

TESTIMONY

Submitted by Tracy Wodatch, President and CEO
The Connecticut Association for Healthcare at Home

Labor and Public Employees Committee
Public Hearing

March 11, 2021

OPPOSE: SB 1002, An Act Concerning Labor Issues Related to COVID-19, Personal Protective Equipment and Other Staffing Matters and HB 6595, An Act Concerning Labor Matters Related to COVID-19, Personal Protective Equipment and Other Staffing Issues

Senator Kushner, Representative Porter and members of the Labor and Public Employees Committee. My name is Tracy Wodatch, President and CEO of the Connecticut Association for Healthcare at Home. We oppose these bills as written.

The Association is the united voice for the DPH-licensed and Medicare-certified home health and hospice agencies as well as several non-medical DCP registered homemaker-companion agencies. Together, our members provide services that foster cost-effective, person-centered home care for Connecticut's Medicaid population in the setting they prefer most – their own homes.

Since the beginning of the COVID-19 pandemic, the home and community-based service providers have served as vital, yet often silent, partners in the state's response to COVID-19. Unlike facility settings, such as hospitals and long-term care facilities, we visit people's homes where there is little to no control over social distancing, PPE use, limited visitors, etc. Our providers put themselves on the line everyday not knowing what to expect when they ring the doorbells or knock on the doors of these homes. Regardless, one area remained constant...our diligence to infection control practices including proper use of PPE, telehealth when possible and source control overall.

During the first 3 months of the pandemic, our providers were on their own for accessing PPE—they were not part of the DPH statewide distribution. This was at a time when PPE was extremely limited and prices were skyrocketing. Gowns and N95s were precious cargo. The Association had to advocate daily to DPH and the Governor's office to be included in the statewide distribution. In the meantime, we had to get



creative...when gowns weren't available, we used garbage bags and disposable rain ponchos but first checked with DPH to be sure this was an acceptable substitute. We also hired seamstresses to make washable tyvel gowns. Anything to offer the proper protection and still allow us to see our patients/clients in their homes. Our goal was and remains to keep them in their homes, out of the institutional settings. It's safer as they are more protected from the virus in their homes. We should be applauding our providers of care for their dedicated responses to and expert care of these vulnerable residents of Connecticut.

The pandemic has also had a significant financial impact on our home and community-based providers, many of whom have been facing significant financial challenges prior to the pandemic, and now as the financial woes have only exacerbated during the pandemic. In fact, since the start of the pandemic, we have experienced the consolidation of 11 free standing home health and hospice agencies into 4. This past year, our providers have experienced significant decreases in revenue while simultaneously seeing aberrantly high costs to provide the protections and care needed. PPE pricing alone has jumped 3-4x usual pricing. This is no time to impose new costs on our healthcare providers. We are also facing workforce capacity challenges causing our providers to turn down referred cases—This is detrimental to fulfilling the goals of keeping people in their homes, the setting of choice for care and the most cost-effective.

In addition, both the licensed home health and hospice agencies as well as the homemaker-companion agencies are required and have worker's compensation coverage for their employees. Many have enhanced their wellness and support programs including daily huddles, bereavement work groups to name a few. Where financially possible, some have offered additional bonus pay.

For all these reasons, these two bills would impose additional costs on our providers and will further weaken their financial sustainability. Therefore, to the extent that the Committee and the Connecticut General Assembly would ask that the state look at the new expected federal COVID-19 dollars to fund them.

Thank you for the opportunity to provide testimony. Feel free to contact me with any questions.

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