

State	Recruitment & Retention Still a Problem	Pass Through (mandatory or intended) had any Positive Impact	Data to Substantiate Impact on Recruitment and Retention	Type of Accountability System	Satisfied with Accountability System	Any Costs Associated w/audit Requirements if Applicable	State Considering Changes to WPT	State Undertaking any additional Efforts
Arkansas	Yes	Not impl. due to budget shortfall						Yes (see notes)
Colorado	Yes	(see note)	No	Survey		N/A		Yes (see note)
Illinois	Yes	Unknown	No	Annual Rpt.	Yes	N/A	Cost of living adj.	None indicated
Maine	Yes	Not in any measurable way (see notes)	No	Audit	Yes	Minimal	Yes (see notes)	Yes (see notes)
Michigan	Yes	Yes - Probably	Yes (see notes)	Audit	Yes	Yes minimal	Yes (see notes)	Yes (see notes)
Minnesota	Yes	No	No	Plan	Yes	N/A	Yes (see notes)	Yes (see note)
Missouri	Yes	No (see notes)	No	Survey	No (see notes)	N/A	Yes (see notes)	No
Montana	Yes	unknown assume some impact	No	Plan and Audit	Yes	minimal	Yes (see notes)	Yes (see notes)
Rhode Island	Yes	Yes (see notes)	No (see notes)	Plan and Audit	Yes	Yes	No Response to question	No
South Carolina	Yes	Yes (see notes)	No	Submit expanded cost report	Yes	none indicated	No	No
Texas	Yes	Implemented Sep-00						
Virginia	Yes	Unknown	No	Report	Yes	Yes	Yes (see notes)	No
Washington	Yes	No (see notes)	No	Audit & Other	Yes (see notes)	No	Yes (see notes)	No

Note: No follow-up survey received from California or Massachusetts

Notes:

Notes reflect survey responses and/or follow-up discussions of survey responses with states.

Arkansas: Did not implement wage pass through due to budget shortfall. Efforts have been underway over the past two years to use consumer-directed care as a strategy to help address the worker scarcity problem. As of late October 2000, approximately 2,000 family members and/or friends have been hired to provide care rather than relying on agencies. Consumer-directed care efforts are working out quite well thus far.

Colorado: Based on a survey done of providers receiving WPT funds, about 1/2 used the increase in reimbursement intended for wages/benefits for that purpose. Based on input received from providers, the amount of increase allotted was about half of that needed to make up lost ground. This, combined with declining unemployment rates, results in recruitment and retention continuing to be an issue. The increase was for non-skilled personal care services. The legislature requested that the Department establish a task force to examine rate disparities and identify possible solutions. The task force included representation from home health providers, nursing facility administrators, assisted living administrators, advocates, legislators, and departmental staff. Recommendations have not as yet been formalized. However, a report will go to the legislature for consideration of the Department's 2001-02 budget.

Illinois: Recruitment and retention still a major problem facing community care program (wage pass through approved for home care only). With regard to reporting by providers for accountability purposes, provider agencies are required to submit an annual report documenting that at least 73% of their reimbursement rate is spent on worker wages and benefits.

Maine: Considering possibly providing a wage pass through for aides working in additional settings not initially funded such as home care and seeking appropriations to continue/increase the wage pass through next year. Also considering changing accountability requirements (e.g. home care agencies don't file cost report). This session legislature appropriated funds for a .50 per hour increase in reimbursement rates for home care workers (excludes nurses). These funds will be harder to track since these agencies don't file cost reports. Many agencies are balking at "government telling them how to use their funds." These are the same providers who say they can't find or keep staff. Efforts are underway to work with the Board of Nursing to develop core curriculum for Certified Nurse Aides, Personal Care Aides and Residential care aides so a worker doesn't have to start all over if they move between jobs.

Michigan: State ending WPT for 2000-01 as a result of changes in appropriations language. WPT revenues are an offset to inflationary allowance all facilities receive but to receive the WPT, facilities must have a minimum wage of \$8.50 p/hr. for competency evaluated nurse aides. With regard to data concerning the wage pass through, while data shows that turnover rates have declined from 75% in 1990 to about 67% in 1998 as average starting wages have increased, the data also shows that market forces are pushing up wages faster than the impact of the wage pass through. (Source: Chart from Health Care Association of Michigan and follow-up discussion with staff of the Fee-for-Service Division, Medical Services Administration). With regard to additional steps being undertaken, nurse aide training and testing will be covered.

Minnesota: Expect there will be another legislative initiative this year to help problem but don't know if it will actually be implemented (have had wage pass through in place for 4 years now). Work groups have been set up that include state and private sector to study the issue and look for solutions.

Missouri: There has been no indication from industry of any positive impact of the WPT on recruitment and retention. The survey used to verify provider compliance with WPT requirements is being revised to limit variability of interpretation of questions to increase reliability and consistency. Reimbursement is being increased January 1, 2001 by \$.52 with the requirement that the increase be used to increase home care direct care staff wages/benefits.

Notes Continued

Montana: Assume that recruitment and retention would have been even worse problem in absence of wage pass through for nursing homes. Increased demand for entry level workers in all sectors and shortage of supply for these workers is driving up wages. Hoping to seek additional WPT increase for Medicaid Personal Care Services again in 2001. Also looking at non-wage initiatives such as welfare to work, recruitment and retention as part of the State's plan to comply with the Supreme Court decision in the case of *Olmstead vs. L.C.* With regard to accountability, will compare fiscal year 2001 wage plan with fiscal year 2000 wage plan to ensure that fiscal year 2001 wage increases pick up where fiscal year 2000 increases left off.

Rhode Island: The Rhode Island Partnership for Home Care conducted a survey of providers to determine the extent to which providers had increased wages and/or benefits for aide workers as intended by the reimbursement increase provided for state subsidized home care. While not a mandatory wage pass through, survey findings indicated that the vast majority of providers, particularly the largest providers of state-subsidized care, allocated a portion of reimbursement increases in a meaningful way to aide wages and benefits. Of the total survey respondents 75% increased worker wages. The hourly increase provided ranged from .75 per hour to \$2 per hour. Of those (5) indicating they did not increase wages with the increase, 4 were Medicare providers who indicated they already were offering competitive wages and benefits and the increase only brought them closer to covering costs. Half of the respondents indicated they had either instituted a benefit package or added to their benefit package as a result of the increase in reimbursement. Staff with the Partnership indicated that they had received anecdotal information from providers that the reimbursement increase had impacted retention but not recruitment.

South Carolina: Several providers indicated that the additional wages paid to personal care aides has helped them compete with other employers.

Virginia: Wage pass through funds will be rolled into reimbursement rates. Thus, no separate report will be required for nursing homes regarding these funds in future years (home care wage pass through funds did not require a separate report to account for WPT funds).

Washington: Anecdotal information indicates the Wage Pass Through has not impacted the recruitment/retention problem. Worker wages will be a topic of discussion for the 2001 legislature. In addition to home care (setting for which initial wage pass through approved), other settings are reporting difficulty with recruitment and retention of aides. Home care providers continue to report difficulty recruiting and retaining workers. With regard to accountability, the initial budget provision was somewhat unclear so some agencies did not increase wage as intended. The provision language has been corrected and the state is now satisfied with their ability to ensure that wage increases are passed on to the workers.

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