

September 6, 2023

The Honorable Chuck Schumer  
Majority Leader  
322 Hart Senate Office Building  
Washington, DC 20510

The Honorable Mitch McConnell  
Minority Leader  
317 Russell Senate Office Building  
Washington, DC 20510

**RE: Support S. 1332, the Recognizing the Role of Direct Support Professionals Act**

Dear Majority Leader Schumer and Minority Leader McConnell:

The undersigned national organizations write in support of S. 1332, the Recognizing the Role of Direct Support Professionals Act, which would help in creating a standard occupational classification for direct support professionals (DSPs). S. 1332 will ensure that when the Office of Management and Budget revises the standard occupational classification system, it considers the importance of a code for DSPs.

The creation of a distinct occupational classification for DSPs is a necessary first step in addressing a decades-long workforce crisis that threatens individuals with disabilities' access to critical supports and services through the Medicaid Home and Community Based Services (HCBS) program. The HCBS program supports individuals with disabilities to live full and independent lives in the community. The backbone of these services are the DSPs who not only provide essential caregiving services, but also promote independence and community inclusion through services that range from employment coaching and career development to assistance with relationship building and decision-making.

The critical supports provided by DSPs are threatened by a longstanding workforce crisis that has been exacerbated by the COVID-19 pandemic. According to the most recent Staff Stability Survey conducted by National Core Indicators<sup>®</sup> Intellectual and Developmental Disabilities (NCI), the national turnover rate among DSPs is approximately 43% and ranges as high as 59% in some states.<sup>1</sup> In addition, full-time vacancy rates for DSPs have increased to 16.5% in 2021—a roughly 94% increase from 2019.

The loss of DSPs across the field has left many individuals without stable access to home and community-based supports. In fact, a 2022 survey of community providers across the country indicated that the devastating impact of the COVID-19 pandemic and continued exodus of DSPs from the field has forced providers to stop accepting new referrals, delay the implementation of new programs and, in too many instances, shutter existing services altogether.<sup>2</sup> As a result,

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<sup>1</sup> National Core Indicators Intellectual and Developmental Disabilities *2021 State of the Workforce Survey Report*, available at <https://idd.nationalcoreindicators.org/wp-content/uploads/2023/02/2021StateoftheWorkforceReport-20230209.pdf>.

<sup>2</sup> American Network of Community Options & Resources, *The State of America's Direct Support Workforce Crisis 2022*, available at <https://www.ancor.org/resources/the-state-of-americas-direct-support-workforce-crisis-2022/>.

individuals with disabilities are left without consistent access to critical support and at a higher risk for hospitalization and institutionalization.<sup>3</sup>

The current occupational classification system directly impacts state and federal agencies' Medicaid HCBS policy decisions, including the determination of payment rates, which can have negative longstanding effects on the retention and recruitment for the DSP workforce. Under the Medicaid HCBS system, each state is responsible for demonstrating that payment for home- and community-based services is consistent with efficiency, economy, and quality of care and sufficient to enlist enough providers. To demonstrate compliance with this standard, most states use the federal occupational classification system to determine DSP wages. And unlike other industries where employers can raise employee wages and offset costs, employers in the Medicaid HCBS program are bound by these rates—meaning DSPs are uniquely impacted by the federal occupational codes or lack thereof.

Since there is no code for DSPs, states blend a variety of current and retired codes in an attempt to account for the wide array of DSP activities.<sup>4</sup> This has led to further inconsistency in DSP wage trends. A unique occupational code for DSPs will aid in the retention of DSPs by providing a foundation for rate-setting and stabilizing wages.

The lack of a specific occupational code for DSPs also impairs data collection. There is currently no mechanism to comprehensively collect employment and wage data specifically for DSPs. Without comprehensive data, the totality of the workforce crisis cannot be properly assessed. A unique DSP code will ensure the U.S. Bureau of Labor Statistics can accurately capture employment and wage data specific to the profession, which will in turn assist federal and state policymakers to inform and impact future policy.

The Medicaid HCBS program has grown exponentially since its inception 40 years ago and plays a critical role in ensuring people can be supported in their homes and communities. However, absent the necessary policy changes to sustain the DSP workforce, Medicaid HCBS programs will continue to fail to reach everyone in need. S. 1332 will help ensure federal recognition of the critical role DSPs play in providing supports for people with disabilities and will help in addressing the ongoing DSP workforce crisis by ensuring there is adequate data collection to inform future policymaking. We urge your support for S. 1332.

Thank you for your consideration of this issue. For questions, please contact Elise Aguilar, ANCOR's Director of Federal Relations, at [eaguilar@ancor.org](mailto:eaguilar@ancor.org).

Sincerely,

American Association of People with Disabilities

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<sup>3</sup> Dan Goldberg, POLITICO, *'People Will Die Waiting': America's System for the Disabled is Nearing Collapse* (Aug. 10, 2022) <https://www.politico.com/news/2022/08/10/americas-system-for-the-disabled-is-nearing-collapse-00050713>.

<sup>4</sup> Health Management Associates, *Review of States' Approaches to Establishing Wage Assumptions for Direct Support Professionals When Setting I/DD Provider Rates*, July 6, 2022.

American Association on Health and Disability  
American Network of Community Options and Resources (ANCOR)  
Amputee Coalition  
The Arc of the United States  
Association of People Supporting Employment First (APSE)  
Autism Society of America  
Autism Speaks  
Autistic People of Color Fund (APOC)  
Autistic Self Advocacy Network  
Autistic Women & Nonbinary Network  
Caring Across Generations  
CommunicationFIRST  
Council of State Administrators of Vocational Rehabilitation (CSAVR)  
Cure SMA  
Diverse Elders Coalition  
Eggleston  
Family Voices  
Justice in Aging  
Lakeshore Foundation  
Lutheran Services in America  
Muscular Dystrophy Association  
National Association for Homecare & Hospice  
National Association of Councils on Developmental Disabilities  
National Association of State Directors of Developmental Disabilities Services  
National Consumer Voice for Quality Long-Term Care  
National Disability Rights Network (NDRN)  
National Down Syndrome Congress  
National Health Law Program  
National PLAN Alliance (NPA)  
New Disabled South  
New Disabled South Rising  
PHI  
United Spinal Association