



May 15, 2024

Dear Chairman Abney and House Finance Committee Members

Support Statement for H7591, AN ACT RELATING TO PUBLIC FINANCE – MEDICAL ASSISTANCE AND PUBLIC ASSISTANCE CASELOAD ESTIMATING CONFERENCES sponsored by Representatives Spears, Donovan, Tanzi, Casimiro, Kazarian, Alzate, Boylan, Chippendale, McEntee, Ajello

The Senior Agenda Coalition of RI applauds your ongoing efforts to achieve adequate reimbursement for our state's health and human services providers who rely on state funding to provide needed services. The landmark legislation you championed to mandate a rate review for health and human services providers led to a carefully conducted study done by a nationally recognized consultant company under contract with the Office of our Health Insurance Commissioner (OHIC). An Advisory Task Force was formed to provide input into the study and I was pleased to serve on said Task Force.

Knowing that most older persons with supportive care needs prefer to receive care at home and that Medicare does not generally cover such services, the Senior Agenda Coalition has promoted policies and funding that provide that choice for persons particularly those receiving state subsidized long term supports and service (LTSS). We advocated for the state to set a goal of spending 50% of state LTSS funding for older adults on home and community-based services. We pushed to increase eligibility for the Office of Healthy Aging @Home Cost Share program to 250% of the Federal Poverty Level and for persons under age 65 with Alzheimer's and related dementias to participate. And we have been fighting for our valued home care workers, mostly women and many women of color, to receive livable wages.

Using an Independent Methodology, the Rate Review Study found a 58% difference between the current home care provider rates for CNA and personal care attendant services and the recommended rate for that care.

The state's healthcare worker shortage includes home care workers and far too many persons needing care wait too long to secure homecare services. The state [Homecare Provider](#) portal website shows that in January of this year 75% of referrals for home care were waiting at least two months to receive care. Certain areas of the state such as Newport County are particularly challenged. At the on March 27th Senior Agenda

Legislative Leaders Forum a Case Manager from Child and Family Services in Newport told of how some older adults in their 80's are waiting months and even years to obtain homecare services. As they wait, their health may deteriorate and some may be forced to access institutional care at far greater cost to the state.

The Executive Office of Health and Human Services had recommended a two-year phase in of OHIC's rate increases based on the Rate Review Study. In his FY2025 budget proposal Governor McKee included a phase in of one-third of the needed funding to implement OHIC's recommendations. The Senior Agenda Coalition is concerned that phasing in the recommendations over a 3-year period will not be sufficient to increase wages for direct care home care workers and to offset increased provider administrative costs. It will do little to address recruitment and retention issues in the homecare industry in our highly competitive economy where workers can obtain jobs in other sectors that offer better wages often at less demanding work.

Although increasing reimbursement rates is not the sole answer to the worker crisis it is a significant corrective step. Including forecasted costs that reflect recommended rates from the biennial rate review in the caseload estimating conference and requiring the governor to appropriate such rates in the governor's annual budget proposal will result in provider rates sufficient to attract and retain staff. As Medicare does not cover the type of non-skilled home care needed by many older adults, increasing access to state subsidized home care services is critically important for providing older adults with the choice to remain living at home. It is also an important investment for the state as home care generally cost less to the Medicaid program than paying for care in a nursing facility. I urge you to recommend passage.

Respectfully submitted,
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Senior Agenda Coalition of RI