



9/28/22

Dear Madam Chair, members of the Legislative Sub Committee

My name is Matt Poel, owner and CEO of Great Livin'. Great Livin' is a provider on the New Mexico Developmental Disability Waiver, Mi Via Waiver, and more recently Intermediate Care Facility services (ICF Services). We provide 24-hour residential services, day services, and clinical services. We are also a proud member of ADDCP. All ADDCP members pay dues and volunteer their time with the intention of bettering New Mexico's various systems that provide the support for our DD population.

Madam Chair, members of the sub-committee, my presentation today is the closer to ADDCP's request to support a bill that will put 7.7 million dollars of additional reoccurring money into our system. Our attempt is to present the committee with facts supported by the evidenced based data given by Mr. Cornwell from the Dept. of Health, and Mr. Copeland and Mr. Kaul from ADDCP. We represent the voice and perspective of those implementing the service.

ADDCP has been presenting for many years with the message, "our Home and Community Based Service (HCBS) system is on the brink of collapse". Our system has survived because of Provider ingenuity and their ability to maneuver on a moment's notice: shifting limited resources and reducing costs, sometimes at the expense of quality and always at the expense of our staff, from the front-line Direct Care Professional to the Director who are put in the position of picking up duties as a result of cost containment. Allocation of recurring money in the past couple of years as well as the recent non-recurring money associated with the pandemic has enabled us to hang on. I know I am preaching to the choir when I say a system consistently existing in survival mode does not have the ability to focus on its mission and provide predictable, high-quality services.

I also started my career in this field working as a Direct Support Professional for ARCA. It was the early 90's and I was a student at UNM working on weekends. My pay was a little over \$7/hr. Although I had no experience working with our population prior to working at ARCA and had no plans of working with this population when I finished school as a licensed counselor. For one reason or another, each time I attempted to leave the field, to work with another population, the universe brought me back. In Graduate school, I was a DD Waiver Case Manager, and eventually started my own Behavior Therapy practice providing Behavior Supports to people receiving services on the NM Developmental Disability Waiver (DD Waiver). I have expanded service provision into a more comprehensive model and now am the proud participant in a company that provides the array of services I listed earlier.

I share my background with you today to personalize my, and many of ADDCP's Provider members' work history. My experience today is that most of the employees and contracted help Great Livin' hires, from our Direct Support Professionals to Administration and licensed Therapists share a similar work history. From top to bottom, we are the people providing the services. Unfortunately, due to underfunding, ever-changing and increasing regulations, and expectations beyond the training and



education of those expected to carry out the various services, the pool of interested prospects has dwindled to a trickle. The current state of New Mexico's and nationally our workforce has forced providers to throw our hands up in the face of pre-Covid expectation.

The details and statistics presented by Mr. Cornwell, Mr. Copeland and Mr. Kaul for New Mexico and nationally, are evidenced using ANCOR and our own New Mexico Provider networks' data. I can testify from Great Livin's standpoint, we are experiencing the same staffing shortages and financial resource deficiencies needed to keep up with competitive employment and provision quality.

Great Livin' and all ADDCP's Provider members have used the various financial resources made available during the pandemic to creatively put more money into the pockets of all our staff through wage increases, incentive programs, and a myriad of other imaginative perks to keep the dedicated people still willing to come to work employed. Our Provider network has gone from an average starting wage of \$11.96/hr. for Direct Care Professionals (pre-pandemic) to a current average of over \$14/hr. for Direct Care Professionals (Post Pandemic. These numbers do not include tax liabilities, benefits and other creative perks. These numbers do not include the compaction necessary for other essential positions that ensure quality and stability. The money used for these increases is still not enough to attract new interest or compete with other industries. And worse, the money we are using is not recurring. In 2023, the provider network will be even further behind than we are today. We will be forced to remove some of the perks and benefits keeping the few people willing to stay employed.

For the first time in my career, the clear and dire underfunding of our HCBS system, has brought the Provider network and an advocacy group together to attempt a collaborative bill originally intended to be presented and supported by both parties united. For the first time, Providers and advocacy agree, at least partially, on the problem; funding for service provision is inadequate. Unfortunately, we could not come to an agreeable conclusion over some of the more finite details. Providers need to pay attention to the entire array of service provisions like Direct Care Professional wages, compaction, insurances, cost of goods, employment laws, etc. Our collaborating advocate group had a more focused objective that unfortunately did not offer the necessary financial flexibility and contract law requirements Providers are faced with managing. Therefore, ADDCP is presenting to you our bill for 7.7 million to be invested into the system in a way that addresses those needs.

Ironically, this does give hope. ADDCP's network of providers is not the only group identifying the same systemic need. Our plight is real enough for two historically opposing perspectives to agree on the problem and to be on a similar page for the solution. The labor shortage is putting a strain on our system across the entire state in a way never experienced before.

As expressed, and shown in Mr. Cornwell's, Mr. Copeland's and Mr. Kaul's presentation, HCBS providers from all service types: residential services, day services, Therapies, and Behavior Supports have put themselves on self-imposed moratorium, removed certain services from their menu array, and/or have gotten out of the HCBS business completely. Our system desperately needs an influx of money above-



and-beyond both ADDCP's and the Department's ask, to thrive. We must start somewhere. The funding we are requesting will keep us alive.

We are in an industry whose purpose is to teach and support people how to thrive in New Mexico's greater community. It begins with how we treat and support each other. Madam chair and members of this committee, we ask for your support and endorsement to help move this bill forward to help us move the system away from just surviving and closer to thriving. Without this money, HCBS provisions to those currently in service and those coming into service under the HCBS array are in jeopardy.

Respectfully submitted,

Matt Poel
Chief Executive Officer
Great Livin' LLC
P (505) 246-6971
F (505) 247-2191
C (505) 620-3849
Matt@greatlivin.com