

### Rate Setting Board

August 19, 2024 1:00 p.m. – 4:00 p.m.

In Person/Zoom attendance

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# TAB 1

#### **Consumer Directed Employer Rate Setting Board**

Meeting #11

August 19, 2024 Blake East, 4500 10<sup>th</sup> Ave SE, Lacey Rose & Trillium Room 1:00 pm – 4:00 pm

#### Agenda

Time	Topic	Presenter(s)
1:00-1:15	> Welcome	Chair
	Approval of Minutes 08.05.2024	
	Opening Remarks/Old Business	
1:15-1:30	Public Comment	Chair
	BG Presentation	
1:30-2:00	Training and testing	Benefits Group
	Board Discussion	
2:00-4:00	Board Discussion	All
		Chair
	Break time when Board wants to break (15min)	
4:00	Adjourn	

Please note the agenda times may vary due to the flow of the meeting conversation.



### **Rate Setting Board Members**

Charles Reed	Chair
Adam Glickman*	Exclusive Bargaining Unit Designee
Bea Rector*	DSHS Representative
Ben Bledsoe*	CDE Representative
Cynthia Hollimon*	Governor's Office Representative
Rep. Kelly Chambers <sup>^</sup>	House of Representatives (R)
Rep. Steve Tharinger^	House of Representatives (D)
Senator Ron Muzzall <sup>^</sup>	Senate (R)
Senator Annette Cleveland <sup>^</sup>	Senate (D)
Georgiann Dustin^	State Council on Aging Representative
Tammy Bowen^	People with Intellectual or Developmental Disabilities Organization
Open Position^	People with Disabilities Organization
Eric Erickson^	Licensed Home Care Agency
Nellie Prieto^	Home Care Worker

<sup>\*</sup>Voting member, ^Advisory member



### Rate Setting Board Meeting Schedule

April 22, 2024 9:00am – 3:00pm	In Person/Zoom
April 24, 2024 9:00am – 3:00pm	In Person/Zoom
May 6, 2024 9:00am – 2:30pm	In Person/Zoom
May 17, 2024 9:00am – 3:00pm	In Person/Zoom
May 29, 2024 9:00am – 3:00pm	In Person/Zoom
June 5, 2024 9:00am – 3:00pm	In Person/Zoom
June 13, 2024 9:00am – 3:00pm	In Person/Zoom
July 8, 2024 9:00am - 3:00pm	In Person/Zoom
July 25, 2024 9:00am - 3:00pm CANCELLED	In Person/Zoom
August 5, 2024 9:00am - 12:00pm	In Person/Zoom
August 19, 2024 1:00pm - 4:00pm	In Person/Zoom
August 27, 2024 1:00pm – 4:00pm	In Person/Zoom

# TAB 2



#### **Rate Setting Board**

**Approved By-Laws** 

**Approved Charter** 

**Approved Policy Selecting Chairperson** 

**Approved Policy Establishing and Submitting Rates** 

Updated and approved on July 8, 2024

# TAB 3

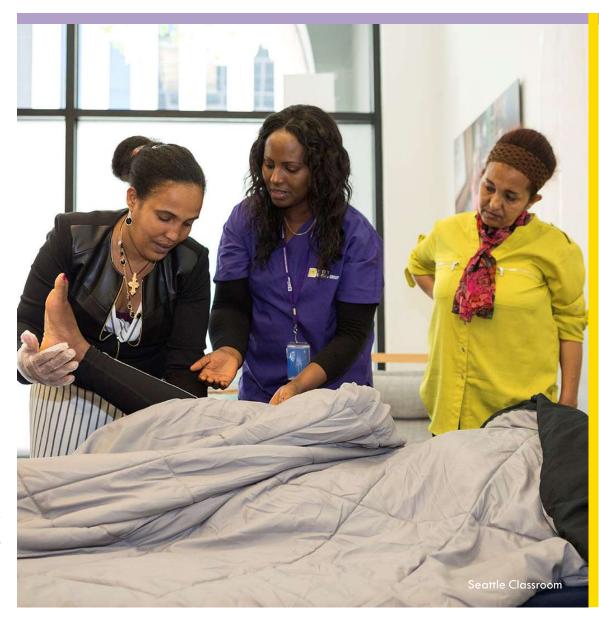
# HCA Exam Certification Administration

Rate Setting Board Presentation



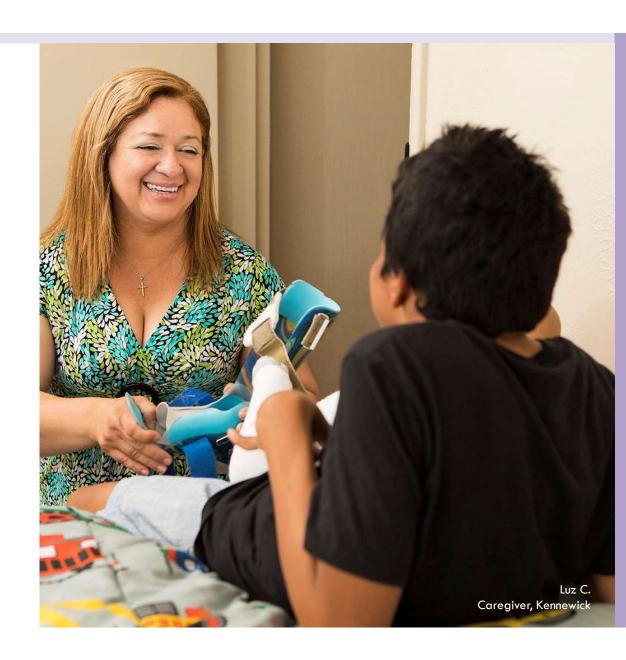
July 25, 2024

Confidential and proprietary information. For SEIU 775 Benefits Group Trustees and Employees only



### Agenda

- Overview of current state.
- Recent audit findings and legislation.
- Improvement opportunities.
- Models.





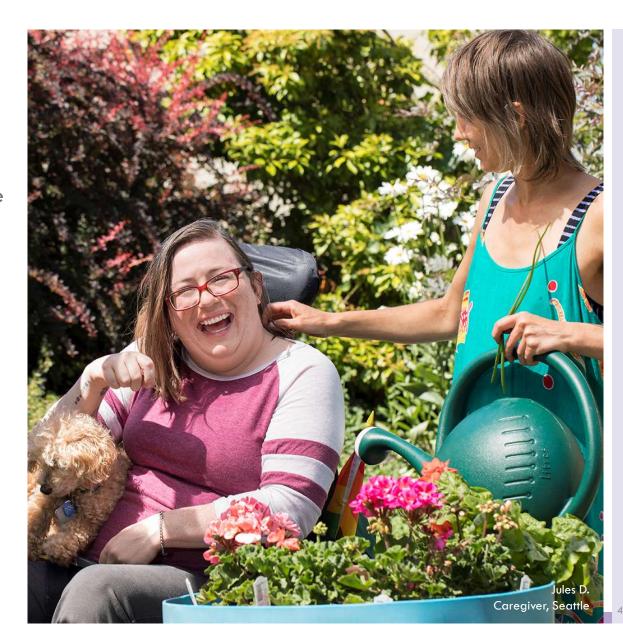


### **Overview of Current State**

### **HCA** Certification

#### Overview

- Verifies a home care aide possesses the essential skills and knowledge.
- Reassures clients their caregiver has the skills necessary to provide care.
- Ensures knowledge uniformity across the workforce.





### **HCA** Certification

Overview

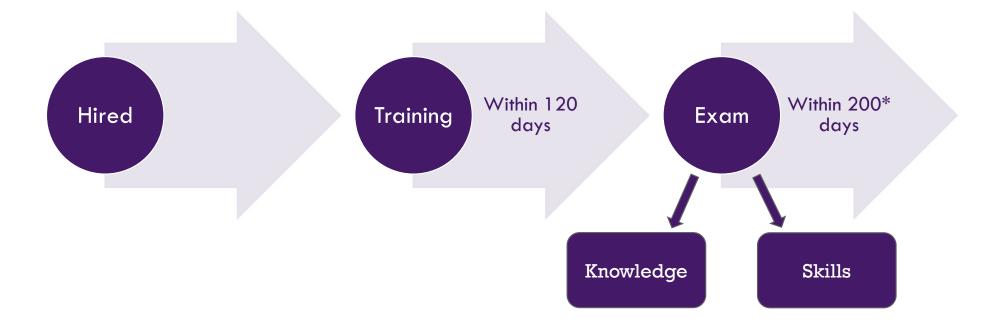


\*260 days for caregivers whose primary language is not English.



### **HCA** Certification

Overview



\*260 days for caregivers whose primary language is not English.



### **HCA** Certification Administration

#### **Current Exam Administrators**

#### **Department of Health**

- Overall program management.
- Exam content and validation.
- Credentialling processing.
- Prometric contract and vendor management.
- Data administration.

#### **Prometric (Exam Vendor)**

- Exam application processing.
- Scheduling hosting.
- Localization, interpreters and ADA Services.
- Computer-based knowledge exam hosting.
- Skills exam proctoring.
- Proctor management.
- Test site acquisition and maintenance.
- Test site equipment and supplies.
- Reporting for both exams.
- Caregiver/employer communication.
- Call center customer and technical services.



### Training Partnership: Certification Benefit

Defraying the Initial Costs of Certification and Testing

- The **Certification Benefit Program** is administered by the Training Partnership and governed by the Collective Bargaining Agreements between SEIU 775 and employers.
- It is designed to offset the cost burden for new caregivers to receive their HCA credential. This benefit authorizes payment to DOH for each qualifying caregiver's:
  - o HCA application (\$100).
  - o HCA exam (\$150).





Recent Audit Findings and Legislation

1163 State Audit

1163 State Audit Senate Bill 5278

DOH Legislative Report

#### From the report\*:

- "Many home care aide applicants were unable to test for months, reducing the likelihood they will pass."
- "Regions of the state lack test sites, resulting in long travel times for some applicants."



1163 State Audit

1163 State Audit

Senate Bill 5278 DOH Legislative Report

#### Related recommendations\*:

"Work with the Department of Social and Health Services (DSHS), SEIU 775 Benefits Group, Prometric and community trainers to:

- a) Develop and implement a plan to integrate testing into training, allowing applicants to test at the same location where they train.
- b) Allow remote testing within home care aide training programs, immediately after graduation or shortly after completion of the program.
- c) Determine the benefits and costs of having home care aide training programs authorize applicants to test instead of DOH."



Senate Bill 5278

1163 State
Audit

Senate Bill 5278

DOH Legislative Report

This legislation requires Department of Health (DOH) to work with key stakeholders to produce a Legislative Report documenting how they will accomplish the following objectives:

- "Devise a system that reduces delays between training and testing for home care aides.
- Examine existing challenges related to a lack of testing sites.
- Establish performance measures and data collection criteria to monitor the overall length of time between training and testing and the number of available test sites.
- Establish accountability mechanisms for the overall training to testing process.
- Establish performance-based contracts for vendors who administer the tests."\*



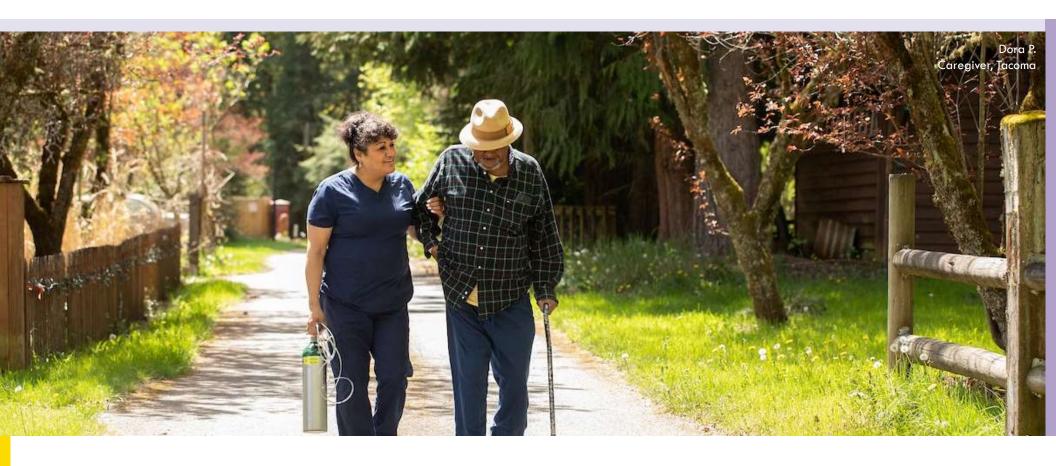
Senate Bill 5278

1163 State Audit Senate Bill 5278

DOH Legislative Report

- DOH has been partnering with key stakeholders to prepare the report.
- DOH is working with Brookdale to pilot integrated testing and training where there is a centralized worksite.
- The Benefits Group is participating in the work group to leverage any learnings that might be useful in supporting caregivers without a centralized worksite.





# Improvement Opportunities

### Opportunities for BG to Make Impact

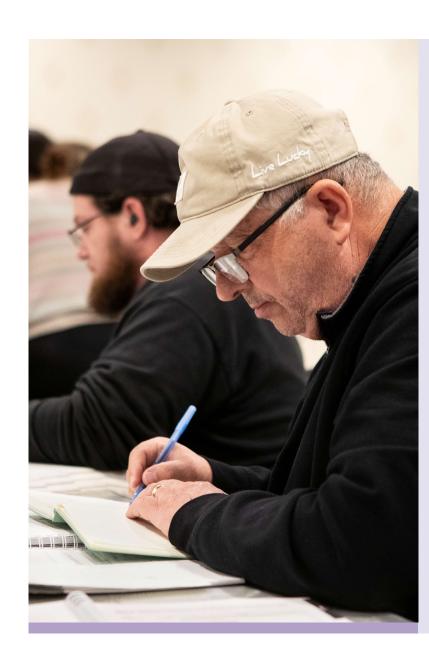
Goal	Projected Impact
Simplified process.	Reduce confusion or navigation barriers.
Reduce time between training and testing.	Increase testing completion rate.
Testing completed at the training location.	More testing locations and familiar setting supports test completion.
Interpreter integration with testing and training.	Interpreters would be present and better support caregivers testing in their preferred language.



### **Exam Improvement Options**

There are 2 options the Benefits Group is putting forward for the board's consideration:

- 1. **Phased Approach**: Knowledge Exam Administration and Skills Exam Innovation Work.
- 2. **Rapid Transfer:** Knowledge and Skill Exam Administration.





### Phased Approach Overview

Knowledge Exam Hosting and Skills Exam Innovation

June 2026

LaunchKnowledge Exam

July 2026 - June 2027

Skills Exam
 Innovation work

Next Biennium

Launch Skills
 Exam Innovation



### Phased Approach Considerations

#### **Strengths:**

- Begin to take advantage of a smoother scheduling process via the knowledge exam.
- Allows time to develop a skills exam process that meets the needs of stakeholders.
- Avoids replicating an inefficient process.
- Reduced operational risk due to a compressed timeline.

#### **Concerns:**

- Scheduling and logistic challenges with Prometric will still exist for the Skills Exam for the biennium.
- Confusion may arise from having the test split between two entities.
- Longer overall transition timeline.



### Rapid Transfer

Knowledge and Skills Exam Hosting

#### January 2027

 Launch Knowledge and Skills Exam

#### Next Biennium

 Begin Skills Exam Innovation and Optimization Work



### Rapid Transfer Considerations

#### **Strengths:**

- Avoids a time period with multiple exam administrators.
- Simplifies exam scheduling more quickly.

#### **Concerns:**

- No time for innovation and thus likely replicating an inefficient process.
- Increased operational risk due to a compressed timeline.





## Models

### Phased Approach Estimated Cost

Element	Assumption
Start-up	Build functionality and team to support test administration.
Knowledge Exam	Hosting and proctoring of Knowledge Exam.
Skills Exam Innovation	Working with stakeholders and building solutions to improve outcomes.
Reserves	2 months.

	FY26	FY27
Funding Need	\$0.065	\$0.065



### Rapid Transfer Estimated Costs

Element	Assumption
Start-up	Build function and team to support work.
Knowledge Exam Administration	Hosting of knowledge exam.
Skills Exam Administration	In person proctoring.
Reserves	2 months.

	FY26	FY27
Funding Need	\$0.065	\$0.09



### Options for FY 26-27

Option	Exam Content & Credential	Knowledge Exam	Skills Exam	FY26	FY27
Phased Approach	DOH	Benefits Group June 2026	Prometric	\$.065	\$.065
Rapid Transfer	DOH	Benefits Group January 2027	Benefits Group January 2027	\$.065	\$.09



# Thank You

#### Laura Reding

Chief Operating Officer, SEIU 775 Benefits Group Laura.Reding@myseiubenefits.org



# TAB 4

**TO:** Consumer-Directed Employer Rate Setting Board **FROM:** Adam Glickman, Secretary-Treasurer, SEIU 775

DATE: August 2024. RE: Rate proposal no. 3

The union's revised rate proposal would be sufficient to fund:

#### A. Wages

Rather than get back fully to 2020 real wages by the end of the next biennium. This compromise proposal would restore approximately 75% of the lost purchasing power since 2020 by the end of the biennium.

Table 1. New compromise partially restores lost real income/purchasing power since 2020

Date/Proposal	Starting Wage	Real Wage Value (2020)	Impact
May 2020	\$19.00	\$19.00	
June 2025	\$21.44	\$16.75	
State proposal end of next biennium	\$22.75	\$16.92	Does not make meaningful progress towards restoring lost purchasing power
Union proposal 1 end of next biennium	\$26.15	\$19.57	Increases purchasing power to 3% above the 2020 purchasing power
Union proposal 2 end of next biennium	\$25.47	\$19.00	Restores purchasing power to 2020 levels
Union proposal 3 end of next biennium	\$24.47	\$18.25	Restores 75% of lost purchasing power

#### B. Healthcare

The revised union proposal modestly reduces the health care rates in FY 27. Modeling from the HBT suggests that this would still be sufficient to fund the two months of grace period to avoid churn, but depending on investment returns would likely leave the HBT with approximately 10 months of reserves rather than 10.5 or 11 months.

#### C. Retirement

Rather than get to an **8**% employer retirement contribution as in the second proposal, the union's revised proposal would phase up to roughly an **7**% employer retirement contribution, or a total of \$1.50 per hour in the first year and \$1.75 in the second year for those who have worked at least 6,000 cumulative career hours. The goal would then be to continue to work towards a 10% employer retirement contribution in subsequent years.

#### D. Other benefits

PTO/Holidays: While the original proposal was based on adding an additional day of PTO
 <u>and</u> adding 4 holidays, the revised proposal would likely <u>only fund either an additional day</u>
 <u>of PTO or additional holidays, not both.</u>

- Emergency funding: The revised proposal doesn't include any funding for any type of emergency funding program
- *Mileage*: The original proposal increased mileage reimbursement from the current 110 hours a month to 140 hours a month; the revised proposal would be sufficient to increase it to 120 hours a month along with the other increases.

### Proposal cost is 25% less than the 2 -year cost of the 2022 rate setting board proposal (330M+)

The union estimates that this rate proposal costs \$250M GF-S, or approximately 25% less than the two- year cost of the 2022 RSB increase. Responding to state feedback this newest proposal also significantly decreases the cost in the  $2^{nd}$  year, with actually a small increase in the first year from the previous proposal.

Table 2. Union and State proposals' rate and cost (GF-S).

	Union Proposal 1 (June 13, 2024)	State Proposal	Union Proposal 2 (August 5, 2024)	Union Proposal 3 (August 19, 2024)
FY 26 rate	\$38.10	\$35.39	\$35.54	\$35.68
FY 26 health	\$5.22	\$5.22	\$5.22	\$5.22
FY 27 rate	\$41.56	\$36.75	\$39.78	\$38.30
FY 27 health	\$6.01	\$5.97	\$5.77	\$5.57
GF-S FY 26/27 (inclusive of parity)	\$468M	\$171M	\$299M	\$250M

	Union Proposal 1	State Proposal	Union Proposal 2	Union Proposal 3
Wages	Final starting wage at end of biennium roughly \$26.15; faster increase	Final starting wage end of biennium under \$23	Final starting wage end of biennium roughly \$25.47; slower	Final starting wage end of biennium roughly \$24.47;
	Restores 2020 purchasing power in FY 26 plus 3% in FY 27	Minimal increase in purchasing power, but still far below 2020.	increase, most in 2 <sup>nd</sup> year;  Restores 2020 purchasing power by end of biennium	Restores 75% of loss purchasing power since 2020
Health care	Covers inflation, 2 months grace to reduce churn	Covers inflation, 2 months grace to reduce churn	Covers inflation, 2 months grace to reduce churn	Covers inflation, 2 months grace to reduce churn at lower level of reserves
Retirement	Increases to \$2.50 contribution for more experienced workers (10% contribution)	Likely no increase but unclear	Increases to \$2.00 contribution for more experienced workers for FY27 (8% contribution)	Increases to \$1.75 contribution for more experienced workers for FY 27 (7% contribution)
Other benefits	increase in PTO and paid holidays increase in mileage Emergency fund	Unclear	Increase in PTO <u>or</u> holidays; Smaller increase in mileage	Increase in PTO <u>or</u> holidays; Smaller increase in mileage

#### **History of Financial Feasibility Determinations -**

Per RCW 74.39A.530 (7), after the Rate Setting Board establishes rates, either through consensus or a 3-vote majority, the rates are submitted to the Director of OFM by October 1. If the Director of OFM certifies them as being "feasible financially for the state", the Governor must include them in his proposed budget.

While there is little history on the implementation of this provision with regard to the Rate Setting Board, the same statutory language and process applies to state collective bargaining agreements, and there is substantial history with that process.

### OFM findings of financial infeasibility appear to have <u>ONLY</u> been made during a single major economic and revenue crisis

- Collective bargaining agreements or arbitration awards have only been deemed
  infeasible between 2008 and 2011 by the Gregoire Administration during the Great
  Recession, in which the state faced a multi-billion dollar deficit over multiple years.
  These agreements or awards were deemed infeasible at a time when the Gregoire
  Administration was proposing massive cuts to health care, long-term care and
  other human services, state employee furloughs, and other deep cuts to public
  services.
- No collective bargaining agreement or arbitration award appears to have been found infeasible by OFM under the Inslee Administration, including in 2020 when the September 2020 revenue forecast showed a roughly \$6.5 billion revenue shortfall over five years (the remainder of the current biennium and the subsequent 2 biennia) (based partly on 2014 OFM memo by Rosalyn Marcus and addl research on subsequent years)

Arbitration awards that cost more money (including more than twice as much money) than the state proposed have NOT been found financially infeasible, even in 2020 during a much worse budget and revenue environment

- The 2020 home care arbitration award was almost \$25M GF-S more than the state's proposal, and it was found financially feasible. In this case the arbitration award was actually 200% higher than the state's proposal. Yet it was found feasible despite a September revenue forecast showing a roughly \$6.5 billion revenue shortfall over 5 years (the remainder of the current biennium and the following two biennia). By contrast the current projected GF-S revenue shortfall from the June 2024 forecast is roughly \$230M over five years; June 26, 2024 Revenue Review Meeting Materials (wa.gov)
- The 2018 Teamsters 117 DOC arbitration award was almost \$40M GF-S more than the state's proposal and it was found financially feasible. In this case the arbitration award was 230% higher than the state's proposal.

To:

David Schumacher, Director

From:

Roselyn Marcus, Assistant Director

Date:

June 24, 2014

Subject:

History of Financial Feasibility

#### Background

In the 2002 legislative session, the legislature enacted SHB 1268, the Personnel System Reform Act. This Act reformed the state's personnel system for both represented and nonrepresented employees. In reforming the system, state employees were given full scope collective bargaining, which for the first time enabled unions to bargain employee wages along with other conditions of employment that may have a fiscal impact on the state. As a fiscal check on negotiated wage increases and other terms that may have a fiscal impact, the statute provided that all collective bargaining agreements (CBA) under this act must be submitted to the Office of Financial Management (OFM) by October 1. OFM would then be required to determine if the funds necessary to implement the compensation and fringe benefit provisions in the CBA are "feasible financially for the state." If yes, then the Governor must submit a request for funds necessary to implement the compensation and fringe benefit provisions. This request has been done by including the necessary funds in the governor's budget submittal issued in December of each year in which a CBA has been submitted. Conversely, if OFM finds that funding these provisions is not feasible financially, then the governor cannot request those funds and the legislature is prohibited from considering a funding request. This requirement was first applied to the 2005-2007 CBAs.

As other entities have received the ability to be represented and engage in collective bargaining or as other collective bargaining statutes are amended, the requirement that OFM conduct a feasibility review has been added. Attached is a compilation of statutes that include the requirement that OFM determine if funds necessary to implement the provisions of a CBA is feasible financially to the state.

#### OFM Determinations of "Feasible Financially to the State"

Below is a summary of the OFM determinations of "feasible financially to the state."

2005-2007 Collective Bargaining Agreements (CBA)

Requests for funds necessary to implement the compensation and fringe benefit provisions of the 2005-2007 collective bargaining agreements were submitted by October 1, 2004. The funding needed to implement the compensation and fringe benefit provisions in the agreements submitted by October 1 were all within the amount OFM had determined would be feasible financially for the state. Governor Locke submitted a request for funds in his final budget submittal to implement those agreements submitted to OFM by the deadline. No other documentation was submitted to document the OFM determination.

#### 2007-2009 CBAs

Requests for funds necessary to implement the compensation and fringe benefit provisions of the 2007-2009 collective bargaining agreements were submitted by October 1, 2006. The funding needed to implement the compensation and fringe benefit provisions in the agreements submitted by October 1 were all within the amount OFM had determined would be feasible financially for the state. Governor Gregoire submitted a request for funds in her budget submittal to implement those agreements submitted to OFM by the deadline. No other documentation was submitted to document the OFM determination.

#### 2009-2011 CBAs

Requests for funds necessary to implement the compensation and fringe benefit provisions of the 2009-2011 collective bargaining agreements were submitted by October 1, 2008. On December 17, 2008, OFM director Victor Moore sent a memo to Governor Gregoire informing her that "in view of the current economic and revenue conditions, the collective bargaining agreements submitted to me by the October 1 deadline are not feasible financially for the state." This included agreements that were completed through bargaining and those for which an arbitration award was issued. This is the first time the OFM director sent a formal memo to the governor informing her of the outcome of the determination. Prior to this memo, it was determined that requesting funds in the governor's budget served to inform everyone that the provisions of the CBA was determined to be feasible financially to the state. However, because of criticism of this prior practice, OFM agreed that going forward, the director would send a memo to the governor with his determination, whether the outcome was positive or negative.

#### 2011-2013 CBAs

Requests for funds necessary to implement the compensation and fringe benefit provisions of the 2011-2013 collective bargaining agreements were submitted by October 1, 2010. On November 18, 2010, OFM director Marty Brown sent a memo to Governor Gregoire informing her that "in view of the current economic and revenue conditions, the collective bargaining agreements and arbitration awards submitted to me by the October 1 deadline are not feasible financially." This included agreements that were completed through bargaining and those for which an arbitration award was issued.

On November 18, 2011, Marty Brown sent a memo to Governor Gregoire regarding the financial feasibility of CBAs negotiated for various bargaining units representing higher education employees. Since no additional funds were needed to implement the compensation and fringe benefit provisions in each of these agreements, OFM determined that the agreements were feasible financially to the state.

On December 6, 2011, Marty Brown sent a memo to Governor Gregoire regarding the financial feasibility of Washington State Patrol (WSP) and marine employee agreements. OFM determined that the two WSP agreements negotiated between OFM and the respective unions were feasible financially to the state. In addition, OFM determined that the arbitration awards for two marine employee CBAs was not feasible financially for the state.

OFM continued to negotiate with the unions after the initial financial feasibility determination was made. Agreements were reached with all the marine employee unions, except for SEIU Local 6. On April 6, 2011, Marty Brown sent a memo to House and Senate Transportation Committee leadership informing them that these new agreements that were ratified and submitted to OFM and requested funds necessary to implement the compensation and fringe benefit provisions. Because legislation was proposed to allow for the request for funds for CBAs submitted to OFM after October 1, and these new agreements were feasible financially to the state, this request was authorized.

Washington State University submitted a CBA reached with the WFSE on April 18, 2011. On April 20, 2011, Marty Brown sent a memo to Governor Gregoire informing her that "in view of current economic and revenue conditions, this collective bargaining agreement is not feasible financially."

The University of Washington submitted a Memorandum of Understanding with SEIU 925, which MOU is part of the CBA. Marty Brown forwarded that MOU to the legislature on May 20, 2011. It does not appear that a determination of financial feasibility was made prior to forwarding the agreement.

#### 2013-2015 CBAs

Requests for funds necessary to implement the compensation and fringe benefit provisions of the 2013-2015 collective bargaining agreements were submitted by October 1, 2012. On December 13, 2012, OFM director Stan Marshburn sent a series of memos to Governor Gregoire informing her that "the 2013-15 collective bargaining agreements submitted to OFM by October 1 are financially feasible in light of current economic and revenue conditions."

#### Factors Used in Determination

Prior to the start of each collective bargaining cycle, the director of OFM looks what would be financially feasible for the state in regards to the cost to implement compensation and fringe benefit provisions of a new CBA. Based on the economic condition as seen in the month of June, the director looks the following nonexclusive list of factors:

David Schumacher June 24, 2014 Page 4

- June economic and revenue forecast, including future projections
- Latest caseload forecasts and future projections
- Any new legal requirements, including court cases
- Governor priorities going into the next session

These factors help determine the parameters for the negotiations and serves as information/evidence that will be submitted in any arbitration hearing.

The agreements and arbitration awards are then submitted in October. If the submissions are with the parameters originally set and the November forecast does not dramatically change, then the OFM director can find that the funds necessary to implement the compensation and fringe benefit provisions are financially feasible. If the agreements or arbitration awards are outside the parameters that OFM had deemed feasible, or if the November forecast does change in a negative direction, then the OFM director will need to take a new look at the factors above to determine feasibility. In addition to these factors, the OFM director will also look at what services these agreements support, what other programs would need to be cut in order to funds these agreements, how does funding the agreements affect the ability of the Governor to fund his priorities and other state requirements, and generally whether the state will be able to preserve public peace, health and safety of the state if the agreements are funded.

The statutes that require this determination do not provide any guidance on what the standard means or how to determine if the standard is met. As you are aware, in interpreting statutes, when not otherwise defined you use the ordinary definition of the statutory words. In this case, according to the Merriam-Webster dictionary, "financial" means relating to finance. "Feasible" means capable of being done or carried out. By using this phrase, the legislature has given OFM a lot of discretion as to how to apply the standard. As such, OFM has not used a formulaic approach to this determination, but instead has weighed and balanced the various economic factors, program requirements, Governor priorities, and safety and welfare of the state to make the ultimate determination. Again, this determination is made in consultation with the Assistant Directors for Forecasting, Budget, and Legal and Legislative Affairs.

I can provide copies of the above referenced memos for your reference. If you have any questions, please let me know.

Cc: Tracy Guerin
John Lane
Jim Crawford
Marc Baldwin

# TAB 5

Dear Chairman Charles Reed, and the rate setting word

My name is Pat Carman, and I have been a caregiver for the past 12 years. I am also a proud member of SEIU 775 and grateful for the other caregivers I've met through my union. Due to my late husband's service in the military, I have had the privilege to live all over and since 2005, have proudly called Arlington my home.

Last month, after sixteen years apart, I went back home to Minnesota to see my family. However, as the youngest of seven, my trip home was somber; I accepted the fact that this will be the last time I'll see most of my siblings. Last week, my older sister and I chatted on the phone, and she asked me if I would consider flying back for a long weekend. As a homebody, I knew my answer but also had to let her know that flying is so expensive these days with how much I make these days.

When I learned that the new proposed homecare rate would cut my wages, I would have to reconsider the work I do because at this rate, it's just not worth it. Emotionally, even considering that wrecks me.

As a widow, I relate too well to loneliness, and I pride myself on my commitment to providing care to elderly people and keeping them out of nursing homes. Last week, I held back tears when I had to say goodbye to a client and he begged me, while crying, to not leave him. Even though he was getting a new caregiver who could take on additional hours, his pain is too common with clients who lose caregivers and sometimes don't see another one for weeks, days, or months due to the caregiver shortage.

I shouldn't have to bear the burden of carrying for our most vulnerable and make financial sacrifices. I should be able to earn enough to be able to fly back home to Minnesota to see my siblings while they're still alive.

If the Rate Setting Board thinks that the current proposed rate is sufficient, I hope the State is prepared to increase the funding for wages and benefits for nursing home workers as caregivers leave the workforce.

Thank you for your time.

Sincerely,

Pat Carman Patricia H. Carman My name is Yong Sook Chang, and I am an immigrant from South Korea. My family of three arrived at Sea-Tac Airport in 1998, and Washington state has been my home ever since. One of my proudest moments was obtaining U.S. citizenship nearly twenty years ago. I began working in restaurants as a dishwasher and eventually became a restaurant owner. I am a hardworking woman and have always assisted my fellow Korean workers in settling into their new country.

In 2008, my mother started receiving caregiving hours, and I became her primary caregiver. Initially, I was not paid for this work, but with training and support from the ResCare agency, I began earning an income. At that time, I was making about \$10 an hour. As my mother's health declined, she needed my assistance almost around the clock. I had to sell my restaurant, and my mother moved in with me. Thanks to SEIU, I saw many positive changes in my pay and benefits, which meant so much to me. Although the money was not sufficient to fully support my family, it was a relief not to be a burden to them.

I took on several clients to make a living while continuing to care for my mother with dementia. This work is physically demanding and comes with significant liability and responsibility. While it is rewarding, being mistreated and disrespected at times makes it incredibly challenging. My mother passed away last year, and I now care for three clients, yet I still earn less than the poverty level. Despite having great skills and being well-loved by my clients, some people still view me as a housemaid.

I know I deserve better, and there are times when I want to walk away, but I am committed to my clients' well-being. Caregivers need and deserve a raise. I am currently relying on food banks and meal sites to survive, which is unfair for someone who works seven days a week. I need a better quality of life to provide better care for my clients. Please help us achieve this. Ensure that we are also taken care of.

Thank you.

Yong Sook Chang

35747 30th ave S Federal Way WA 98003

To whome This may concern. r 17 yrs and Oll The Sudden clim cerrently truing to some

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My name is Andrew Au, and I live in the Tri-Cities area. I'm an IP and I've been a caregiver for over 10 years.

It's very difficult to be able to afford things, because gas, utilities, and groceries have gotten so expensive. I'm not making enough money from caregiving to be able to pay my basic necessities, so I had to get a second job.

My client, who's my elderly mother, has dementia. I'm her primary caregiver, and she will often call me when she needs help, even when I'm off work. She will keep calling and calling, so I've had to leave my other job and drop everything to go to her home and make sure she is ok. Most of the time she is fine, it's just a false alarm. But I cannot ignore her calls, because that's just part of my job as a caregiver – going out of my way to help my client when she needs me.

In reality, I am like other thousands fellow caregivers, we're often working more hours than we get compensated for. This is just part of the job, we are putting our clients first even we make some sacrifices. In addition, some of the money we're making goes back to helping our clients!

In order to take care of my client, my car needs to be ready to go at all times. That means, insurance, maintenance and making sure there's gas in the tank, and gas is very expensive!

I'm always looking for ways to save money here and there. Like in the summer now when it's over 100 degrees

In Tricities area, I won't turn the AC on both on my car and where I live, because I gotta save. I enjoy eating out but I can't, because it's so expensive. Even just going to Taco Bell is a luxury.

Despite our wages have been far reaching the living wages, many of us care for the elderly citizens because their needs arise and their condition decline. There's a major emotional toll that caring for other human beings has a toll on you. We're working with a heavy heart. But we do it to help preserve the lives of our clients to help them be as healthy as possible and enjoy their life. Our clients who worked hard in their life and been the contributors for this country, it's our responsibilities now to take care of them when they are depend on us while they are advanced in age and require care.

Our job is necessary; we need to raise wages so that we can stay in this job and make a living wage. But we need someone looking out for us, so we don't end up sacrificing all we have for this job

Thank you.

## TO: THE RATE SETTING BOARD

I AM A CAREGIVER WITH SETU 775, I have been a CAREGIVER FOR ZOYRS, IF MY TAKEDME TS cowered below what I Am currently at, AS FAR as my paynate, because I am struggling now with the payente I have now, my BILLS continue to be behind even at 23.634 un hour of had to drop my sto CAR INSURANCE last month, to put food on my TABLE, to put gots in my wehicle, my rent to was RAISED Another\$50,000 dollars IN JAN. COST of livering constructe to RISE. I won't be ABLE TO STAY IN MY APARTMENT IF I WANT Don't got A RATHE. I LIVE my WIFE and she is DISABLED, A POURCE AMPLITURE WHO DEPENDS ON MES & MY INCOMES TO HELP WITH BIELS, CAR PAYMENT RENT, ETC. EUEN WITH MY PAYRATE KIGHT NOW, IT IS LIERY HARD TO MAKE ENDS MEET DE

> Dunnylt Johnson SEIU 775 CANOGIUER

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#### Dear Rate Setting Board,

My name is Karl Vogel, and I am an Individual Provider working for CDWA. I am grateful to be able to work without causing financial distress to those in need of personal care. People who require homecare often live on the brink of being placed in nursing homes. While some may find comfort there, many consider them to be places that drain their finances without providing the care needed to maintain or improve their quality of life. For many, staying at home is not just preferable—it's essential. Home health workers like me help them remain in their "home sweet home," despite the risks we face, the long distances we travel, and the precarious financial situation we endure. Dear board members, we need your help.

I have worked in healthcare since 1989, mostly as a nursing assistant. Homecare often places caregivers in hazardous situations, where we are expected to lift, clean, feed, transport, and advocate for people with conditions like AIDS, cancer, multiple sclerosis, Parkinson's, strokes, heart disease, hip fractures, spinal cord injuries, and more—all on our own, without assistance. I've been in homes where people with AIDS had dogs covered in fleas that bit me routinely. It terrified me to think that the same fleas biting the AIDS patient were now biting me. I've cared for people with Parkinson's who were married to alcoholics, making the work unbearable. Currently, I am caring for someone who contracted a flesh-eating fungus. When we go to appointments, the professionals meet us in isolation gowns, gloves, and face shields. Yet, the client's mother is in denial about the presence of resistant Candida auris. She touches areas of non-intact skin with her bare hands, ignoring the signs of active yeast infections.

During the height of the COVID pandemic, many received hazardous duty pay for situations less risky than those I face daily. Still, I choose homecare over institutions where I have been assaulted while drawing blood, exposed to resistant TB, or expected to care for 20 people because two or three co-workers called in sick. I've had tubes of AIDS-infected blood explode in my hands, but thank God I was wearing a lab coat, gloves, and glasses at the time. While I feel somewhat safer doing homecare, the hazards I face still threaten me and, by extension, my partner of 25 years, Judy.

Homecare often requires traveling great distances. To piece together even seven hours of work, I've sometimes had to drive from north Seattle to Issaquah, then to Federal Way, and finally home again. When I started as a homecare aide, gas was \$1.25 a gallon. Now, it's \$5 a gallon, and our wages have not kept pace with inflation. It's not sustainable, especially when our rent has doubled, and essentials like Lysol spray cost \$9 a can. In April, I finished caring for a client in Mt. Vernon. I would drive 50 miles up there on Monday, work three or four days, and then drive 50 miles back home. While this was a good arrangement overall, I still paid a significant portion of my paycheck just to make this weekly trip. I know other independent providers face similar challenges. I'm grateful I still have a clean driving record after all the wrecks I've seen on the interstates.

The limited disposable income makes homecare even more challenging. To maximize my hours, I often work six days a week, even when clients need me for only part of the day or not at all. The high cost of healthcare has discouraged me from seeking treatment for ailments that would be best caught early. I've missed many holidays, reunions, and family functions—opportunities that could have benefited me, my friends, and my family—because I couldn't afford to go. Looking professional requires some level of affluence, but I haven't had my hair cut or colored since March. A box of nitrile gloves can cost \$20, and I often have to buy my own PPE. In your meetings, SEIU

advocates have shown graphics of what wage increases would be needed to keep homecare workers' incomes adjusted to the rate of inflation. Please do not turn a blind eye to these statistics.

In conclusion, please consider what wage might attract new caregivers to join our ranks and help retain the ones we already have. I've heard that Washington is one of only three states with significant programs that protect the sick and elderly from the strictly private pay model that is common in the rest of the country. Along with Massachusetts and one other state, Washington can be an example of how to care for the most vulnerable members of our population—those who would otherwise be left paying whatever the market demands just to survive.

Sincerely, Karl Vogel, NAC Dear Rate Setting Board,

My name is Frances Pini, and I am an Agency Provider for Full Life. In addition to this role, I work two other jobs—one as a medication aide in assisted living and another in a memory care facility. Like many caregivers, I am forced to juggle multiple jobs, often with only one day off, just to make ends meet.

I have been a caregiver for seven years, and while I find this work deeply fulfilling, the sacrifices it demands are immense. I am a naturally optimistic person, always striving to see the bright side of life, and I'm not one to complain. But I believe my story, like that of so many others, needs to be told.

I work with clients in Supportive Housing Services, where I assist people who have experienced homelessness. These are individuals who, against all odds, are trying to rebuild their lives after overcoming drug addiction or other life trauma. I am proud to support them. One of my clients is a war veteran suffering from PTSD; another struggles with severe mental health issues. They look forward to my visits, not just for the care I provide but because I listen to them. For many of these individuals, I am the only person they can confide in, the only one who hears their stories—stories often filled with pain, abuse, and a lifetime of hardship. They have no family, no support system. I absorb their pain like a sponge, offering them the connection they so desperately need.

But my support goes beyond listening. My clients lack basic necessities like cleaning supplies, so I purchase these items out of my own pocket, always carrying them in my backpack. I never get reimbursed for these expenses—I do it because I believe every person deserves to live with dignity.

In the past, I have experienced the loss of three clients, one after another. The emotional toll is devastating, but it seems to be regarded as just another part of the job. We provide not only physical care but also emotional support and counseling, yet we are paid so little that many of us must take on additional jobs just to survive.

I recently had to sell my car to cover basic expenses. Now, I rely on public transportation to reach my clients, but we are not even reimbursed for it. We caregivers are everywhere—caring for family members, neighbors, and the homeless—yet we are so undervalued and underpaid.

Please consider a higher pay rate for caregivers like us. We are as essential to the well-being of society as teachers, nurses, and doctors. Without adequate support, we cannot continue to provide the care that so many people depend on.

Thank you for taking the time to read my letter.

Sincerely, Frances Pini

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To Whom It may boncom, now and caring for my

care gruers to have an Marcase. We all house Long, to the board I am appealing to unsidur was at wow it word tore do ou walk to +1 de sout that application and the least bound of the work yound which he did hill proceeding of was the only one worked one one bound one worked one one bound he washing one head to pay chade, washing been his doctor suggested to give for dissobility. with finances. We were during often working and finances began (when he was still working and word healthy) He had major suspeny of gre aga and his healthy got affected to the parist that how and helphuse has ups and downs. expedielly why care gruing is a hard ask or request och incrose.
The and my husband ask or request och incrose. I wooke this letter to express or fell my story a fulfilling Job. tspecially coning the people I low. years now I could say that this is a hard, jub and I am Ailean L. Wilson, I 'Le been covagner for 5 years.

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Thank you so much for your time and God Bless your pure heart.	
Aileen Wilson	
	grana en

#### Hi, my name is Barbara Dutt!

I have been working as a caregiver for over 20 years! I Do it, because I like helping people! Being able to comfort people in their home is an honor, especially when facing the fear that they could be sent to die in a nursing home. As an agency worker, I helped clients all over our area.

My first client peed all over the place, she was on oxygen and smoking in her home. The smell from urine on chairs, beds, and floors reeked. It didn't help that she had difficulties showering. I bought her incontinence diapers and pad from a thrift store in our town. I helped her because I cared for her. These, along with some other supplies I gave helped her avoid more sores, but maggots had already gotten in her legs. My client's health improved once I took her to the hospital and followed up by giving her consistent care.

In 2014, I switched to IP work because my client went to a nursing home due to her deteriorating health. We've built a relationship. I still call to check-in, she's 70 years old and frail now. Her daughter called me because my old client still needs accompaniment in hospitals, the nursing home does not provide medical advocacy. Because she's in a nursing home, I had to tell her, "I can no longer legally assist your mom, as I do not work for her." A lot of my clients, after they went to the hospital, never came back. At least they didn't pass away under my care. That wouldn't have made me happy.

I currently have one client that I've worked with for 2 years. The problem is, I only get 12 hours a month with her. It started at 8 hours but improved. I have difficulties finding more clients because their hours are incompatible with my schedule. My main client's scheduled hours are fixed. I'm working with Carina to find clients, but they want a Caregiver who can work full time. I am aging and do not have the energy to provide the proper care under a full-time schedule. I'm trying to find respite care, but it's just hard. When I land a new client, they cut me off once a new Caregiver is found. I just want to be able to give care, attend bible study, my family picnics, and spend a little bit of time caring for myself.

My husband makes most of the money, while I bring about \$160 on the 1<sup>st</sup> and 15<sup>th</sup>. Our monthly bills total about \$800, not including food and gas, which are \$400. Every month we are behind on some bill, right now it's our cable. Being behind on a bill means expecting late fees. It feels like we don't have a chance at the American Dream. Utilities have gotten cutoff, last time our utilities were cut for 4 days. We couldn't cook, bathed in cold water, and had difficulties finding someone who could help us pay the bill. Prices have jumped, everything is more expensive. Last year, our electricity was around \$100 a month, now it's over \$200. They want more money, and we don't have it. Collection agencies are hounding us for unpaid medical bills, and I just can't pay them. It's tiring. We can't afford this life.

The gap in-between paychecks are where we struggle the most. I have enough for gas and food, nothing else. My husband gets a full tank of gas because he's the main breadwinner. When my gas tank goes empty, I am stuck on the road calling anyone who can help. I've worked for over 20yrs, and still go to foodbanks. I still need help to get a gallon of gas!

Accepting the State's rate proposal will make a big difference in getting that tank of gas. We will not be able to get to work. My husband works full time, and we still struggle between paychecks. Bills are expensive and inflation is high. Which means the cost of living goes up too! I don't want to have to decide between a gallon of milk, or a gallon of gas. We need both! The Union's proposal would help immensely even with the hours I currently have. The money would go towards bills, and not just gas and food. I could get ahead of my bills and maybe get something nice for me. Something like a new shirt or candy for Trick or Treaters. Something for my daughter... something other than just food!

We do a lot of stuff for our clients that people don't even know about: cook, clean, bathe, provide emotional support and medical supplies. We offer the nuances in life that make life worth living for our clients. I celebrated 2 years with my current client in June. Hopefully, there's more celebrations to come. It's not easy. People need to be cared for; they want to stay in their house. We help them do that. Better than a nursing home that takes most if not all their ISS checks.

I just had a friend of mine turn 60. She went into a retirement home and they're taking most of her paycheck leaving her with maybe \$40. It's expensive, and you don't get the kind of care you need, especially when the nursing home workers are overloaded. Clients don't get the 1:1 attention they would get in their home. I wanted to be a nurse or a schoolteacher growing up. I'm not a nurse, but I take care of people in their home, which to me is so much more impactful and rewarding.

We need more money, more respect, not less! The State's proposal is unacceptable!

Barbara Dutt, a Caregiver and Proud SEIU775 Union Member

# 42/E1/B

they book bno Extense ant suressb yeart On a budget Caregivers work hand to lose money as things are tight and a college student thats going to be band. Eth o smos sit weter of zit forcet themas also going to college so I really need mat from the government them. I am as my grandma (ives there I to to holy have a to to I have a family in the Phillphines to be able to afford a gay cot or afterdable things are too expansive gram ton som zeniat stil publicus OUT pay OS O COREGIUST. IN OUV CA too goog a brotton to pay cut to Decrees no shoots here but the SEIOTIB. I can writing this letter for volume on I pour amount copy tot HI MY MINN IS CHILLY JOINELL, I WORK I'M

Dear Members of the Rate Setting Board,

I am writing to you as parents of children who receive critical in-home caregiving services. Our caregiver is not just an extra pair of hands; she is an essential part of our lives. She ensures that our children's clothes are clean, their teeth are brushed, and that they receive their vital prescriptions on time. But her role goes far beyond basic care.

Our caregiver takes our children to critical specialist appointments, tracks seizure activities, charts behavioral changes, and performs many other tasks that keep the children out of the hospital and in school. She works closely with us to arrange transportation to school, allowing one of us to drop them off and ensuring they attend the best school suited to their needs. She even takes us grocery shopping, ensuring that her personal vehicle is free of allergens that could harm the children.

It is caregivers like her who make it possible for children like ours to have a better chance at living independently. For parents like us, caregivers are an invaluable support system. Their dedication and hard work directly contribute to our family's safety, health, and overall well-being.

However, despite the critical role caregivers play, they are often not compensated in a way that reflects their importance. This underpayment threatens the retention of skilled and dedicated caregivers who are essential to families like mine. For the sake of all clients who rely on caregiving services, we urge you to set rates that allow these professionals to earn a livable wage.

Caregivers work tirelessly to ensure our safety and well-being. They work too hard for us to have to beg for pennies. It is only fair that they are compensated appropriately for their dedication and hard work.

Thank you for your time,
John Herd Sr.
Ivy Herd
Dear Members of the Rate Setting Board,

Hello, my name is Eun Joo Kwon, and I live in Tacoma with my husband and our 5-year-old puppy. I've worked as a TSA agent for over two decades, but when my neighbor lost his wife and was severely injured in a fatal car accident, I became his caregiver. His wife was a wonderful friend, and I wanted to take care of him, but I never imagined it would turn into a career spanning 10 years.

I had to take on another part-time job because my client needed me beyond my authorized hours, and I could only afford to work the graveyard shift to earn more. About a year before I became a caregiver, I met my current husband. We were both divorced at the time, and our friendship eventually blossomed into a life partnership. Although every couple's situation is different, we are financially independent, and he has two dependents.

I was making enough to support myself when I worked as a TSA agent, but now, with the unpredictable hours of caregiving, I sometimes feel depressed and hopeless trying to make ends meet. I truly care about my client because he has no family, and the 80 hours he receives a month is not nearly enough. It is already challenging to care for someone, but being told daily that my efforts are worthless and that I need to move on with my life is devastating.

I tried finding another caregiver for my client to maintain peace at home, but not being able to provide the necessary 120 hours of care often left him at risk, leading to his placement in a nursing home after four different caregivers. I am his one and only emergency contact and having that heartbreaking conversation with him made me decide to return to caregiving. I know in my heart that it's important for me to do my best to care for him until his final days.

I am uncertain about the future, but whenever I take him for a walk in the park or to the doctor's office, I encounter other caregivers going through tough times like myself and wanting to change careers for the sake of their own families. We shouldn't be working so hard only to feel guilty about our own families. I do not have children of my own, but I can't even imagine what it would be like if I did. I think I would have moved on a long time ago.

Please consider giving caregiving a chance as a valuable pathway to making a greater impact. I would like to have a career where I am proud and can provide more quality care for my clients. I don't know how much longer we can continue when everything costs so much more than before, and the only thing we look forward to is a wage increase to help us cope with this severe inflation. Thank you for your time.

Fun Joo Kwon

#### August 11, 2024

I, Amparo Herrera ask you the Rate Setting Board with the outmost respect to consider raising caregiver funding. I want to communicate to you that reducing any type of funding would affect me greatly. I am a person who is caring for my 80-year mom and caring for someone who is not eligible to receive paid caregiving hours due to his immigration status.

As I am sure you are aware our economy affects all families and at the moment my family is struggling. I only work part-time even though my mom has multiple illnesses, including Parkison's disease. You should consider the importance of the work that we do and therefore should be compensated for its value. This work is very valuable, and we run the risk of ourselves having anxiety and depression due to the rapid changes in our client's health and spirits.

Sincerely,

Amparo Herrera (509) 792-9328

I have been a caregiver with SEIU775 for 16 years and I know our work is valuable to a lot of people. Without caregivers our state would pay a lot more for our clients to be put in facilities, that we don't have enough of in this state. Our clients have expressed that they want to be part of their family at home. As a caregiver I have had many challenges, some of them have been unforeseen accidents, illness. in my family that have put financial burden on me. From the end of 2019 - 2022 I worked more than full time and my family and I experienced homelessness. We have been able to qualify for an apartment, but we are high risk tenants due to having no rental history. We pay \$2,500 a month for a 2 bedroom apartment in Belfair, we are charged higher rent prices due to our past experience with homelessness. It's difficult to live on a caregiver's salary, we have bills we have to pay late every month because they just isn't enough money to cover our needs. Heaven help us if we get an unexpected expense, a flat tire or our car needs maintenance. Most caregivers like me, we live pay check to pay check . A livable wage would mean I don't have to constantly live in fear of homelessness, while working a full time job. We have nothing left over, after paying all of our bills. Theres no way we can plan for our future financially, my husband and I getting up there in age and it's a distressing situation we find ourselves in. Please help us get a livable wage.

> Thank you for time, Jan Ehman

My name is I wick thay I am a mother of two boys and a disabled brother. I am Currently employed at oddus homecare. I carit afford a payout due to the fact I can my bills paid, I carit lose everything I have with my disabled brotter living with me. I will lose my car, my hose, and work beable to provide for my kids. I have tons of medical issues such as scoliusis, ahronic disease in buer back, I have a brain disease, and a type 1 diabetic, I need to be able to Continue paying for my medication that are life Saving for me. Getting a payout would I wont be able to make a living if everything I have, I'll lose. I'm in my pb as acareer, I love what Ido ive been in field for lloyears and this is what I love doing. I'm not here ust for myself, I'm here for my clients who need me. This work southes me.

Jel

To Whom It May Concern,

My name is Krystal Sakagami, and I am an Individual Provider for two disabled siblings. Before this, I was the full-time caregiver for my mother, performing Peritoneal Dialysis every few hours while also "volunteering" to care for my two disabled siblings.

For a few years, I was able to manage this overwhelming responsibility using the savings from my business as a wholesaler for imported goods. However, my business had to be put on hold due to the dire situation I found myself in—caring for three family members full-time while being paid for only one.

This is not what I envisioned for my life, but the reality of skilled nursing facilities left me no choice. I saw firsthand how understaffed and overburdened these facilities are, and I knew I couldn't let my loved ones endure such inadequate care. The work I've taken on is incredibly challenging and exhausting—a true "labor of love" that has pushed me to my limits in every way imaginable.

Peritoneal Dialysis is a delicate and demanding process, requiring precision, vigilance, and constant attention. It's not just about performing the procedure every few hours; it's about managing the anxiety of potential complications, ensuring the environment is sterile, and bearing the weight of knowing that any mistake could have dire consequences. This work is physically taxing, but the mental and emotional toll is even greater.

As my savings dwindled, I had no choice but to seek financial assistance to keep my family housed and fed. I applied with the State of Washington to become an Individual Provider for my mother, even though I was also caring for two additional family members around the clock. The state only paid for 40 hours a week, at an incredibly low rate.

When our mother passed away six years ago, I became the Individual Provider for my siblings—my brother, who suffers from epilepsy, and my sister, who is mentally delayed. Caring for them is both mentally and physically exhausting. Watching my brother suffer through seizures, knowing there's little I can do to stop them, is heartbreaking. The constant fear of when the next seizure might strike, and the helplessness that comes with it, weighs heavily on me. My sister's mental delays present a different set of challenges, requiring endless patience, repetition, and emotional strength. The work is relentless, and the emotional strain is profound.

To add to this, I frequently spend long hours in the emergency room with my clients, ensuring they receive the care they need during crises. Despite the critical nature of this time, I am not compensated for it, further adding to the financial and emotional strain I face.

The financial reality only compounds the difficulty. With the amount I get paid—significantly less than many "unskilled" workers in Seattle—I find it insulting that we have to fight for even \$25 an hour. This amount should be much higher, especially given the soaring cost of living. Caregivers like myself are barely making ends meet, living at or near poverty levels, which is wrong on so many levels.

If you consider the numbers, the government is saving a substantial amount of money by keeping disabled members of our community out of skilled nursing facilities or nursing homes. Yet,

caregivers—who are essential to this cost-saving measure—are grossly underpaid and undervalued.

Caregivers are some of the most essential and "in-demand" workers in our society today, especially as our population ages and disabilities become more prevalent. I fervently ask anyone in power to fight for fair wages that exceed \$25 an hour, so we can continue to provide this critical care and sustain ourselves in the process.

Thank you for your time and consideration.

Best regards, Krystal Sakagami Individual Provider Seattle, WA Hi, Rate Setting Board,

My name is Aruna Bhavsar. I am a 71-year-old immigrant from India, and I've been an Agency Provider for nine years. I believe in human values, dignity, and Karma. Helping people is rewarding, and I hold onto the hope that someday, something good will come from it. But despite my age, I am not able to retire; I still need to work to pay my bills.

I live in a tiny studio in Redmond, and with all my utility bills, it costs me nearly \$2,000 a month. My Social Security income isn't enough to cover these costs, so I continue working. I've spent nine years as a caregiver, watching the raises we've fought hard for together, but with inflation and the rising cost of living, it's still not enough.

I don't have a car, so I rely on the bus to get to my clients. Sometimes, I walk in the rain or snow to catch the bus and then walk two miles or more from the bus stop to my client's home. Sometimes this happens at night, and yes, I'm scared, but I have no other choice.

Often, I don't know who my clients will be until I'm on my way to see them. My agency sometimes gives me very short notice that someone needs care. My clients vary—sometimes they have schizophrenia or dementia, or they are elderly and just need help with cooking, cleaning, and other tasks. Some days, I find myself in a house where I'm expected to lift a client, but I struggle because I'm a petite woman.

Working with clients who have schizophrenia or dementia is challenging. They can be unpredictable, and it takes a lot of patience, understanding, and energy to help them feel safe and cared for. When working with elderly clients, it's about more than just doing tasks for them; it's about providing companionship and helping them maintain some dignity in their daily lives. The physical demands can be intense, especially when I'm expected to lift or move someone, which isn't always possible for me.

But the hardest part is knowing that despite the essential work we do, we're not paid enough. After nine years as a caregiver, I'm still earning just a little over \$22 an hour. How can we help our clients feel hopeful about life when those who care for them are barely getting by?

I don't know how much longer I'll be able to keep working, but I'm doing my best to stay healthy so I can continue to pay my bills. But for the future generations of caregivers, I ask you to make a change. We deserve to live with dignity too, to occasionally go out to eat, or to take our grandkids out for ice cream or a video game.

Thank you for your time,

Aruna Bhavsar

(425)270-8789

8/15/2024

Dear Rate Setting Board,

My name is Safirah Ahmah, and I care for my two children, who both have Autism. My daughter is 31, and my son is 34. They are wonderful people, and I love them deeply, but taking care of them is very hard.

I am allowed 200 hours of care for them, but I can only claim 160 hours. My mother helps out, but it's still tough. My son needs a lot of help because he has epilepsy. My daughter struggles with severe anxiety, depression, and has a condition called DSM-4 intellectual disability. I have been their caregiver since January 2005, putting their needs first.

Taking care of my daughter with intellectual disability is very challenging. She has a hard time with simple tasks and understanding things like others do. It's hard to see her struggle, and she needs a lot of support and patience. Her anxiety and depression make things even harder. Managing her emotions and daily activities takes a lot of time and effort from me. The strain of seeing her struggle, knowing that she may never be fully independent, is heartbreaking.

Finding another caregiver for my son is difficult because his epilepsy requires special care. I worry that someone else might not handle his seizures properly, so I'm always on edge. I can't get a break from caregiving, and it's exhausting. I've tried to find other work, but I'm always worried about leaving him alone, which makes it almost impossible to find help.

My family has been deeply affected by disabilities for generations. Growing up, I watched my mother take care of my brother, who had Down Syndrome. She never left the house because we couldn't afford vacations and many places were not accessible for people like my brother. She gave up her own needs and desires just to keep him safe and well. Now, I find myself in a similar situation. I can't visit my family in California because I can't afford the plane tickets, and I'm afraid the airline won't be able to meet my children's needs. The isolation is overwhelming, but I have no choice but to stay here and care for my children without any break.

Before taking care of my children full time, I worked in medical records and loved dancing and teaching dance. But I had to quit my job and my career because it was too hard to manage everything. I've tried to work elsewhere, but I always have to rush home in case my son has a seizure.

Raising two kids with disabilities has been very tough. I've been doing it alone, and we struggle to get by. My son works at a brewery for just two hours a week, and although he loves his job, it's not enough to make a difference. My daughter was laid off from her job, and it's been hard on her mental health. I try to keep them busy with dancing and sports, but with our small income, it's hard to afford these activities.

My son needs special care because he is on a liquid diet and has sleep apnea, which means I'm always worried about him. I haven't had a good night's sleep in a long time because I'm always watching over him. The fear of losing him is something I live with every day.

We just need to make sure that caregivers like me can earn enough to live with dignity. We're not asking for luxury—just enough to cover our basic needs without worrying about what will happen

next. Please consider raising our pay. We work hard, and we deserve fair compensation for the important work we do.

Thank you for reading my letter.

Sincerely, Safirah Ahmah

8/15/24

206) 468-6288

To Whom It May Concern,

My name is Saoirse Douthat, my pronouns are she/they, and I live in the Rainier Beach neighborhood in Seattle. I'm an Individual Provider and have been a caregiver for two years.

Over the past year, I've been feeling the weight of rising costs in every aspect of my life. Just my weekly grocery bill has increased by \$30, my car insurance went up, and my pet insurance has doubled. The harsh reality is that inflation has stretched my finances to the breaking point. Our wages need to increase because the money we earn doesn't stretch as far as it used to. I've had to budget down to the last dollar, constantly worried that an unexpected gas purchase might push me over the edge. I check my bank account before spending anything, and despite all this careful planning, my partner and I were forced to move into low-income housing just to keep a roof over our heads.

The situation becomes even more heartbreaking when I think about my dog, who was diagnosed with cancer last year. She's more than just a pet to me—she's my family, my child. I would do anything for her, but when her surgery costs piled up, I had to turn to crowdfunding to afford it. Even with pet insurance, vital parts of her treatment weren't covered. Since then, we've had to delay her follow-up cancer imaging because we simply don't have the money. It breaks my heart that I can't provide for her the way she deserves.

I dream of being able to cover big expenses, like my dog's surgery, without having to rely on others, but with our current wages, that feels impossible. The thought of my future is filled with uncertainty. Like so many in my generation, I don't know if I'll ever be able to retire. Right now, I'm focused on meeting my basic needs—saving for the future feels like an unreachable luxury.

We need better retirement benefits to help us plan for our futures, to give us some peace of mind. We shouldn't have to worry about what will happen to us when we reach retirement age. We deserve the chance to look forward to a future where we can rest and enjoy the fruits of our labor.

Thank you for taking the time to read my letter.

Sincerely, Saoirse Douthat

8/15/24

Dear Rate Setting Board,

My name is Muluembet Mengistu, and I am both an Individual and Agency Provider, working with CDWA, Amicable, and CCS. Like many caregivers, I have been severely impacted by inflation and the rising cost of basic necessities. Despite holding three jobs, working six days a week, and putting in 13-hour days, I still find myself living paycheck to paycheck. It's a constant struggle to manage my bills, support my family back home, and secure basic needs like housing and food.

I live alone, and although I am grateful to have a small house—something I could only achieve with the help of my brother—I am now faced with overwhelming challenges. The chimney in my house is broken, allowing water to leak through the roof, but I simply cannot afford the costly repairs. I have to live with these conditions because our pay is so low that even getting credit to buy a car or make essential repairs is out of reach. I also owe my brother for his help, which adds to my financial burden.

In our line of work, the stability of our income is uncertain at best. I need to maintain three clients just to survive, but if any of them fall ill and are hospitalized, or if they pass away, I lose that income immediately. How are we supposed to live under such conditions? The unpredictability of our pay makes it even harder to meet our basic needs, let alone plan for any kind of future.

The reality is that we caregivers are being asked to perform essential work, yet we are not provided with a livable wage. Our financial insecurity is exacerbated by the lack of protections when our clients are hospitalized or pass away. This situation leaves us in a constant state of anxiety and uncertainty. We need a true living wage—one that reflects the value of the care we provide and allows us to support our families and maintain our homes.

I am asking the government to protect and increase wages for all Home Care workers. This is not just about me; it's about all of us who dedicate our lives to caring for others. We need your help to ensure that we can continue to do this important work without constantly worrying about our own survival.

Thank you for taking the time to consider my situation.

Sincerely, Muluembet Mengistu

(206) 354-0502

#### Juanita E. Mackey's Story: A Lifetime of Caregiving

Hi, my name is Juanita E. Mackey, and I've been in the caregiving field for many years. My journey started when I was just 18 years old, working in a nursing home. It was hard work, but I loved it. I enjoyed connecting with the clients and their families, finding ways to bring them comfort and happiness. We were told not to get too personal, but how could I not? The hardest part was losing three patients within two weeks. It was heartbreaking, and even though I was young, I felt the weight of their loss deeply.

As a caregiver, it's impossible not to get emotionally involved. When you work with clients, whether in a nursing home or in their own homes, you have to think about how they feel. It's your job to make sure they find some joy in their day, even when the world around them seems dark. But it's not easy, especially when the nursing home was often understaffed, forcing me to take on more responsibilities and work longer days.

After my time at the nursing home, I spent 20 years working for CCS Services. I remember the days when caregivers were paid only \$7 an hour. Those were tough times, but at least now we're making more livable wages. However, the struggles haven't gone away. I've always been a creative person and an entrepreneur, but my health issues have made it hard to continue that path.

First, I had to undergo hip surgery, which led to me being laid off. Then, I was diagnosed with a brain tumor, and I had to have surgery to remove it. The recovery was long and difficult. The surgery left me with low energy, and I had to take frequent breaks just to get through the day. It was a tough time, and I wasn't able to work for a while. But I pushed through because I had no other choice.

Now, I work for All Ways Caring, but only three days a week. I would love to have another client, but finding one has been a challenge. I tried using Carina and found a client, but the hiring process with CDWA was long and exhausting. I've never had problems with background checks before, but with CDWA, I did. They told me they couldn't hire me and that I needed to provide a wrap sheet. I did everything they asked, but it took four months to clear it up. By the time I was done, the client had already found another caregiver. It was devastating. I fell behind on my bills because of that.

Eventually, I found another client with All Ways Caring, and I was hired quickly without any issues with the background check. I'm thankful for that, but the financial strain has been overwhelming.

I really like my current client because we're both around the same age. She often gets depressed, and I do my best to encourage her to keep fighting. Seeing a smile on her face brings me so much joy because our stories are so similar. We go to the senior center together, have lunch with other people, attend balancing classes, and in the summer, we go to the farmers' market and the park to listen to music.

But working with clients who are depressed is challenging. Depression is a heavy burden for anyone, and as a caregiver, you have to find ways to lift that burden, even if just a little. It takes patience, empathy, and a lot of emotional strength. You have to hold your personal struggles back and focus on bringing light to their lives, even when your own life feels dark.

My client is also deaf, which adds another layer of difficulty. Communicating with her requires a lot of attention and creativity. I watch her lips closely to understand what she's saying, and we've found ways to connect despite the challenges. It's bittersweet work—rewarding, but also incredibly tough.

I've just managed to catch up on my rent, but there's always something else coming. I can't afford to go out to eat or take a vacation. Most of our meals are at the senior center, or I rely on the food bank.

I've been in this field long enough to see how underappreciated caregivers are. We do this work out of love and empathy, but I believe we deserve better. Caregiving is more than just a job—it's a calling, and it's time the world recognized that.

Thank you for reading my story.

Juanita

(206) 795-1980

8.16.24

Dear Rate Setting Board,

My name Katie Lee Duarte I've been a caregiver for almost 14 years. My husband is also a caregiver for, he has done this work for 6 years. I enjoy helping the elderly and people with special needs is why I like this work. I became a caregiver doing respite care for my cousin who has since passed away.

In my experience as being a caregiver, it has been very difficult for my family with the low pay, despite us having two incomes. It's a struggle to live as being a parents with two children to raise. We are in constant financial struggle, living close to poverty despite both of us working fulltime. My family has had a lot of medical bills to pay, I was in the hospital and had to pay \$2000 out of pocket. With our medical we have co-pays of \$30, which is difficult for us.

Please consider the raise for us families, to be able to live and be independent and to raise our children.

We need good medical benefits. It's been a daily struggle; we're barely making it just to have food on our plates. I have thought about leaving the job, however I know that my clients need me and I want to be there to support them. We receive no assistance with rent and utilities.

Please consider to be there for us caregivers, and give us a good rate. I have to struggle every day, and if you would consider giving us good raises this would go a long way for us to be able to be successful.

Thanks

Katie Duarte

My name is Maria de Jesus Hernandez, and I have been a caregiver in Yakima for 25 years. I stated working on October 1·1995, and started with 3 hours earning about \$5.50 per hour, with no health insurance, or other type of benefits. Due to this, when I was invited to be part of our Union I immediately agreed and didn't think about it twice. During that time, I was working with 8 clients and I became an active member. Caregiving is an important job, that is done with love y compassion as often the clients we serve are alone or don't have family around them.

Lately, this past few years with the high rise in prices for everything it has been difficult to pay my bills with the income that my husband and I bring in every month. I have been working fewer hours now since I am past retirement age but just enough to be able to maintain my health insurance. I think we deserve better wages both for caregivers that have experienced and caregivers who are just starting.

I thank GOD and the people who one day knocked on my door and invited me to form part of this powerful union. We are stronger now and the younger caregivers coming into this work deserve to stay. We all deserve respect for what we do, this is a job that comes with great responsibilities, and we do it with love. I have always enjoyed talking with my clients hearing about their families, read books to them, and cook them their favorite meals. I have faith that you will do the right thing and support all the caregivers.

Thank you to our Union and thank you for your time.

Maria de Jesus Hernandez

To whom it may concern,

I have been an individual provider since September 2022, during this time I have seen the necessity that caregivers experience. The high cost of living, and the high costs of all essentials are affecting us in a large way. We need a change, and I think we should be giving caregivers the opportunity to worry less about their monthly expenses.

An increase in wages would help us greatly. I think it would show respect for the services that we provide to people who need them. I ask you to please consider increasing our wages so we can have a better quality of life, are able to pay all our bills including rent, electricity, food, and gas for our car.

Thank you for listening to our voices.

Gabriela Gonzales Tinoco, IP

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#### August 8, 2024

My name is Ma Del Carmen Correa Garcia, I have been working as a caregiver for 9 years in the Yakima area. I worked as an agency provider for 5 years and now I am an individual provider. I really like my job because I like to serve people who need care services. This job fills me with great satisfaction to see my clients faces and them simply knowing they have someone who supports and cares for them.

That is why I stay being a caregiver and doing this job it's for my clients. However, I often feel overwhelmed and knowing that everything is getting more expensive, especially the services we need to survive like electricity, water, rent, and food. The reality is that our pay is not enough, sometimes because we have low hours but mostly because we need to keep up with our expenses. I would like our wages to increase because it does affect me, the gas prices have increased and increased and we need to pay them because our work requires us to transport our clients from one place to another.

If we had a better wage, we would have a better quality of life. I need more for my family and for myself, so I don't have to relay on government assistance just to get by.

Sincerely,

Ma Del Carmen Correa

Hi, my name is Dora Poqui I use she/ her pronouns, and I'm an individual provider that lives in Lakewood Washington. I've been caregiving for over 20 years these past two years have been very difficult for me as the cost-of-living goes up my pay is not sufficient to meet those needs. I've had to move three times within a year costing financial hardship. As a caregiver, I cannot afford to save money. My car is broken down and I cannot even fix it. I have no vehicle to get back-and-forth to work another hardship. Many times, food banks is how I feed my family. These are hardships we live day by day. Caregiving Is an essential job. Pay us what we're worth please consider us making decisions about our pay. It makes a big difference. I do not want to be homeless. I want to be a caregiver.

Thank you

Dora Poqui

Hello, my name is Ed Solseng.

I take care of my adult daughter, Rae.

She's a delightful person, but she's 28 years old, and has the daily care needs of a 1-year-old. That means bathing, feeding, diapers, daily medications: the works. She can't walk, so I carry her. She doesn't speak, so I'm her voice. Beyond those basics, she needs what we all need for a decent quality of life: fresh air, exercise, the company of friends, opportunities for growth, and maybe most of all: good health. I do what all fathers do to provide those things for her, but I know I won't be able to do it forever. Someday, I'll have to ask someone else - a professional caregiver - to give her that attention and support. I'm doing what I can to make sure she'll always have a decent place to live and some means of financial support. But who will do the WORK of caring for her when I can't? What will THEIR life be like? Will they stick around long enough to learn how to communicate with Rae? Will they be able to provide a decent life for their OWN families while they care for mine? I don't see how my daughter's future can be secure unless the future of the person who cares for her is secure. Please help secure a loving future for Rae and so many others.

It is disheartening to see those who dedicate their lives to caring for others are not able to pay their bills. And we call these people essential workers, but they are not treated like it.

Thank you for your time.

**Edward Solseng** 

(206) 661-3556

8/12/2024

My name is Elvira Amador.

I have been a caregiver for 3 years and I love my work because I am able to help vulnerable people. During the holiday season it's very sad to see our clients who live alone, some of them don't have family around them, or others their family members don't come seem them. We are there for them as their caregivers are sometimes the only people they see.

We as caregivers also have our families that we need to provide for. We have expenses like rent and food and every has gotten so expensive. With our wages sometimes it's not enough to pay all our bills. In my case, I rely on the local food bank to be able to provide food for my family. I have had to spend down my savings because the cost of everything is increasing and I don't know if I will be able to take my family on any sort of vacation.

It would help us greatly if we had an increase in our wages and an increase in our mileage. Right now, I am having to look for another job because I can't afford my bills. Please consider giving us a higher wage.

Thank you.

August 8, 2024

To whom it may concern,

My name is Evangelina Garcia Saucedo, mother to 6 children and 9 grandchildren. In the year 2018, I received one of saddest news, that my mother of 80 years was diagnosed with lymphoma. This news changed our lives, not only my mother's life but all my family. I was her only support, and this gave my life a complete turn as I had to make a decision that would affect my family. I had to leave my previous job and neglect my family needs to be able to care for my mother and accompany her during this difficult process. She transitioned from being a completely independent person to a person who couldn't care for herself. Due to her illness and her treatments, she was decaying and needed more and more care and therefore more of my time. This has not been easy for anyone but especially for me.

My husband and I financially support our children, and we adjust our time to support them in their extracurricular activities. Yet, with my mother's illness is requiring more of my time, and I owe it to her as her only daughter to be there in these moments. Every day she needs my support both financially and emotionally. Caregiving is not easy, it demands a lot of a person emotionally, physically, and it makes us sacrifice a lot for those we care for. There are days in which I want to rest but my mom needs me, and I have to find the strength to get up in the morning and be there for her. I have to miss out on my children activities because I will be there for her.

I want you to please consider the work we do as caregivers and

Who wants to tell my mom she has to go into a group home so that I can get a job that pays? Even if we were able to find her another caregiver, which would take months, it then takes at least a month up to sometimes 6 months from what I've seen to get onboard with CDWA. Especially if there's any sort of issue with training or the background check.

I don't know if you guys think we caregivers are just sad stories, but those of us who are talking to you are truly living the experiences. I literally live paycheck to paycheck. And there is one car for my entire household. If that car breaks down, it means that I cannot pay an important bill, or we go without food.

I can't go without the car. My mom has multiple doctor's appointments a month.

On top of that I use that car to make a little extra money on the side delivering packages for Amazon, gig work. If my car breaks down, I lose that extra 3 or \$400 a week that makes ends meet until I can magically afford to fix it.

Are one of you going to loan me a car?

My rent goes up by a minimum of \$115 a year every year. I don't get a choice. I cannot negotiate. I rent from a corporation.

I figured out how to afford this year's rent increase, but what happens next year? The raise being proposed by the state will not cover a rent increase of \$115.

Because I work full-time as a caregiver, and my husband gets social security, our household makes too much money for any support services. That means no food stamps, no utility assistance, no rent assistance. Nothing.

You could try to say it's my fault, I chose for us to live in a high cost of living area. The thing is when I moved to Tacoma 10 years ago it was to get away from the high cost of living in Seattle. And now we're stuck because we can't afford to move. But at some point, we're not going to be able to afford to stay either. So, if we can't move and we can't stay. Where does that leave me?

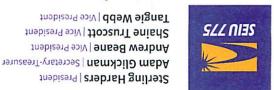
Our mission is to unite the strength of all caregivers, to create a better life for ourselves and those we care for, and to lead the way to a more just and equitable world.

Member Resource Center 1.866.371.3200 | www.seiu775.org 215 Columbia Street | Seattle, WA 98104 **SEIN 175** all times bas 51 12/2ch Malet hw Studilo 10.t 5050010V! Salt! hW Sparu hilmps SPARU would greatly mileage down times joj day at hu 19614 trasob ullmos MEGKI MU order to better cove of 2409710 Pote ЭW Jago) mapo: 11 - wood: 9 wont Ins in Olympia, washing ni smi SIDE Spagu smoy possoly be working around UDD puo Saltillansip yfin THO U! STANTO Aw tom DIRECTIS OUR UDD to provide high quality core Strallo bra SP220 S2411951P, 41M 2 701092 to serve the ground community guality of life benefits can also retain DAYRU Pate SASOBJOU! (appl SPADU DYF SSOUDYD OF MITHIN Individual provider, like Jos Stifauag 746 determine the funding available for

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My name is Virginia Silva, and I am a caregiver for Chesterfield. I have also been a member of SEIU 775 for the last 6 years participating in many activities including our convention every year. I have met many caregivers and discovered that we have similar experiences. I love what I do in my job because can provide support for people with different abilities and necessities, people who need company as they are often without family or at times abandoned by their family due to their needs. On holidays our clients are alone, and they depend on someone to help. I think we are indispensable, but our pay is not enough. The cost for our basis needs has increased drastically, gas is almost \$5 per gallon and rent has increased every year. I have relied on food banks and payday loans to cover rent increases. All of our utilities have also increased: Water, gas electricity. I have not been able to take a vacation because I need to work to pay all of our bills

An increase in our salary would be a help to me and my family. I need a break. I have been working so many hours to pay all of my bills and have added thousands of miles on my car, and have spent thousands of dollars on gas because gas is so expensive. If my car breaks down, I'm not able to go to work, and unable to take my client to the doctor, pharmacy, and all other activities that my job requires. These are our basic needs. Thank you for your time.

Virginia S Silva

It means I put my mom in a group home, and I live homeless.

The problem is I'm not the only one. My story is not unique, my story is not special. I know of three caregivers in Pierce County who have been or are homeless., I know you guys heard from Laurel on the 5th, who's living in a homeless shelter.

I am not only angry but devastated that caregivers are thought so little of. After all the words I've heard saying how important we are from this board, to then be shown with the actions that we are not. It is devastating. And it pisses me off.

We deserve better! It is truly that simple.

Gwen Goodfellow, Proud Caregiver and SEIU775 member

Warm Regard and to Whom it may concern,

My Name is Mavis Leapai, I'm a caregiver and a proud union member. Being a caregiver has always been part of my life, from a young age and within our culture it is a must that we care for our elders and provide care for others. It's not easy but we do it out of love for our loved ones and others. To be able to be a helpful and lending a hand where we can. But at the same time, we also have to think of ourselves and take care of ourselves, physically and mentally and financially. So, I come to my point of financially struggling, I barely get by with my pay as I work 3 days a week. What I make barely covers our rent and food and electricity and water, sewerage and garbage and not to mention car payments and medical bills that are not covered by insurance.

I don't qualify for some of the state's assistance either due to income restrictions. We barely get by as it is yet considered as over the income rate. So, cutting wages will not only be no good but worse for us who are struggling to get by with a paycheck. We as caregivers who are not financially stable will suffer if our wages are cut, BUT if our wages are increased that would be great and a big help. Not only will it help financially but it will also give us an opportunity to build a better outcome for ourselves and our families, being a caregiver is not an easy job, It has its challenges and great opportunities to provide care for loves ones or others, but cutting wages will take a toll on us especially myself. Speaking from experience of struggling to get by and living to paycheck to paycheck.

I ask you to reconsider and not think light of a caregiver job. To be honest half of us are doing a lot more than being caregiver to our clients. We go beyond for our clients to make sure they get the right and good care. The State's proposal is demanding we get paid less for doing more. Please consider and think before you decide on the lives caring for the backbone in our community.

Best regards from a proud caregiver and SEIU775 UNION MEMBER.

Marvis Leapai



Sterling Harders | President
Adam Glickman | Secretary-Treasurer
Andrew Beane | Vice President
Shaine Truscott | Vice President
Tangie Webb | Vice President

My name is Dana Michael Murphy and I live in Centralia, Wa. I have worked as a caregiver since 2011. I am an active member of SEIU 775. I care for a non-family member 42 year old client living with a disability. I provide care for my client in his home in Lacey, WA. I assist my client with dressing, getting up out of bed and into his wheelchair, using the bathroom, taking baths. I clean his house, cook his meals, do his grocery shopping, do his laundry, drive him to his doctor appointment, I also assist with phone calls when the person on the other end of the call is having a difficult understanding him. Having wages of at least \$25/hour would provide the cushion needed to be able to afford basic necessities after my rent increase, and especially since rent has doubled since I moved into this duplex. This would also help me to save for a new vehicle as mine will need to be replaced soon, and this is very important since I provide all transportation to my client and ensure that I can get to and from work. More paid time off would give me more time to care for myself and ensure that I am providing good care to my client physically and mentally. The increased contributions to our retirement fund will provide me with ways and means to ensure that I am not homeless and will not have to work a job to supplement my income. Consumer Direct Employer Rate Setting Board will you please get the wages set to \$25 an hour. Will you please push for continued affordable health care so I don't lose my health care if my hours drop below 80 hours in one month. Also, please consider increasing contributions to our retirement benefits so that we may live comfortably once we go into retirement. Sincerely, Dana Michael Murphy

## SEIU 775 215 Columbia Street | Seattle, WA 98104

I write to you with a heavy heart, compelled to shed light on the profound struggles faced by us caregivers, unsung heroes who dedicate their lives to the care and well-being of others. We as individuals, who work tirelessly day in and day out, are the backbone of our healthcare system, yet we are often overlooked and underappreciated.

Imagine waking up each day, knowing that your job is to provide comfort and support to those who are most vulnerable. We as Caregivers who do this with unwavering dedication, often sacrificing our own well-being and personal time. We manage a myriad of tasks, from administering medications and assisting with daily activities to offering emotional support and companionship. The physical and emotional toll of this work is immense, yet we continue to show up, driven by a deep sense of duty and compassion.

Despite our critical role, we as caregivers are compensated with wages that barely meet our basic needs. Many of us live paycheck to paycheck, struggling to make ends meet. The thought of our pay being reduced further is not just disheartening; it is devastating. How can you expect us as selfless individuals to continue our vital work when we are faced with financial insecurity? The stress of not knowing if we can afford rent, groceries, or even healthcare for ourselves is a burden no one should bear, especially not us who dedicate our lives to caring for others.

We as Caregivers deserve more than just gratitude; we deserve fair compensation and benefits that reflect the importance of our work. Increasing our pay and ensuring we have access to comprehensive benefits is not just a matter of fairness; it is a moral imperative. By doing so, You should acknowledge our invaluable contribution to society and provide us with the support we need to continue our essential work.

In closing, I urge you to consider the plight of us caregivers and take action to ensure we receive the respect and compensation we ever so rightfully deserve. Our struggles are real, our work is vital, and our dedication is unparalleled. So we ask you to look deep within your hearts and that you would stand together to support us and take a minute to understand our struggles and to listen to our voices and understand us caregivers on a personal level because we give so much of ourselves to care for others.

Sincerely,

Lucero Lopez

August 14th, 2024

Dear 2024 Rate Setting Board,

My name is Alyssa Omdahl. I have been a caregiver for almost 16 years. In 2020 with the help of my union, myself and other caregivers were given hazard pay for the work we did during the scariest time in my life. Covid was devastating, but the hazard pay of \$2 an hour changed my life.

For the first time in my adult life, I was able to get caught up on my bills. I was no longer living paycheck to paycheck. I had a savings account, which came in handy when I was put in a situation where I needed to move from my home of 8 years in Concrete. I was able to find an apartment for myself and my 2 children. Unfortunately, my new apartment cost me 5x more than my previous home. My electric bill more than doubled. Hazard pay made it possible for me to afford the cost difference. I was able to pick up some more hours and recover from the \$5,000 cost of moving.

For the first time in 15 years, I could take a vacation! I was able to spend valuable time at home with my kids. I regularly attended my daughter's 4H club meetings and was fully present because I wasn't worried about how I would make up for my missed hours at work. Over the last few years, living costs have drastically increased. Everything from gas, groceries, car insurance, and my rent has become so expensive that I am back to working as many hours as I can get my hands on. It was not uncommon for me to work 90 hours a week when my kids go to their dad's. Now I am on light duty with a shoulder injury and I am only able to work 70 hours a week. I can not pay all my bills on less than 80 hours a week.

If the Rate Setting Board moves forward with the proposed homecare rate that doesn't keep up with inflation, I would essentially be losing that pay that I have depended on for these past few years.

I would be forced to cut back on my food budget, I would not be able to do any driving other than to and from work. I would be forced to tell my daughter that she can no longer participate in 4H. There is a great chance that I will lose my apartment. If I lose my apartment I would have to send my kids to live with their dad and I would only be able to see them for a few short hours a week. I can not even begin to explain how devastating losing my kids would be. To not be there for them and support them in everything they do. No mother should have to even think about what their life would be like without their kids because they couldn't afford to take care of them and provide them with a safe loving home. Although we began receiving hazard pay as an increase

for working in a dangerous environment, that \$2 an hour being taken away due to the proposed homecare rate is the difference between barely getting by and being able to provide my family with the basic needs that all families should have regardless of the kind of job their parents work.

Thank You, Alyssa Omdahl With my current wage as a caregiver, I can barely support my 2 Cats, 2 Dogs, and my mom. I currently live with my mom, my fiance, and the pets. I had to wait for my bonus so my fiance could take his test so he could go to work. I don't have a spare \$200 for a career certification test now. If rent, food, car, and renters' insurance goes up I will no longer have a home. My fiance and I have 2 cars, neither is safe for long-distance driving. My mom has 3 health issues that require special diets. We already can't afford the diets as is. Currently, mom can't even avoid her allergies due to pharmaceutical companies not being required to list all the binders in medication. Because our state allows manufacture replacement for generic meds, she is currently taking a pill with corn binder in it and is having to take antibiotics to deal with the effects of her food allergies. I was told back in 2013 to go on disability due to my autism and the side effects of my period. No company will hire someone who might have to call out every week on the 20th. I was working 3 jobs when I started having issues on the job. I was working 3 jobs at the time! If I had taken disability, then you would be paying me more monthly than what you are now as a Caregiver for my mom. All my pets were adopted from shelters. This means I saved the state money from either their health care and maintenance until adoption or until they were put down. I worked hard to pay for them to be fixed. One is losing muscles in her back legs and might need a wheelchair. She needs pain pills to keep moving. One has a major allergy issue and his food costs \$40 more a month than normal dog food would cost. My cat was feral, and no one could touch it. The other cat is an angel and would have been easily adopted. Caregivers are caregivers because they have such big hearts, they try to help everyone. One of the clients I took care of started to get dementia. They went into a nursing home and ended up dying. The nursing home didn't properly monitor salt and water intake. I talked with the people in charge of their room and food and the workers didn't even know my client's status. They missed their appointment. Tried to send the ex-client alone and the client had memory issues. Their family could only visit on weekends due to work, school, and kids. The ex-client went from walking into the nursing home to a wheelchair in less than a month. The facility wouldn't even do the pt that the ex-client should have been doing. My fiance tried to get a temp job to pay for his test but he is too old and too welleducated for them to hire him. So, the only way to fix that was to do the test to go back to his old job that he liked. So, to be honest that little bit aka \$200 is enough to change our world enough to get on our feet and pay for all the things needed. If the pay had been any less, we wouldn't have even been able to afford to live in low-income housing. We're currently paying more than 1/3 of our household income just to rent. But once the fiance

gets back to work our income will more than double and we might be able to afford a house which would put more money into the State tax budget.

Melissa H. Caregiver since 2010



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Dear Rate Setting Board,

s Wichele Cration. I've been with

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it may concern: name is Richard Bergda be

clients.	5'in cerely, Richard Berydall

My name is Mary Cruz I am from local SEIU 775 in Port Orchard, Washington. I walk a tight road taking care of my autistic non-verbal son, Sancho who is a runner and an escape artist. Taking care of Sancho is the hardest job I have ever had! I work 14 to 18 hours a day with him as he doesn't require sleep and will destroy things around him without said sleep, and I only get paid for a 8 hours or less a day. Finding respite is not easy as most people don't want to struggle with a difficult client.

Having a decent livable wage would ensure that I have the time to maybe take off to reenergize my mind an self in order to keep my sanity. I would like to invite you all to spend a day walking in my shoes to know that this is not an easy task, and that asking for livable wage is not being greedy. Many of my fellow IP's struggle to maintain a household but aren't able to do well because of having to rob "Peter to pay Paul" which is an added stress to one's mental health. Please help us by giving us the funds we deserve to earn and not insult us with paltry wages.

Mary Cruz, IP aka Sancho's mom and advocate



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# Dear Rate Setting Board

My name is Surdine Luper, I am a parent provider and a indival provider. I also work for all warp caring. I have been a caregiver for S years. I am a active member of SEIU 775. I am an exective board Member.

I correctly live in a howewith another caregiver. There are & people in the home, with the cost of living increase and other stoff increasing in cost. My little family of 3 have been trying to move into our own place. Places are so high right now. We need sent trability

Caregivers are over the state need a higher wage. If we don't get a pay increase as soon possible we will be losing even more than we have lost. We as caregivers shouldn't have to struggle while caring for those that need care. Nobody should have to pick between food and medication. My colleagues and I deserve to be paid more than we are and to be compensated fairly for the hard work that we do.

Will you please raise th	e late.
Will you please raise th	Thank you for your time
	Surdiene Types

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Dear Rate Setting Board my name is Susia Young, an Addus Employee in Spokane. I have been a care provider for mare Than 3 decades Over the year, we have improved Our wager and benefits, we have also improved the guality of care for training, the standard of care has increased. We are also seeing higher medical needs with today's clients. Finding in home care workers is difficult, in some areas of our · + test 7. I have heard from a nursing home worker that in her facility, one resident has been waiting 4 months to go home. They can't clind a home care worker. We need to continue to attract people to this work by offering good wager and benefits. This can be a Very challenging victo: I'm now 76 yreanold and St! V working part time. It's the court of inflation that has hust us the +20m The impact of this is there is no extra money to pay for repairs that come up - 10- my care needs tires, or a turnace Needs

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or the abostic bill good up besource of
the abostic bill good up besource is
the A.C. most of the summer. It has
been voug het in Spokone.
Theore Support con given by appreving
of hister gode for the Rode Setting Board.

Thomas you for your timp.

Case Provider -

Suris Young

One of the first things I needed to do for my client, who thought his only need was for somebody to drive him to the grocery store, was to ensure he got to the doctor when he was supposed to. Then it was to hold his hand through an amputation of his toe and follow up with daily wound care. He never would have had the courage to go to the doctor to find out that his toe had turned deadly on his own. Later, when the doctor asked him a series of questions about another issue, it was because I was there with him again and asked the doctor to look further. When he did, he discovered my client urgently needed to have a heart valve replaced. Again, John would have not said a thing because he didn't want to bother anyone. I knew that about him and understood my role by then to be his advocate, to see that he got good care. I've never not done that for my clients since. I understand clearly that I can save their lives in extreme situations, but also provide guidance and loving concern for them while they navigate through what's always seemed to be the worst times in their lives. This is a very important and very unique role that caregivers play, and unless you become a caregiver, you may never feel that responsibility. But that's why we must have yearly training, and why we need to have adequate wages. Not only is this responsibility a heavy one, but it's also desperately needed by so many more people. If we can't offer a new generation something to attract and then to keep them in this field, a lot of people will never get the kind of care that my clients get, that all of our clients get.

Oh, there's more. I came to a client's house and unlocked the door to find her on the floor, crying. I was fully aware that if she were one of the 80,000 or more people who can't find a caregiver, she could have been on that floor for the rest of a very short life.

Sincerely,

Vicki Bickford, a proud Caregiver and SEIU775 member

August 15th 2024 Hello my name is Kosa Tigner and I am a Individual Provider Caregiver to my mother for over 10 years. I get a small amour of money from the state for her care But with the rising cost of living And mediation I Often have to use my au funds to offset most slome of her heeds. I love working with Elders to watch ther live their lifes with dignity And respect, we as caregioners need to have all the toots t Stayin compliance with our Clients needs. But most importantly raising our pay to accomplate the rising cost of living within au tate. Please Concide these matters for All caregivers. KOSA TIGNER-ROSON TR

My name is Stephanie and I've been a caregiver for five years.

I've worked for agencies and as an IP.

In these I've learned how hard it is to maintain a decent income. Having to work more than one job and over 40 hours a week to afford rent. If we don't have an income increase I won't be able to afford my rent as it stands. I love my job and the clients are in need of care. If we keep losing caregivers because they can't afford to pay bills the clients will have no one to care for them. My family matters and I have to afford to keep my job if I'm going to do it myself and don't want to quit, but may have to find other work to be able to take care of my children. Food and gas has gone up along with rent and I need to maintain those bills to maintain being a caregiver.

Stephanie Phillips

To whomever it may concern and the rate setting board,

My name is Katherine Tramell, I have been a caregiver for 4 years with SEIU775. I took my first job as a caregiver at 19 years old. Am currently working as an IP. I like being a caregiver, because I know my work makes a positive difference in the lives of my clients.

I'm writing to you for a second time this year to ask for a higher rate to be set.

In my first letter we covered my budget and the fact that I missed 7 weeks of work due to medical issues over a 5-month period.

This time, I would like to go back a little further. Starting in 2015 I applied for my disability. For 4 years I was unable to work due to my medical issues, I was turned down by the courts, and left with the decision of moving into the homeless shelter or going back to work. I went to work as a greeter at McDonalds, this was in June 2019 and by spring of 2020 covid had hit. I went back to work as a caregiver in dec 2020. I maxed out my credit making sure I had everything I needed in my home. You see, I also lost my house and almost everything I owned in a house fire in 2017, with no insurance.

I was doing ok financially until my rent went up by 53%, groceries and everything increased in price. Soon came the pay increases to most minimum wage workers, but not caregivers. We were under a contract. I started having to borrow money just to pay the bills, I moved once to lessen by bills and was making my payments until I missed those 7 weeks of work. I have since had to move again, and if not for the good nature of someone I would have been homeless. Currently I only pay enough to cover utilities.

I would also like to talk about my benefits, medical coverage to be specific. I wear ankle foot orthotics on both feet, a right knee brace, and two thumb braces. My insurance only covers 50% of the cost to replace them. Thats a \$2,000 out of pocket, which I have a second insurance for. My benefits insurance does not cover anything for the feet unless you're diabetic. Now, this is caregivers who are on their feet all day in many cases, with insurance that does not cover their feet. My over-the-counter medications (meds that the insurance has stopped covering) have increased by \$100 per month.

All this to say if I am struggling on the current caregivers' wage, as a single person with no dependents, I have to wonder how families are surviving on our current wage and benefits package.

You see, I know a little bit about merely surviving. I moved here 10 years ago from one of those states where the minimum wage is about \$7.25 per hour. I raised 2 children, sometimes as little as enough to pay for the utilities. We got food stamps and medical from the state and used clothes closets. The most I ever made was \$350 per week. Moving to Washington State was a God send for me. So, when I tell you that I'm having trouble staying afloat financially and I know that families are as well, know that it is not a statement I make lightly.

Wages must go up to meet the cost of living, and more than that meet the demand for workers in the field.

Thank you for your time.

Katherine Tramell.

Hi, my name is Maria Gonzaga, and I am a caregiver since 1998. I started caregiving as an individual provider with the Yakima Nation and now I am a full-time caregiver with an agency All Ways Caring. I like my job as a caregiver taking care of my clients and they like the care that I provide. I have been working with the same client for 6 years now and I can say that our wages are very low. Even though I have been working for many years I am still not able to buy a house of my own. During the pandemic our Union won hazard pay and I was able to put a little towards my savings but now things have increased so much. I haven't been able to go on vacation and spend time with my family. I can't go to the store and buy new clothes because I need to pay for my groceries. The money is not enough, and I worry all the time. If our wages increased that would really help me and my family.

l'appreciate your time,

Maria Gonzaga



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Iti my name is Angela Muson. I have been
a care giver for 25 years now. My family and
I are living out of a motel right now to and
a care giver for 25 years now. My family and I are living out of a motel right now france have for the last two and a half years, due to in the County we live in right now
due to in the County we live in right now
se made to much for the cheme. The come
not aftered a place that is not conceptered low in come due to we can not aftered the
15 to 7 / H we can not attend The
2.5 to 3 time the income these places required
Plus first, last, and security deposits. I only receive \$11,170.00 amonth due to my client
is only allowed 77 hours or month. You might
is only allowed 77 hours or month. You might say go find another Client. That would be great
but I am wable to bue to my client is my
disabled brother, and on top of talling care
of him I take go of my disable I son and
mother. It And for these reasons it makes it
difficult for me to find another Client or two. But
it we were to have a payraise to a livable
we could more out of the motel and into a home
that we could afford, because then we wanted would
make that 2.5-3 times the amount and be able
to afford first, last, and securety deposit- So
to afford first, last, and Securety deposit. So I am asking for you to please raise our wages.
1
Thenk you
Angela Mason 6/12/2024
Angela Mason
6/12/2024

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Rate Setting Board members, greetings and salutations.

I would like to introduce myself, my story and why I think it is paramount for all involved in these debates to support increased NOT reduced expenditures in these trying times.

My name is Nando H. I have been in the health field since 2000 (CNA, nurse student graduate, Individual Provider). I worked in various settings (1 to1, many to my 1, hospital, long-term, short-term, acute, sub-acute, convalescent, hospice, rehab and miscellaneous needs and demands of the jobs- some lovely, some nightmarish and horrendous). I have been an Individual Provider caring for my current client (who prefers to remain anonymous), a 97 years young woman, since 2011. As an IP, I previously also cared for a male hospice client and another Aging and Long-Term female client. In my journey, I have seen what negative effects reduced costs will cause in an industry caring for those - whether disabled, at risk, meek, weak, humble, unable to fend for themselves, and the rippling effects of low(er) wages to caregivers. I do what I do because of my passion for helping people that would otherwise be either institutionalized (causing increased costly expenses to our state) or prematurely deceased from abuse, neglect, broken heart and or spirit. I definitely don't do this for the money but I have to pay bills, maintain housing, car payments, insurance, utilities, clothing, equipment, and a plethora of incidentals in order to keep ahead of homelessness.

For those we care for, every slash in funding has a catastrophically plummeting effect and wreaks havoc on our clients in their day-to-day life, struggles and subsequent needs (medical, fiscal, emotional, personal, spiritual, etc..) in the unforeseen future. Less of anything, in their dwindling years and increased needs, forces our clients to cut corners to remain afloat, in our messy economy and increased costs associated (less food and drink, skipping meds, social isolation, emotional distress, negative self-image, etc...). It is up to us caregivers to champion their cause and be the voice they need to have heard by your esteemed and hopefully fair and considerate board members.

For us caregivers, in this current out of control economy, reduced or stagnating wages and expenditures decrease our ability and resources to work, pay bills, maintain our car, shop for food, use of utilities, clothing, etc...). If we are expected to be a professional corps but not paid accordingly, people eventually go somewhere else where our services are

commensurate with our experience or exit out of a field plagued with burnout, constant transfers and change of vocation, in order to find a balance or decreased stress and lack of recognition for our unsung accomplishments for those we care about AND for. IF it was you or your loved one, would you skimp on either or would you demand the best for both???

In conclusion, I would like to thank you for your attention in this matter, your favorable consideration, look forward to your support to both clients and caregivers and a positive resolution for everyone involved.

Respectfully Submitted,

F N Haddad

Cell: (253) 576-1537

Dear Rate Setting Board Members,

My name is Theresa Uyeno and I am an agency provider and an individual provider. As an agency provider I am required to have a car with insurance. My payments for my car and my insurance are very costly to me and my family. I am requesting that you increase the rate so that it will not be a hardship on me and my family which I am the primary provider. I am also a caregiver for my 2 autistic nephews which rely on me to drive them around and providing care for them. If the rate is not high enough this will greatly impact my whole family which I will not be able to afford to pay my bills. I will not be able to put food on the table or pay for my car which is needed to keep my job. Thank you for your time and consideration in this matter.

Sincerely,

Theresa Uyeno

1340 Ivy Road

Bremerton, WA 98310

360-649-9597

#### Dear Rate Setting Board

My name is Alexandria Black I care for my mom's boyfriend for the last 2 years. I am a mom and grandma. I have been an active member of SEIU 775. I really appreciate all the pay raises and benefits. I care for him so that he can get the best care possible. He has been with an agency before and at times they were not able to cover all of his hours. He is military veteran has many medical conditions including being an amputee. There are many times that he spends weeks at the hospital and so I then lose out on caregiving hours. Currently my children and granddaughter doesn't have medical due to the fact that I fell below the hour threshold.

We are currently struggling financially my husband and I both work. We still are having issues with keeping all of our bills paid on time. We just had our cars repoed and thankful was able to get 1 of them back today. We are currently looking for a cheaper place to live and it is super hard. I work 2 jobs but when you lose hours at 1 or the other it starts affecting you paying the bills.

Please make sure that caregivers throughout the state get a pay increase and continue with getting the increases. With the cost of living going up we need the raise. Food, gas, rent, and many other things have gone ups over the last few years we need to give caregivers a raise.

We also need to make sure that when we go below the threshold on hours that we can still keep our insurance. It is not fair to our children or us as caregivers.

Thank you for your time in reading this.

Alexandria Black

#### Dear Rate Setting Board,

I am Amber Bierce and I have been a caregiver for over 10 years. When we did the switch over to CDWA they cut my client's hours down even though his needs increased and will not allow me to work any more hours a month that my client was previously receiving. Since then, inflation, the raise to minimum wage and the price of gas and food have gone way up, I am barely making ends meet. I often do not have enough money to pay my bills and feed my family, let alone put gas in my car. I have two other jobs in addition to full time caregiving so that my kids and family don't go hungry and I can keep the lights on in my home. I do this job because I am passionate about helping those that need it. This profession requires so much more physically, mentally, and emotionally than most other entry level jobs that pay almost as much, if not more. Me and my colleagues absolutely deserve to be paid more than we are and be compensated fairly for the hard work we do in the community. I hope that you would understand our position, as I know you would want the best care possible for yourself or your loved ones that currently, or will need to receive care from our amazing caregivers in the future.

Thank you for taking the time to listen to me express my thoughts, and many fellow caregivers of mine that stand in the same position.

**Amber Bierce** 

Hello, my name is Jennifer Paine.

I am writing to tell you why I think we deserve more money. Us as caregivers work hard. We are not only 5 to 3. A lot of us work 24 hours a day and do not get paid for it. The cost-of-living a lot of us caregivers work two jobs. I am single Mom with one child under the age of 18 special needs child over the age of 18. I have to have a roommate because I can't afford to pay bills in a house on my own. I work more than 40 hours a week, and I'm barely making ends meet. Ay children suffer. My children suffer sometimes because I'm not home because I have to work so much just to make sure they have food on the table and roof over their head so please. Hear us and please help us out.

Thank you for all your time

Sincerely, Jennifer, Paine

#### Dear Members of the Rate Setting Board

I am writing to you as a dedicated caregiver for pediatric medically fragile individuals, and I want to share my personal story to illustrate the urgent need for higher pay. These rates you decide here directly impact my hourly wage and, ultimately, the quality of care our clients receive.

My journey as a caregiver began when I took on the responsibility of transporting my clients to their essential medical appointments. Their mother, who was unexpectedly disabled, relies on me as their sole means of transportation. Over the past four years, this duty has taken a significant toll on my vehicle, necessitating the purchase of a new one to continue providing safe and reliable transportation. This unexpected car payment is a burden I have accepted because it is crucial for maintaining my job and ensuring the safety of my clients.

My clients live in a rural area, making timely medical appointments essential. Dispite lack of public transportation, missing these appointments is not an option. And so, despite the financial strain, I chose to take on this car payment because it was the most responsible decision for my clients' well-being and the state's cost efficiency. However, the current wages we receive as caregivers are not sustainable. The high cost of living, particularly in terms of rent, is pushing caregivers like myself to the brink of displacement, and the industry is already experiencing a severe shortage of staff.

There is no more efficient or cost-effective way for our clients to receive the care they need than by paying caregivers a livable wage. We are already asked to perform numerous responsibilities, and taking on a car payment was not something I anticipated. But I did it to ensure my clients' safety. Now, the most responsible course of action for all involved is to ensure that caregivers are compensated sufficiently to avoid homelessness, transportation issues, and other financial hardships.

I want to make it clear: I could leave this job and find another. However, our clients do not have the option to stop being disabled or aging. Without adequate pay for caregivers to live on, who will be there to take care of these vulnerable individuals?

Increasing pay, wages, or hourly rates is not just about fair wages for caregivers—it is about ensuring that our clients receive the consistent, quality care they deserve. I urge you to consider the real-life impacts of your decisions on both caregivers and the individuals we support.

Thank you for your attention to this critical issue.

Sincerely,

Julie Sparkman



Sterling Harders | President Adam Glickman | Secretary-Treasurer Andrew Beane | Vice President Shaine Truscott | Vice President Tangie Webb | Vice President

Hello to each member of the 2024 Pay Rate Board.

My name is Lisandro Perez, I am 60 years of age, I live and work in Olympia Washington. Since 2020 I have been employed as an IP and represented by the SEIU 775. I am paid for 30.5 hours a week at a rate of \$21.38 hr. I work for a client who deals with mobility and severe pain issues and sometimes problems with her equilibrium which causes dizziness and nausea. My duties include medication management, driving (using my car for appointments, shopping, picking up medications), preparation of food, housecleaning and laundry. I also perform some personal care tasks such as help with dressing, foot care and leg massage. If it's a particularly bad day for her dizziness or foot & leg pain I will also assist her with standing and walking short distances. She is an intelligent person with varied interests who loves her home and enjoys doing things for herself when she can. So part of my job is to be flexible with my support in order to respond to her daily needs in a meaningful and appropriate way.

Unfortunately, my client's care hours were reduced recently and so it's sometimes necessary for me to work a few extra hours unpaid to meet her fluctuating physical needs; especially during periods when it is unsafe to leave her on her own due to the heightened risk of falling. I see my role in performing all of these tasks as essential because it provides my client the ability to maintain the safety of her person and the comfort and agency of her home.

This work is a good fit for me but I am facing that my current financial situation is not sustainable. I'm feeling the pressure to take on an additional client or look for a second job in another field all together. Simultaneously, I feel reluctant to take other work because I believe that another commitment would hamper my ability to fully meet the needs of my primary client. This will be additionally taxing for me as this work is demanding both physically and emotionally under the best of circumstances. But I'll have to do something soon to address my current financial needs and future security.

Since it is unlikely that my client's care hours will be restored or expanded, having just been recently cut, the only other solution to taking on another job is a pay increase to a recommended living wage of \$25.00 an hour. It would also be extremely helpful to have our affordable health care coverage continued. I also feel that increases to retirement benefits, more paid time off, paid holidays and mileage pay would be beneficial to my situation.

I urge the board to consider these requests not only for my benefit but for all other caregivers who are facing similar but not uncommon insecurities.

Sincerely,

Lisandro R. Perez

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Sterling Harders | President Adam Glickman | Secretary Treasurer Andrew Beane | Sec Fresident Shaine Truscott Frice President Tangie Webb | Vice President

To Rate setting board,

Ang 14,2024

I am a caregiver working full time hows. I constantly Stressell I can pay my monthly obligations. As it is I bacely mut them with my husbards full time income. My husboinds health is not the best, He has COPD which stands for Chronic obstructive pulmanary disease. It is a health condition that slowly sufficiates any one inflicted with it, This adds undo stress, as I worry if he ever passes away trom it, I will not be able to make ends meet with out his income. The rates of pay we get paid isn't a live able wage for us caregivers, Cost of needs keeps rising, but our Wages either stay the same or only goes up by pennius. There is such a high head for caregivers but it takes someone with a big heart and physical staming to be able to keep up with the demands of being a caregiver. I currently service 4 clients in a week. 4 of which I only service I day in a week. I magine taking care of clients needs only I day a week. Most those days I'm Constantly moving and stressing my body to get done everything that needs to be done some of my clients don't gut adequate hours to meet their needs and sometimes there isn't enough caregivers to provide adjuncte services for clients. It's hard to get people to want to be a caregiver because they won't make a liveable wage doing it. I strongly urge you to, raise caregives Starting wage to atteast \$25 an how and adjust anyone who already is a caregivers wage according to how many hows they have done as a caregiver. Thank you for any and all Considerations

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Our mission is to unite the strength of all caregivers, to create a better life for ourselves and those we care for, and to lead the way to a more just and equitable world.

Tangle Webb | Vice President



## To The Rate Setting Board

Costs have gone up drastically for the most basic things, and l'ue pared down my expenses over the past coupte of years, but my medication takes half of my paycheck

That's because in-home caregivers only work part-time. my disabilities have really limited the type of work I'm able to do, and it's althing harder to find clients whose needs fit with my abilities

I'm of thing disperate, having opne through all of my savings, and I'm barely holding on. Some people might believe that I could just get amother job, and I know of a comple of caregivers who had to, But this job is a calling. My client is a sad, lonely dementia patient. She needs caregivers who have warmith and kindness to spare, and those are very rare.

So if we have to kave our idos, who will our clients have to keep them safe and healthy? If my client can even get another! Because who can do the extensive training, yearly background checks, own a car, and commit to the travel time?

I am the working poor, and yet my job requires expenses that I'm not reintoursed for and can't always cover my pay rate doesn't allow for graceries and revit oping up, or the cost of myelectricity and water bills.

Please consider the specialty care we provide, and raise our pay.

**SEIU 775** 215 Columbia Street | Seattle, WA 98104

Member Resource Center 1.866.371.3200 | www.seiu775.org

mark you,

TERRIFO Webb | Wee President Shaine Truscott | Vice President Inabigard salv | arrests weathruh Adam Glickman | Secretary Treasurer Sterling Handers | President

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her, She's my family number, and need to be with her and hold her in any where to avoid full down. Person, She have arrived iple Sei Zerres during the day. I working as a conggiver formy dient, Shee a disable

L'Ice bounk Loon, Ours Insurance ,, etc. The money I get it deasit cough to cour all my needs Time & my budget, with all like expensive & needs All the Medical Conditions She houd It. Cost mig my

expensive even a Snall things, My Budget deastit help me, Everything become veny to make it casy to has to walking through it, but berevangle, I planed to rehab; lited the both room

That way ask for lept up the avegines Rate / h 12: So much expunsine with all those things x more I Showld he putient & halp hul, as much as [ can. For how because She Likes that douily, itso, that costme a late, I should put had been a wookly by \$80 or mockly by \$80 or mockly by \$80 or mockly she takes a medication of suppliments and counter Every day should I take her for driving, bought a fost front

ObH-EH-09E get What we deserve. Thank you Eman Henrichs That as a reguest proposed deserve to brighting and houses no one work hand like us and Conceder

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Dear Rate Setting Board,

My name is Pam Hansen. I work as a caregiver for my adult son and also do caregiving work through an agency, cattolic Community Services. I don't qualify for most assistance programs because they say I make too much money yet I am struggling to pay the few bills

I have.
I really don't see ways that I can
make cuts to my expenditures in order to
make in as meet in a reasonable way.
Lucause I've already done that. I was
really looking forward to saving enough
money to fix my car. It needs work so
I now must limit myself to very short trips
I use it mainly for work.

hostunately, I have good, affordable insurance through my job but I've had diabeted for years with some complications so my co-pays and medicines have mounted up to quite a lot each month. I'm considering a third job somehow but with my car and health problems I don't think that is a valid.

I know many other caregivers who are like me, barely making it. We are sincerely hoping for better wagse. Please help us make enough money so that we can Keep our cars running and our medications filled on time so that we can continue to work.

Trank-you for your time,

Pamela Hanser

Adam Glickman | Secretary-Treasurer
Andrew Beane | Vice President
Shaine Truscott | Vice President
Tangie Webb | Vice President

8/8/2024

My name is Guadalupe Indenson I have been a caregiver since 2008. I Became a caregiver, because I had neighbors that were elderly and I saw them Struggling to care for themselves. So I decided to help them. So that when I decided to apply to work as an in home caregiver.

Within these last 2 years the cost of living has gone up and the wages stay the Same. It has been a struggle trying to keep up with paying Buls and Duying food.

This affects My daily life and poots gives ame alot of Stress I I have liven thought about getting a Second job so I can be able to save money for emergencies or vacation.

I just would like to see a wage increase to the help releave the some of the Stress and anxiety.

Some of the Stress and anxiety.

Guadalupe Anderson

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my name 15 Gloria aleala, I have Been a CNA & Coregiver do a caregiver for as a years. I have Been Raising my by kids alone and I have been saising my by kids alone and I have been shinged and I have been struggling since day I with affording food and medicine to my kids, Tho of my children are disabled and I need a feliable wehicle. So I don't have gos for the vehicle, I do hy ing to budget my money, so I have gos for the vehicle, I do have. I have you children is times during the month that I go without eating as I have not budget my make sure my kids have food, I have not Been able to afford a vocation out of town and how be all would benefit greatly from allowed and we all would benefit greatly from allowed.

because of the lower wages us caregivers get, I have have have multiple Jobs to make end meet with the way the boomers are used the seconomy is going now and how the Boomers are getting older it the kates are not take into consideration the have perspectly for the elders and disabled. So I am asking you to prase take into consideration the have hoore that goes into our Jobs and allow us to have take work that goes into our Jobs and allow us to have take the relaxing time I need to care for myself, and take the relaxing time I need to care for myself, and to be so I can be able to the sold of a reliable car so I can travel to and from Dei agontment esafely, thank you.

To whom this may correspond to:

Hello, my name is Patricia Valdovinos. I am an IP caregiver of 3 years caring for my mother. My mother is 95 years old and needs my undivided attention at all times. I need this job because I cannot work away from home and leave my mom alone.

I would like to advocate for better pay wages for caregivers. My wage is not enough lately for my bills and necessities for my mother, children and I. I have two minor children and my elderly mother who depend on me. I know that in these tough times, there are lots of us that are struggling in this economy. Having better wages for us caregivers would definitely help live life a little better and with less stress.

Thank you for your time and consideration.

Patricia Valdovinos

Hello, My name is Diane Klenski, I have 20 plus years as a Caregiver in the State of Washington as well as California. In 2021 I became a guardian and caregiver to my brother. While My husband and I are blessed to with this opportunity, I had left my full time position in order to care for him. As a Caregiver we see the effects of the higher housing prices, as well as increase to affordable health care, food, fuel.

We have had to make changes and take on side jobs in order to continue making our house payments and utilities. Caregivers deserve to have increase is wages to match or above the cost of living.

As a Caregiver I will continue to vote and be a voice for rights to better pay.

As well as fair wages and increases based on years of experience as well as level of care given to our clients.

I Myself have seen a new caregiver with no experience hired and receiving over what I was given. While I wonder where and how they come up with starting pay above someone with years of experience.

While I enjoy being a Caregiver, I feel equality in pay, incentives, raises ect. Will bring in more caregivers where there is a shortage.

Sincerely yours.

Diane Klenski

Dear Rate Setting Board;

My name is Maria Imelda Salinas Gomez and I have been a caregiver for 24 years. I would like to tell you my story if I lose the current rate we have.

I usually have 2 jobs to make it through the month. I lost one of my jobs, my client passed away when I was their Independent Provider. I also work for an agency but that is not enough, as right now I am in a lot of debt because I haven't found another job, I owe money to the bank which charges me \$45.00 because I made a check that doesn't have enough money in the account, so I am in overdraft.

I don't have money to pay my car, so I probably going to end up without a car. I just got injured at work so I lost more hours and more pay, and I have been going to the food bank so I can have some food on the table, also I been using my credit card to survive, but that is just getting me in more debt every day.

That is why we cannot lose the rate that we have, too many reasons, I would lose my home and my car – I'll be homeless.

Thank you,

Imelda Salinas

Tim behind on bills. I berely have family. I have a lo berson household. of my living cost. Basically, I don't two in highschool. My income is 20%. I have four children Two in college, bread griffet stall also

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# To the Rate Setting board:

My name is Sonja Thomas and I use she/her pronouns and I Am a caregiver for Tyears now, and if I am not able to get the raise that I as a caregise deserve and all the corregivers through out washington State. I want to be able to not have to go to the food bank which I can only that what they have and bills I have to travel to and from my clients so maitianny I am very devoted to the need of my Wient's to make shope the are able to stay in their homes. So if I make a good water wage I can do things like every hard working Persons so getting a wade incresse will help me not have to Pinch my pennies to make sure I don't fall behind. So please give us the Raises we deserve for the hard work we do for our Chirots to stay in their homes Thank you Bonja Thomas

817124

### To cohom it concerns:

My name is Lisa Caforlaine and I'm an agency provider in Kennewick, WA. I'm helping to fight for loster wages because I believe we as Caregivers deserve them and because we are taking care of someone else, their health is put in Our hands by agences, family members who cannot or choose not to do it them selver. I my self having Lupus and being cliabelic, know that when the time comes for me to heed Care, Somebody is being Paid well enough to take Care Of me & can focus on me without having to worry about another jobs, without distriction and possible stress that would ar could lead to a wrong decision about my Care. I too feel the Same way about my clients. But also am always making sure I'm keeping up with my hours to maintain my health insurance beings I See so many doctors myself. Caregiving is a vert rewarding job and for me, I am able to manage my Lupus by working at a pace that doesn't throw me into a flare. But because of current medical 1 sues. I am 2 months behind in my mortgage and an feeling like I'm so behind and a payout would he devastating like as careginer do our jobs so that we can keep people in their homes not facilities, which would put so much more financial hard ship on families and Cost the State even more. Please continue to Support Carginers. Ube may need one