

# PRIVATE DUTY NURSING

## <u>Keeping Families Together</u>

7,000+

Texas children with disabilities or medical fragility receive specialized nursing care at home, which allows them to stay with their families.

## **Keeping Parents Employed**



About **40%** of parents of children with disabilities quit their jobs to provide full-time care, while the remaining **60%** adjust

their work schedules to manage their child's needs.

## **Driving Better Outcomes**





Studies show a **20% reduction in hospital admissions** and a **15% reduction in readmissions** due to home health nursing. Absence of such care increases readmissions, mainly due to parental exhaustion and lack of

medical expertise at home.

## <u>Controlling Costs and</u> <u>Enhancing Quality</u>



Private Duty Nursing not only cuts costs by reducing hospital stays but is also significantly cheaper. For example, a week of PDN costs \$2,300 compared to \$25,000 for a severe respiratory hospital stay.



Quality home health nursing significantly reduces hospital readmissions by supporting families and providing caregiver respite.

## Private Duty Nursing: A Critical Need for Support

To meet the growing demand and address workforce shortages, Private Duty Nursing rates must align with market needs to retain skilled nurses. Many states, including Louisiana, have increased rates, with **Virginia raising them by 65%**. The expertise and dedication of pediatric private duty nurses necessitate competitive wages to maintain a strong workforce. The Texas Department of State Health Services and the Texas Center for Nursing Workforce Studies anticipate a nearly **40% rise in demand for Home Health RNs from 2022 to 2036**.



#### Adjusting PDN Rates for Market Needs

Given the 21% funding shortfall identified by HHSC and increasing market demands, it is crucial to raise PDN rates to meet HHSC's full funding recommendation to ensure high-quality care and adequate staffing.

### Protect and Ensure Access to Private Duty Nursing

PDN is a cost containment solution for medically complex children who would otherwise reside in a hospital or institution. Before the 88th legislative session,



HHSC reported that PDN reimbursement was **6.5% below Medicaid allowable costs** incurred by providers (HHSC Consolidated Budget Tables, 2021-22 data). The funding shortfall continues to grow with HHSC now reporting a 21% shortfall in the HHSC consolidated budget for the 89th legislature.

## Navigating the Growing Shortage of Experienced Nurses

Home care agencies serving medically complex children face persistent challenges in recruiting experienced nurses, despite a 2% rate increase in 2023.



A 2015 report by the Texas Center for Nursing Workforce Studies found **63.2% of agencies struggled to recruit RNs** with over one year of home health experience. Vacancy rates for RNs and LVNs are higher in home care compared to hospitals or public health settings.

The demand for home health RNs is **projected to grow by nearly 40% from 2022 to 2036** (Texas Center for Nursing Workforce Studies). Texas is expected to lead the nation in demand for longterm care nurses, including home health, through 2030 (National Center for Health Workforce Analysis).

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2022				56,370 RN FTE			
defic							
44,6	78 RN FTEs						
44,6						ply —Dem	

In its August 2024 Legislative Appropriations Request (LAR), HHSC identified payment disparities as a major barrier to retaining qualified staff, prioritizing Private Duty Nursing (PDN) services for a rate increase to address these inequities.

## Strengthening Support for Private Duty Nursing



Private duty nursing rates must increase to reflect the higher skill levels, wages, and benefits required to attract and retain specialized pediatric nurses, ensuring care remains available in the home.

## **Essential Legislative Intervention**

Raise private duty nursing rates to fully fund the rate methodology. For 2024-25, this would required a 6.5% increase. By 2025-26, HHSC estimates rates are underfunded by 21%, worsening workforce shortages, risking family burnout, and increasing costly hospital readmissions.