



**TESTIMONY
TO THE PUBLIC HEALTH COMMITTEE
FEBRUARY 22, 2011**

Senator Stillman, Representative Ritter, and members of the Public Health Committee,

I am Andrea Barton Reeves, Vice President of Administration at HARC, Inc., an organization that serves people with intellectual and related disabilities. Founded in 1951, HARC is a grassroots family organization that provides life span services including: birth-to-three/early intervention, family support, respite, supported employment, adult day program, recreation, residential, behavioral health, elderly and advocacy services. We are the safety net for many families who rely on us to provide exceptional care for their loved ones in every stage of their lives.

I write to urge you to support proposed Senate Bill 533, An Act Establishing a Uniform State Licensing Process for Private Community-Based Providers. Passage of this bill will greatly ease the burden on private community-based providers to meet the licensure and accreditation requirements for every agency with which a provider has a contract, and save the state money by eliminating costly, redundant licensing and contract compliance requirements. I urge you to support this bill for two reasons:

- 1) **The costs associated with administering multiple contracts with several state agencies is unduly burdensome to private providers.**

Private providers continue to struggle with the costs of complying with different agency contract requirements. Under the current licensing structure, many private community-based providers must provide proof of contract compliance and appropriate client care to every agency with whom it has a contract. Many provides have several contracts with several state agencies, reflecting the expanse of services provided. Each state agency has a different timeline in which

client statistics and other agency information must be reported, and each has a different format in which the information must be submitted. Meeting these myriad reporting requirements places extra burden on staff, whose primary mission should be providing care and services to clients.

In addition, when requested, some private providers must be available to meet with staff from every agency with whom it has a contract, and it must very often accommodate unannounced visits by various state agency staff. These visits may occur within the same week, or in some cases, at multiple agency sites on the same day. It is simply not cost effective for the state to deploy multiple staff from different agencies to measure the standard of care delivered by a single private provider. Instead, we advocate for a coordinated, streamlined licensing and compliance structure that assures appropriate client care while eliminating unnecessary and duplicative administrative burdens and expenses, for both the state and the private agency.

2) Many private providers already meet rigorous standards set by respected accreditation agencies, which should be recognized and adopted by the state as sufficient to approve licensure.

The proposed bill's language very aptly describes the problem facing private providers when they are licensed by multiple agencies: the application process is duplicative and inefficient. This is particularly true where it forces redundancies in meeting licensing standards when an agency has already meet strict national accreditation standards. Permitting "deemed status", that is, allowing an agency to be licensed by the state if it is certified or accredited by a nationally recognized agency, relieves private providers of the burden of repeating the licensing and accreditation process with every agency with whom it has a state contract. It also assures the state that its licensing requirements have been met.

Many private providers are accredited by nationally recognized organizations whose standards, in many cases, either meet or exceed the State's requirements for client care, record keeping and other aspects of contract compliance. Just last year, HARC received its three-year accreditation from CARF, the Council on Accreditation of Rehabilitation Services. During the

accreditation process, every aspect of an agency's operations are closely inspected and evaluated. Everyone from direct care staff to members of the Board of Directors are interviewed and asked candidly about the agency's operations, philosophy and standards of care. The CARF inspectors are practitioners themselves and have extensive experience in providing the same services offered by the agency that is the subject of their inspection. CARF accreditation is the "gold standard" for an agency such as ours, and we are proud to have achieved this status.

By adopting "deemed status", the state can be assured that an agency has undergone a rigorous inspection process, and it can reserve the right to conduct its own inspections to assure continued compliance with state regulations. Deemed status may also allow the state to realize significant cost savings by eliminating redundant licensing processes and relieve agencies of having to meet varying standards from different agencies.

In sum, we welcome and appreciate the opportunity to work with state agencies to provide the highest quality care in the most cost-efficient way. Making the application and licensing process less costly and burdensome would benefit the state, private providers, and most important, the families we serve. Therefore, I urge you to support the passage of Proposed Bill 533.

Thank you for your consideration.