

August 12, 2024

Richard L. Revesz
Administrator
Office of Information and Regulatory Affairs
Office of Management and Budget
725 17th Street, NW
Washington, DC 20503

RE: Standard Occupational Classification (SOC)—Updates for 2028 *Docket ID BLS–2024–0001*

Dear Administrator Revesz:

Thank you for the opportunity to provide input into the agency’s review of the 2018 Standard Occupational Classification (SOC) Manual. The undersigned organizations write in support of a revision to the SOC Manual to create a new code for direct support professionals (DSPs).

DSPs deliver crucial supports which enable people with intellectual and developmental disabilities (I/DD) to live full and independent lives in their homes and communities. Habilitation services delivered by DSPs are primarily funded by Medicaid and cover a wide range of individualized activities designed to assist individuals in acquiring, retaining, and improving the self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings. From employment coaching and career development to assistance with relationship building and decision-making, DSPs specialize in supporting people with I/DD to build the necessary skills to live and participate in their communities. It is estimated that DSPs provide habilitation services to more than 1.4 million individuals with I/DD across the country who receive or are waiting to receive long-term services and supports through a state agency.¹

Accurate data collection on the direct support workforce is more important than ever. The U.S. Bureau of Labor Statistics (BLS) reports that the health care and social assistance sector is expected to grow the most rapidly of any job sector in the country, with projections indicating that it will constitute about 45 percent of all the projected job gains from 2022 to 2032.² Other projections indicate that the workforce that supports older adults and people with disabilities will add more than 1 million new jobs by 2031.³ Yet despite this rapid growth, there is currently no way to comprehensively collect data specific to the DSPs who are an integral part of that workforce. We ask that the 2018 SOC Manual be revised to include a distinct code for direct support professionals.

¹ President’s Committee for People with Intellectual Disabilities, Report to the President 2017: America’s Direct Support Workforce Crisis, available at https://acl.gov/sites/default/files/programs/2018-02/2017%20PCPID%20Full%20Report_0.PDF.

² U.S. Bureau of Labor Statistics, Employment Projections: 2022-2032 Summary, <https://www.bls.gov/news.release/ecopro.nr0.htm>.

³ PHI International, Workforce Data Center: Direct Care Worker Employment, 2012 to 2022, <https://www.phinational.org/policy-research/workforce-data-center/>.

Direct Support Professional Meets the Criteria of a Unique Occupation

The 2018 SOC Manual contains the major category, Healthcare Support Occupations (31-0000), which includes an occupational code for home health aides and personal care aides. But the duties, function, training, and scope of activities performed by DSPs are omitted from this category. The description of a DSP does not appear in the Home Health Aide (31-1121) code, Personal Care Aide (31-1122) code, or in any other Healthcare Support Occupation code. Nor would it be appropriate to include these kinds of habilitative supports as a job function under any other detailed occupation listing. As the U.S. Department of Labor and U.S. Department of Health and Human Services recently acknowledged in a joint report on the workforce that delivers home and community-based services,⁴ the role of a DSP is distinct from a home health aide or personal care aide. Accordingly, a separate and distinct DSP code must be created.

Unlike home health aides and personal care aides, which primarily address a person's physical needs, DSPs support people with I/DD in autonomous skill-development to live independently in their homes and communities. While this may include skill-development with essential daily tasks depending on the needs of the person being supported, it is not the exclusive activity of DSPs, and it is always approached under a different scope of supports focused on helping individuals achieve greater independence. This broad and unique scope approaches services from the lens of supporting people to make informed decisions about their own lives, developing and maintaining relationships, and experiencing community living and social participation.

In contrast to other healthcare support occupations, a DSP's work is interdisciplinary. DSPs perform tasks geared toward supporting self-determination and independence, such as developing and implementing effective strategies to teach people new skills, helping to communicate with and use assistive technology devices, supporting individuals to find and retain jobs and work toward their personal career goals, and helping people connect socially and participate in recreation activities, education, cultural events, spiritual activities, and civic functions. Accordingly, DSPs receive comprehensive training that centers on a social model rather than a medical model and focuses on supporting independence, teaching decision-making skills, and fostering community living and social participation.⁵

Such differentiations, not only in required duties but also in training, point to the distinction between DSPs and other occupations currently represented in the federal occupational classification system and the necessity for creating a new code.

⁴ U.S. Department of Labor & U.S. Department of Health & Human Services, Improving Data on the Workforce Delivering Home and Community-Based Services (2024), *available at* <https://acl.gov/sites/default/files/Direct%20Care%20Workforce/improving-hcbs-workforce-data-issue-brief.pdf>.

⁵ President's Committee for People with Intellectual Disabilities, Report to the President 2017: America's Direct Support Workforce Crisis, *available at* https://acl.gov/sites/default/files/programs/2018-02/2017%20PCPID%20Full%20Report_0.PDF.

A Distinct Code Is Necessary to Ensure Accurate Data Collection

Incorporating DSPs into other healthcare support occupations fails to adequately distinguish between habilitation and other tasks and leads to inconsistent and inaccurate data collection. According to BLS's national employment data, which tracks the occupations contained in the current SOC Manual, there were more than 3.6 million home health aides and personal care aides in 2023. Because DSPs are not recognized in the current SOC Manual, it is impossible to know whether DSPs were included in this data set, thus inflating the total number of home health aides and personal care aides, or whether they were excluded and not counted. The inclusion of DSP as a distinct occupation will support the SOC Manual's purpose of ensuring accurate, comparable data across federal agencies. Moreover, State government agencies will greatly benefit from this inclusion, allowing them to track DSP employment trends and develop better understandings of competitive wages necessary to secure a qualified workforce.

Accurate and comprehensive data on DSPs is crucial for understanding the workforce and developing effective solutions to address an ongoing workforce shortage. Designating DSPs as a distinct occupational code will provide the necessary granularity to capture their unique contributions, challenges, and workforce trends. Without comprehensive data, the totality of the workforce crisis cannot be properly assessed. A unique DSP occupational code will ensure BLS can accurately capture employment and wage data specific to the profession, which will in turn assist federal and state policymakers to inform and impact future policy.

Conclusion

We appreciate the opportunity to submit comments on the importance of revising the 2018 SOC Manual to recognize the unique and critical role that DSPs fulfill for millions of individuals with intellectual and developmental disabilities across the country. We ask that the 2028 SOC Manual include the creation of a new occupational code for DSPs.

Sincerely,

Access Ready Inc.
American Association for Health and Disability
American Network of Community Options and Resources (ANCOR)
The Arc of the United States
AUCD
Autism Society of America
Autism Speaks
Autistic Self Advocacy Network
Caring Across Generations
Disability Belongs
Disability Rights Education and Defense Fund (DREDF)
Human Services Research Institute
Lakeshore Foundation

National Association of Councils on Developmental Disabilities
National Disability Rights Network (NDRN)
National Down Syndrome Congress
The National MLTSS Health Plan Association
PHI
TASH