January 28, 2020

Pennsylvania Senate Labor and Industry Committee  
Senate Box 203046  
Harrisburg, PA 17120-3046

Dear Committee Members,

I appear here today to provide my perspective for your consideration on the proposed Family Care Act. My name is Rich Garland, I am currently serving as Executive Director of a nonprofit in Allegheny County known as The Blessing Board. It is a furniture bank that collects donated furniture and then distributes it at no cost to families in need. The Blessing Board currently employs 3 full time people and 8 part time people. I am currently the owner of Garland Management, a real estate development and small commercial construction concern which employs on average 5 people. I have for the past 25 years been the owner of Garland Agency, an insurance agency which employs 7 people. I am a small business owner.

I care for my current staff and my employees. I know their families and I have watched their children grow into adults and have children of their own. I am not unusual. Despite what some might like to say, I believe that the majority of small business owners want the very best for their employees. Throughout all our lives there are times that challenge us to respond to tragedy, death, loss of health whether it be yours or a family member. Sometimes these events require an extraordinary response.

I have been involved in several of these events with employees throughout my business career. One such instance happened when a long-term employee and friend who needed a hip replacement. He scheduled the surgery and planned to use vacation and sick time to help with his recovery and our office was willing to work with him to allow him to return. The hip surgery went well, and he started to recover until an infection set in. He almost died. He spent the better part of six months in recovery working his way back to health. He had no short-term disability or long term disability. He did however have health insurance.

You see I believe there is a need for this legislation if it is done correctly, implemented wisely and monitored closely. I want to leave no doubt in your mind today. I am a free enterprise entrepreneur. I believe that 99% of the time that the free market can handle issues that face us. This one however I believe deserves your consideration for handling through the Family Care Act.

Less than half of our working population carries disability insurance. Those percentages decrease as your income decreases. In other words, as a person who has sold insurance all my adult life, sitting across the table from couples, moms and dads, families that face financial decisions on where to spend their dollars, I will admit this is a hard sale. If left to choose between savings or spending on disability, savings will win. When a family is faced with too much month at the end of their money, this is a coverage that will not be purchased or if purchased, maintained. Some might say they should plan better and in some instances they might be right. But without requiring an answer, I would ask
everyone in this room this question. If a spouse or a loved one fell ill and required your care, do you
have or have you saved the financial resources to care for them through their need?

I guess worthy of mention is that a significant barrier right now to this being handled by the private
insurance sale today is that this coverage does not exist for those in need of caring for a loved one who
has fallen ill in Pennsylvania.

Being a small businessowner, I believe there are benefits to the employer. In my businesses, I have felt
it important to provide health insurance coverage for the families at an affordable cost to the employee.
But admittedly, there is only so much money and as a small businessowner, I needed to be wise about
those benefits. The Family Care Act can be a tool for small businessowners to keep and retain those
employees that suffer a tragic event or find themselves in need to care for a family member. Properly
utilized, a businessowner can work with their employee to arrange the best possible plan for both the
employee and the businessowner. Today we do not have that tool. Today, someone must pay heavily.
Today both the businessowner and the employee would pay heavily. The businessowner either pays to
keep the employee whole through the event or loses the valued employee. Today the employee has to
quit or lose whatever savings they may have to care for a loved one or to recover from an illness.

Regardless there is a cost!

I started my remarks by stating clearly, that I am a free market guy. I believe that government is not
always the answer. To be frank, I rarely find government to be the answer. Today though, I think you
have an opportunity to help. Help a needed population at risk in not being able to care for a loved one
or recover from an illness and suffer financial ruin in the process. Today I believe you can help the small
businessowner retain key employees by providing a tool to deal with a loss in the employee’s life and
not have the businessowner make a choice of financial loss or losing the employee.

I must conclude however with an admonition. Often time our government will do the right thing and
the right thing has unexpected consequences. If this Family Leave Act becomes law, there are several
things that could happen. First, it could become successful and the revenues generated may not all be
used by those in need and it could have a surplus. Then someone decides that that money now can be
used for something else and suddenly, the good thing now becomes a very bad thing. The Family Care
Act, as written, prevents this – and it must be followed. So please, be clear and narrow. If you pass this,
keep these constraints upon yourselves and don’t let it be used for anything else.

Second, if you pass the Family Care Act and it becomes law, you may think your job is done. I strongly
believe you must continue to review the law consistently, working closely with the Department of Labor
and Industry and their staff to make sure there is accountability. Again, the law as written supports this.
Your work is important to monitor the success and then be held accountable for the decisions moving
forward with its success, implementation and modifications.

Third, if upon review changes need to be made, have the courage to adjust and make it better. Engage
small businessowners to craft products that they can use to help grow a stable workforce and increases
the quality of life. Ask tough questions of insurers to understand what is needed to make a profit,
because they should be profitable, but be wise and understand all the information.
Thank you for this opportunity to be here today to comment on this very important issue

Respectfully,

Rich Garland
Testimony of Joanne Corte Grossi, MIPP  
Pennsylvania State President, AARP  
Before the PA Senate Labor & Industry Committee  
January 28, 2019

Good morning, Chairwoman Bartolotta, Minority Chairwoman Tartaglione, and other honored committee members. On behalf of the our more than 1.8 million members, AARP Pennsylvania thanks you for this opportunity to speak to you in support of SB 580, the Family Care Act. We believe this law will provide a way to help the state's family caregivers better handle the financial difficulties that many face when they must take time off to care for loved ones.

According to AARP’s Valuing the Invaluable: 2019 Update, in 2017 alone, nearly 1.6 million family caregivers in Pennsylvania provided 1.3 billion hours of unpaid care to their parents, spouses and other loved ones.¹ This care has been estimated to have a value of $18.2 billion annually. Family caregivers help with medications and medical care, meals, bathing and dressing, chores and much more.

Some 20 percent of all female and 16 percent of all male workers in the United States are family caregivers. Of the 41 million family caregivers in the country, 60 percent worked at a paying job at some point during their caregiving experience. If employed caregivers lack the supports and protections needed to manage their dual responsibilities, some make changes in their work life, especially if they cannot afford to pay for outside help for their care recipient. It is not surprising that most (61 percent) employed caregivers report making one or more workplace accommodations, like coming in late or leaving early, taking a leave of absence, reducing hours, or leaving work entirely. According to a recent survey, one in five retirees left the workforce earlier than planned to care for an ill spouse or other family member.

While some legal protections — such as the federal Family and Medical Leave Act — provide a useful benefit for some employees to maintain job security when they need to take time off from work, it is important to note that FMLA is unpaid leave. The practical reality is that many workers, struggling to make ends meet from paycheck to paycheck,

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3 AARP Public Policy Institute, The Dual Pressures of Family Caregiving and Employment - https://www.aarp.org/content/dam/aarp/ppi/2016-03/The-Dual-Pressures-off-Family-Caregiving-and-Employment.pdf
4 AARP Public Policy Institute, The Dual Pressures of Family Caregiving and Employment
simply cannot afford to take unpaid leave. AARP Pennsylvania supports the Family Care Act because we believe family caregivers should not have to choose between taking care of mom or dad, or losing a paycheck, or even risk losing their job.
Testimony from the Pediatric Palliative Care Coalition
in Support of SB 580: The Family Care Act

Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28th, 2020

Thank you for the opportunity to speak with you today. My name is Betsy Hawley and I am the Executive Director of the Pediatric Palliative Care Coalition. We are a statewide organization of families and medical professionals caring for children with life limiting illness. Our membership extends across the Commonwealth and includes clinicians from our major children’s hospitals, hospices and home health care agencies, as well as families living with medically complex children.

As you might expect, our Coalition hears from many families about the overwhelming burden of caring for a child with a life limiting diagnosis. The good news is that health care is improving and children are living longer. The flip side of that is many of these children are living with multiple chronic conditions requiring care that is hard for most of us to comprehend. All across Pennsylvania, there are children living at home with ventilators, feeding tubes and other technology that require round the clock monitoring. Overwhelming medication and feeding regimes require parents and in-home nursing to be constantly on hand. While the Commonwealth provides expansive coverage through Medicaid for these children, the nursing shortage creates many situations where adequate help is simply not available. Children remain in the hospital because there is no nurse available to care for them at home. When they do get home, full shifts can’t be covered or nurses call off. When this happens, the family caregiver simply has to stay home and miss a day of work.

For Kate and Brian, this can also mean staying up all night, after having worked all day. Their son Nolan lives with a feeding tube which must be monitored and changed throughout
the night. Frequently, their night nurse calls off and the agency doesn’t have a replacement. That means Kate and Brian must split the night shift and then be ready to go to work in the morning.

One of our coalition members, Maria, has a 10 year old daughter, Cal, with leukodystrophy, who requires round the clock care at home and is frequently hospitalized. Maria considers herself fortunate that her employer is able to give her the time she needs to be with Cal. Most, however, aren’t that lucky. She has told me that she is often the only parent in the PICU during the day as others have to be at work. Imagine having to make the heartbreaking decision of being in the hospital with your child or losing your job?

Often families live a great distance from our tertiary hospitals and end up living at the hospital with their child for long periods of time. Or, they must be home working and can’t even visit, let alone stay, with their child at the hospital. Most families don’t have the option of leaving a job, especially at a time when they are hit with the huge health care bills that result from the care of their child. The bills are staggering. Each new hospitalization creates a new amount of debt burden. It is very common to see a Go Fund Me page pop up on FaceBook following an inpatient stay. Again, the option of leaving a job is not viable. Yet, who will take care of your child?

Our board member, Cassie, lives in New Florence, PA. An 1 ½ hrs. from Children’s Hospital in Pittsburgh. Her 2 year old daughter Zayva has a rare form of muscular dystrophy and lives with a ventilator and feeding tube. Her son Zane, died from the same disease a year ago. Cassie and her husband also have two older children with no medical issues. Cassie has a job at a local bank and her husband manages a fast food restaurant. They are an incredibly
busy family living on tight margins. When Zayva is hospitalized, Cassie and her husband take
turns driving the 1 ½ hrs. after work to be with her and stay the night. They arrive home early
in the morning and get ready for work. Someone also has to be at home to care for the older
children. Neither one can lose their job, so they have few options. They feel fortunate to have
an army of family and friends to help out, but it doesn’t decrease the burden. Balancing work
with a medically complicated child is a herculean effort - and often forces families to
make impossible, heartbreaking choices.

Having just returned from the Patient Quality of Life Coalition Annual Meeting in DC
where I received an update on the federal legislative agenda for palliative and hospice care, I
am even more convinced that action needs to take place at the state level. Our families cannot
wait for a federal version of family paid leave legislation to make it through both houses before
becoming an unrecognizable bill that doesn’t necessarily serve our needs here in PA. Our
families need legislative action right now that makes sense for Pennsylvania. The
Commonwealth has a rich history in leading the nation in common sense initiatives to serve
families and children. The CHIPP program readily comes to mind. The Pediatric Palliative Care
Coalition supports SB 580 and urges committee members to voice their support and advance
this bill through the Labor and Industry Committee.

Thanks so much for your time and attention to this critical legislation.
Thank you to the committee members for taking the time today to hear testimonies about the Family Care Act. It is my hope that hearing its importance from individuals in the community it will aid you in making the right decision.

My name is Mr. Timothy Martin. I am a Purple Heart Army Veteran of Operation Enduring Freedom and the Director of Client Experience at Veterans Leadership Program of Western Pennsylvania. VLP is a Veteran nonprofit who has been serving Veterans since 1982 providing comprehensive social services and engaging with over 4000 Veterans and their families’ western and central Pennsylvania each year.

Every day I am fortunate enough to witness moments that make our country the greatest place on earth and I also have been unfortunate enough to see some of its biggest atrocities. I have witnessed Vietnam Veterans struggling with the effects of Agent Orange and Post 9/11 Veterans suffering from the effects of a 19 year war.

Many of our Veterans and Service members to include myself suffer from an assortment of issues ranging from Als, Parkinson’s, Cancer, Ptsd and Traumatic brain injuries just to name a few. These issues often stem from or are influenced by a person’s military service and can cause multiple life altering changes to occur in the individual and the family’s life. Countless appointments for treatment, physical therapy, mental healthcare, wound care and so on. Something as simple as waiting to get fitted for a wheelchair, stair lift or hospital bed in their home can take multiple time consuming appointments.

During this time the spouse is often forced to miss work in order to help take care of their Veteran. With so many Americans being on a fixed income, this has led to many other issues that we as Americans are left to try to fix. I think that it’s important for us all to remember that the same Veteran who gave his or her all for our country often ends up in my office needing assistance to
avoid eviction, to put food on the table or asking for help getting transportation to life saving treatment because their vehicle has now been reprocessed. I would be remiss if I did not mention the burden not having access to paid leave puts on our local National Guard and Reserve members who are not allowed access to the VA or any form of supportive services.

The burden our nation’s heroes face is not one they should face alone. The family care act is a small step to solving a bigger issue. By passing The Family Care Act this committee would not just be ensuring a family receives a paycheck during a time of need, but you would be ensuring a Veteran and his or her family will not become homeless, will not be hungry, and will not fall into hopelessness and take his or her own life because they feel they are out of options. Small actions can produce the biggest changes and it is my hope that those actions will start right here.
Strong Businesses, Strong Families:
Paid Family and Medical Leave Leads to an Economy That Works for All

Written testimony on SB 580 for the Pennsylvania Senate Committee on Labor and Industry

Marianne Bellesorte
Vice President of Advocacy, PathWays PA

January 28, 2020

PathWays PA would like to commend the Senate Committee on Labor and Industry for holding hearings to discuss the need for paid family and medical leave under SB 580, the Family Care Act (FCA). We strongly support this bill and look forward to seeing it pass out of committee and move on to the full Senate.

This bill proposes a policy that would benefit all Pennsylvanians, employers and employees alike. Through our work, we have seen many families struggle towards self-sufficiency, and observed firsthand how state policies affect their success. What we have learned is that finding a job is only one step on the path to self-sufficiency. In order for families to avoid returning to poverty and public benefits, they need to be able to find and keep good jobs – especially while facing illness at home.

Everyone should be able to care for themselves or their loved ones without risking their income or their jobs

At some point in their lives, virtually everyone will need time to care for themselves or a loved one. Whether it is a happy event (like adopting a child) or a sad one (such as a cancer diagnosis or a car accident), no one is immune.

However, without access to leave, workers are giving up more than their time. In many cases, employees who take care of themselves or others must also sacrifice their income, their savings, and even their homes. In 2009, half of working caregivers reported spending all or most of their savings on caregiving expenses. That same year, 1 in 5 family caregivers had to move in with a loved one due to the financial crisis – the same number, incidentally, that have needed to take a leave of absence from their work.¹

Even when families don’t lose their jobs for taking unpaid time off, the income lost quickly adds up. On average, a family who loses just 3.5 days of pay due to illness loses the monetary equivalent of a month of groceries.² When workers need even more time to care for themselves or their families, such as in the case of a serious medical issue, the costs compound quickly. Over 1 in 5 Pennsylvanians do not have the resources to survive up to three months of sustained loss of income.³
At the same time, when it comes to taking leave, families often can’t afford not to care for their loved ones. When parents participate in the care of sick children, studies show these children recover more rapidly from illnesses and injuries and have better health outcomes. Just having a parent present can reduce the length of a child’s time in the hospital by 31 percent. For elders, caregiving plays a critical role in helping them stay in their homes. Taking care of family is the right thing to do, and the Family Care Act allows Pennsylvania workers to do so.

The Family Care Act helps Pennsylvanians in ways the FMLA cannot

When workers need to take weeks of leave for medical reasons (as opposed to taking several paid sick days for the flu or a doctor’s appointment), they are often told to turn to the Family and Medical Leave Act (FMLA) for help. This federal program allows some workers to care for themselves or certain loved ones – without pay – while holding on to their jobs.

To qualify for the FMLA, employees must work at a company of 50 people or more and must be there for at least a year. While there are a few exceptions, workers can only use the FMLA to care for themselves, their spouse, their parents, or their children under 18. Nearly half of all workers in the United States can’t use the FMLA due to these restrictions.

Here in Pennsylvania, only 41% of workers both qualify for and can afford to use FMLA. Employees with less education are less likely to have access to FMLA, and two out of every five women do not have access to family and medical leave under the program. And when it is an adult child, a sibling, a grandparent, or a grandchild that falls ill or is injured, workers do not have FMLA protections, and must choose between caring for a loved one and potentially losing their jobs. Nationally, more than 1/3 of family caregivers tend to family members who do not fall under FMLA guidelines, including siblings (5 percent of caregivers) and grandparents (8 percent).

That Family Care Act gives workers who can’t afford to take leave a way to care for their families. This paid family and medical leave program allows workers to take up to 20 weeks to care for themselves or 12 weeks to care for a loved one when there is a serious medical need, a new birth, and/or the adoption or fostering of a child. Everyone who works in Pennsylvania would be able to care for their loved ones. The cost to workers is literally fractions of a penny – around 0.6 cents per dollar earned, or $0.58 per every $100 dollars.

Paid family and medical leave boosts productivity, reduces turnover, and increases consumer spending

Family caregivers already play a vital role in saving money for Pennsylvania’s businesses and healthcare systems, with over 1.3 million “informal” caregivers tending to others in the Commonwealth. If we put a monetary value on their services – ignoring the intangible benefits of having a supportive family member participate in care during illness, such as faster recovery time – it would add up to over $14 million worth of care per year.
Without a family member to provide care, these individuals may spend more time in a hospital, nursing facility, or hospice. While these facilities are designed to care for those who are sick, they cannot replace the presence and care of a family member during serious illnesses, and they certainly cannot provide care at such a low cost. Nursing home and hospital costs have continued to rise in recent years, while the cost of in-home care has remained steady.\textsuperscript{11} In-home care also remains the preferred method of care for many patients and their caretakers.

Meanwhile, without a state or federal paid leave plan, employers and workers have to find a way to finance leave on their own. Medical emergencies, by their very nature, don’t wait for a convenient time of year for a worker to be out. In 2016, only 14\% of workers in the United States had access to paid family leave through their employers, and only 38\% had disability leave (which would not allow them to care for other family members).\textsuperscript{12} Workers without paid leave end up struggling financially while caregiving, or they try to work and provide care at the same time, which greatly affects their productivity.\textsuperscript{13}

Meanwhile, since many small and mid-size companies can’t afford to offer a paid family and medical leave plan of their own, main street businesses are left at a competitive disadvantage. A lack of paid leave means they can’t afford to keep the workers they know and have trained. But when workers have access to paid leave, they are more likely to stay in their jobs. Women with access to paid leave, for instance, are 93\% more likely to be working 9-12 months postpartum than those who did not take leave.\textsuperscript{14} Paid family leave strengthens attachment to the workforce, which in turn supports families, employers, and the state economy.

The Family Care Act ensures that small businesses, who otherwise could not afford paid family and medical leave, can retain the employees they’ve trained. If an employee needs to take leave, their employer can hold on to the salary or wages they would have paid their worker and use it to pay overtime, give another worker some extra hours, hire a temporary replacement, or perhaps spend it on something else entirely. Their employee, meanwhile, will get a portion of their income from the state paid leave fund to help them through their illness of caring for someone they love.

**Experience with paid family and medical leave in other states shows strong outcomes**

Since 2002, eight states and Washington D.C. have passed similar paid family and medical leave laws. The three states with the most experience, California, Rhode Island, and New Jersey, all have positive experiences to share. Six years after implementing their law, most employers in California reported that the program had either a positive effect or no noticeable effect on productivity, profitability/performance, turnover, and employee morale.\textsuperscript{15} In Rhode Island, 76\% of employers had either positive or neutral feelings about the law one year after it passed.\textsuperscript{16} In both New Jersey and California, the law worked so well that the state government recently expanded the program, and Rhode Island is looking to do the same.

Meanwhile, state paid family leave programs also show improvements in public health, including increased breastfeeding, increased involvement of fathers in care, and reduced probabilities of ADHD,
hearing problems and recurring ear infections. In California, the state saw an 11% “relative decline” in elderly nursing home usage.\textsuperscript{17}

The Family Care Act is the right thing to do

In Pennsylvania, we know that families come first. We are proud to be pro-family, and to live in a world where family takes care of family. That’s why the Family Care Act is so important – by allowing workers to care for their family, and employers to retain their workers, we can strengthen families and our economy. We hope that you will support this legislation so that Pennsylvania can get to work at keeping our economy working.

About PathWays PA:
PathWays PA was founded in 1978 as the Women’s Association for Women’s Alternatives. It served as one of Pennsylvania’s first residential programs to keep low-income, vulnerable women together with their children and has grown to become one of the Greater Philadelphia Region’s foremost providers of residential and community-based services for women, children and families. Each year nearly 4,300 women, children and families benefit from our full complement of residential and community-based services; job training and employment assistance; as well as self-sufficiency services as they work to break the cycle of poverty, homelessness, and abuse. With offices throughout Southeastern Pennsylvania and advocacy initiatives on behalf of low-wage workers statewide, PathWays PA provides programs committed to the development of client self-sufficiency which leads to the fulfillment of our mission:

To help women, teens, children and families achieve economic independence and family well-being.

More information is available at www.pathwayspa.org.

\textsuperscript{1} http://caregiveraction.org/statistics/#Economics of Caregiving
\textsuperscript{2} http://www.phila.gov/mayor/pdfs/Paid%20Sick%20Leave%20Task%20Force%20Report.pdf
\textsuperscript{3} https://www.dol.gov/wb/media/Pennsylvania_Final_Report.pdf
\textsuperscript{4} http://paidsickdays.nationalpartnership.org/site/DocServer/Fact_Sheet__Paid_sick_days_are_good_for_childrens_health.pdf?docID=4182
\textsuperscript{5} http://paidsickdays.nationalpartnership.org/site/DocServer/PSD_FactSheet_OlderPeople_0809226.pdf?docID=4186
\textsuperscript{6} http://cepr.net/documents/fmla-eligibility-2014-01.pdf
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\textsuperscript{15} http://cepr.net/documents/publications/paid-family-leave-1-2011.pdf