to home and community-based services, building on the foundation of existing state Medicaid HCBS programs. The Biden-Harris Build Back Better plan calls for an investment of $450 billion over ten years, which will result in 1.5 million new caregiving jobs — the majority of which will be home care positions. Funding should be structured so states receive incentives to expand access to home care services and build a sustainable workforce to serve those who need care.

Legislation should be designed to support state efforts to address the care crises by providing access to publicly-funded LTSS for all through a model that eliminates means testing and stops the “spend down” required by Medicaid of those who can afford some care, but not all the care they need.

FULLY REALIZING A NEW VISION FOR HOME AND COMMUNITY BASED SERVICES (HCBS) WILL REQUIRE CONGRESS TO WORK WITH THE NEW ADMINISTRATION TO PASS LEGISLATION WITH A ROBUST HOME CARE INFRASTRUCTURE THAT SUPPORTS WORKERS AND FAMILIES. WE NEED A CARE INFRASTRUCTURE — ALONGSIDE OUR PHYSICAL INFRASTRUCTURE OF ROADS, BRIDGES, AND BROADBAND — BUILT AROUND FAMILIES AND WORKERS WHILE ALSO BUILDING OUR ECONOMY.

This legislation must have four main pillars:

- **NEW FUNDING**
  - to expand access to home and community-based services, building on the foundation of existing state Medicaid HCBS programs. The Biden-Harris Build Back Better plan calls for an investment of $450 billion over ten years, which will result in 1.5 million new caregiving jobs — the majority of which will be home care positions. Funding should be structured so states receive incentives to expand access to home care services and build a sustainable workforce to serve those who need care.

- **HOME CARE AUTHORITIES**
  - that will serve as a resource for both workers who provide care and families who need it. Creating a single structure to oversee activities like recruitment, training, and pay will go a long way toward addressing the fragmentation of the current system. It will enable home care workers — especially the roughly one million independent providers who do not have a common employer — to engage with each other and create an employer of record so workers will have a meaningful way to unionize.

- **A CLEAR PATH FOR WORKERS TO HAVE THE CHOICE OF EXCLUSIVE UNION REPRESENTATION AND COLLECTIVE BARGAINING AND FOR FAMILIES TO HAVE A VOICE IN OUR CARE SYSTEM TO DETERMINE PAY RATES UNDER MEDICAID AND SET STANDARDS MORE BROADLY IS AN ESSENTIAL REQUIREMENT FOR ANY LEGISLATION.**
  - President-Elect Biden’s promise to raise home care worker wages to $15 is a first step, but providing workers with the freedom to join unions and engage in collective bargaining creates a regular, ongoing process that will ensure that wages are sufficient to support families. It can also address other employment practices including quality, training and workplace standards — a key step in reducing worker turnover.

- **A PROCESS BY WHICH QUALIFIED CURRENT AND FUTURE HOME CARE WORKERS WHO ARE UNDOCUMENTED CAN PROGRESS ALONG A PATHWAY TO CITIZENSHIP.**
  - The key to a good job is to work with dignity and with safety and stability. For this reason, legalization of undocumented care workers must be a central pillar of transforming care jobs into good jobs. Moreover, legalization would create a strong pipeline for home care workers, enabling us to meet the colossal caregiving needs we have now and into the future. The home care worker legalization program would be a two-step process of obtaining provisional immigration status first before applying for legal permanent residency, similar to past and current immigration proposals.
HOME CARE WORKFORCE FACTS

The 2.4 million home care workers in the U.S. comprise the largest segment of the direct care workforce and one of the nation’s fastest growing professions. ²

The median annual income for home care workers is $17,200.

The majority of home care workers lack common employer-provided benefits. Only 25.2% of agency-based home care workers and 17.1% of non-agency based home care workers receive employer-provided health insurance. The rates of employer-provided retirement plans are even lower.⁴ Only 13.1% of agency-based home care workers and 6.6% of non-agency based home care workers have access to an employer-provided retirement plan. These huge gaps in access to benefits remain even when controlling for demographic factors and education levels compared to other workers.

Home care workers paid by Medicaid may work for a home care agency, but an estimated 1 million home care workers, often referred to as Independent Providers, work in family-directed programs and are employed directly by the individual receiving services. There is also a large gray market of care workers who are not part of the formal workforce and thus tend to lack any employment protections. This disaggregation makes it difficult to find home care workers and set workforce standards.

“Home care workers” is an aggregate term used to refer to personal care aides and similar workers who provide assistance to individuals in their homes. They are part of a larger category of direct care workers that also includes nursing assistants and other workers who provide LTSS in institutional and residential or community settings.

87% of home care workers are women, 62% are people of color and 31% are immigrants. Undocumented individuals are overrepresented in the home care industry compared to the general population: 8.7% of workers overall compared to 12.6% non-agency based home-care workers and 14.2% of agency-based home care workers.³

Home care is largely financed through Medicaid, which accounts for 52% of all paid LTSS.⁵ Other sources are private out-of-pocket payments from families, long-term care insurance, and other small public programs.

Approximately 43.5 million caregivers have provided unpaid care to an adult or child in the last 12 months according to a study by the AARP and the National Alliance for Caregiving.