We are leading efforts to fund health and human services, so that all Illinoisans can reach their potential and have access to a sector that is equitable, sustainable, and speaks with a collective voice.

Our Core Pillars

**Racial Justice and Equity:**

Our advocacy must address systemic racism and inequity within state government, within the health and human services workforce and delivery systems, and in the communities that our coalition partners serve.

**Robust Public Investment:**

Everyone benefits when the health and human services sector is fortified by a foundation of robust public investment and support, and isn’t threatened by fiscal uncertainty.

**Public Access to Critical Health & Human Services:**

All Illinoisans should have access to the critical health and human services they need to maintain well-being and reach their full potential.

**2022 Policy and Advocacy Agenda**

**STRATEGIES FOR ACHIEVING OUR VISION:**

**Cross-Sector Collaboration**

We unify health and human services stakeholders by mobilizing a coalition of more than 850 organizations around the state and leading a collaboration among 20 health and human services associations. We bring the health and human services sector together at statewide and local meetings with public officials to ensure community-based providers have a seat at the table with key decision-makers. We demonstrate human services’ role in confronting systemic racism and factors impacting social determinants of health to wide audiences, including business leaders.

**Grassroots Advocacy**

We promote best practices, conduct outreach and research, and equip coalition partners with the tools they need to exercise collective power and amplify stakeholder voices to promote systemic change, address systemic racism in our sector, and find structural revenue solutions. We conduct educational events and research projects including virtual statewide and local workshops to activate our coalition partners as advocates for robust health and human services funding, administrative efficiency, and other policy priorities.

**Data-Driven Research**

We survey our partners regularly using an intersectional approach to data collection. We publish and distribute reports that give readers the information they need to tackle systemic inequities within the health and human service sector.
In 2022, our agenda is updated to reflect the findings in our 2021 Workforce Report, which affirmed that the sector is experiencing new and ongoing workforce challenges and reinforced previous findings about the negative impacts of low wages. More specifically, the 2021 report shows that the health and human service workforce is predominantly women, and that low-wage jobs in the sector, which are funded through the state mechanisms, are more likely to be held by people of color. Investment in the health and human services workforce mitigates gender and race-based inequality in Illinois, as well as supports other positive outcomes for employers.

**TOP PRIORITIES**

1. **The Human Service Professional Loan Repayment Program:**
   Illinois Partners for Human Service and Illinois Collaboration on Youth have jointly filed legislation to create the Human Service Professional Loan Repayment Program. This program will provide loan repayment assistance to eligible direct service professionals practicing in community-based, human service organizations that contract with or are grant-funded by a state agency. By focusing this program on professionals working for community-based health and human service providers in Illinois, this bill seeks to improve employee retention, support frontline workers and create continuity in service delivery.

2. **Amend the Grant Accountability and Transparency Act (GATA):**
   Health and human service providers face undue administrative burden under GATA. Regulations and requirements are increasing, and as a result the cost of doing business continues to grow, which compounds administrative obligations. This bill will amend GATA to ensure grants do not restrict administrative costs to less than 20%. This bill will also eliminate any caps on fringe benefits in state contracts, which include but are not limited to the costs of leave (vacation, family-related, sick or military) and employee insurance. This will provide flexibility for providers to offer better benefits to improve employee retention.

**RECOMMENDATIONS**

**FY23 Budget Recommendations:**

1. Increased reimbursement rates and contracts to fully fund the cost of services, and
2. Scheduled minimum wage increases, including associated benefits and wage compression. Additionally, the FY23 and future budget bills must clearly delineate, in a separate line item, any amount appropriated above the FY22 baseline for scheduled minimum wage increases for all health and human services agencies.
Short-Term Policy / Administrative Recommendations:

1. Support pending legislation that is important to our coalition and centers racial and economic justice;
2. Support federal legislation that improves paid leave and other workforce provisions that benefit the human services workforce;
3. Permit some capital expenses to be covered by state grants;
4. Ensure timely and predictable payments;
5. Expand and strengthen programs that support the human services workforce pipeline including professional development and training, investment in bilingual workers, cultural competency, mental health support for workers, and paid leave.

Long-Term Policy / Administrative Recommendations:

1. Ensure fair pay for comparable work (see Massachusetts example);
2. Require managed care companies to employ standardized and simplified practices statewide;
3. Reduce reliance on Fee-For-Service (FFS) models in favor of outcome-based/capacity grants;
4. Revise credentialing and licensure rules to create more flexibility in hiring practices;
5. Establish a cohesive, consistent, and equitable methodology to determine reimbursement rates and other contractual payments to keep pace with the costs of living and doing business.