Hi! I know there is a senate hearing on July 9th. I unfortunately cannot attend as I have to take care of my son who is 8 years old. The CDPAP program is incredibly important to me because my son needs 24 hour care. He is only 8 years old but has a very rare genetic disorder that affects many things. He just started walking without a walker at age 6. He needs to be spoon fed for all meals, he has a vision impairment (functionally blind), he is a wheelchair user, non-speaking, and needs supervision at all times due to a severe intellectual disability. He is such a joy and has taught me so much. Caregiving 24/7 is hard. This program provides the much needed services to keep my son at home. However, since the transition to PPL it has gotten much harder to find staff to help fill hours. I have even had staff that became completely uninterested who declined to interview due to the known issues with the transition and the program. The transition caused such stress I ended up at urgent care and got very sick. I have a receipt for that. This program provides stability in my home. I rely on this program so I can provide for my family and work full time. I have talked to a number of aides (interviewing for my son) that were part of the program prior to the transition and they had reported that they got paid incorrectly. They also reported there had a several week delay in payment.

I could not get ahold of PPL (via email or phone) and that had delayed in my transition. This was after sending multiple emails and calling. Many times PPL were unable to answer my questions. My old place (All American Homecare) had covered the hours for the staff working for us since the transition was abnormally difficult. They also called and checked in once a month, there was a level of case management that PPL does not offer. Our old agency would even give us additional names that could provide care and help us. This needs to be considered as again helps manage those small issues that could turn into much larger problems, ending in a hospitalization. Which ends up costing the system more money.

The return on investment should be reviewed. Speaking from experience, I would assume keeping people at home would be more cost effective than living in a nursing home. My friends who also have children with complex needs report similar things such as being able to sleep at night since their child can be supported/supervised. Providing stability in the home etc.

Thank you for caring. Please know that this program benefits so many. I am just so grateful for this program.

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Kathleen