



RE: H7225, Article 9, Section 5

To: HouseFinance@rilegislature.gov

From: Jennifer Fairbank, CEO Visiting Nurse Home & Hospice

JFairbank@visitingnursehh.org

401-682-2100

Date: February 28, 2024

Honorable Mr. Chairman and members of the Committee:

I am Jennifer Fairbank, Chief Executive Officer of Visiting Nurse Home & Hospice. We are a large, licensed, 501(c)(3) not-for-profit, Medicare and Medicaid certified home health and hospice, and social service agency. In operation since 1950, we deliver home care nursing, rehabilitation therapies, palliative and hospice care, community clinics, and maternal child health services to patients and families at home and in community settings. VNH&H employs 200+ healthcare professionals including nurses, physical, occupational and speech-language therapists, medical social workers, registered dietitians, pharmacists, and certified nursing assistants. We are currently the largest free-standing not-for-profit home healthcare organization in Rhode Island and not a division of any larger health care system

I know too well the impact of inadequate reimbursement not only on VNH&H but on all Agencies providing health and human services. We must remedy the system that sets the archaic and inadequate rates that serve as our member agencies' life blood... these bills will set the State of Rhode Island on the correct path and begin to get equity and financial parity for our patients and staff.

I am acutely aware of the necessity of this legislation and the positive impact it will have on our agencies and the vulnerable Rhode Islanders we serve. I would like to take a moment to highlight our Maternal Child Health (MCH) program, a part of our agency since our founding. This is a program that is vital to the community and is in severe jeopardy due to the lack of appropriate reimbursement.

Through our MCH program, pediatric nurses provide home healthcare services designed to ensure that all members of our youngest population can grow and develop to their full potential, regardless of the family's circumstances and financial status. Members of the maternal child health team provide critical support to newborns, young children, and families through home visiting services that are initiated within 24 hours of hospital discharge or

438 East Main Road, #100 Middletown, RI 02842 7260 Post Road, North Kingstown, RI 02852

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requested by area pediatricians. In addition, we provide home healthcare to infants and children who are ill, recovering from surgery, or have special healthcare needs. Staff routinely work with families to create safe sleep and safe home environments for children, provide lactation counseling, administer postpartum depression screening, and have been trained on the impact of opioid abuse on families with young children.

In 2023, VNH&H made 252 visits to 135 Rhode Island children and their families through our Maternal Child Health program. 42% of this group were Medicaid recipients.

Even with the additional support we receive from the RI Department of Health's First Connections project, current reimbursement for these services generates consistent financial losses and are forcing us to reevaluate continuation of this program.

Yes, we solicit grants and foundations to support the work, but those dollars are few as all non-profit health and human service providers are vying for the same funding. On average each Medicaid recipient MCH visit generated a \$120.00 loss. The impact to this Agency, after adding in grants and donations, was a \$67,000 loss in 2023. Further losses are not sustainable to our or any other Agency.

The four agencies providing this vital interventional care make up the only safety net for this vulnerable population. In the absence of these services, existing state agencies will have to absorb additional clients into their already challenging caseloads. **It comes down to a simple truth, our agency is already reeling from low reimbursement rates for our home care services and cannot sustain more losses. If the rates are dialed back as proposed by the Governor's budget, we will have to close the program.**

The negative impacts of dialing back these already inadequate reimbursement rates, which we have to beg for every three years, are profound and long lasting. These bills are a first step.

Respectfully submitted



Jennifer W. Fairbank CEO