Good afternoon, Senator Osten, Representative Walker, and Ranking Members Senator Berthel, and Representative Nuccio. Thank you for your time and your commitment to supporting the residents of our State.

AgingCT, the Association of Connecticut’s five Area Agencies on Aging, supports **H.R. No. 9 and S.R. 7, a RESOLUTION PROPOSING APPROVAL OF A MEMORANDUM OF AGREEMENT BETWEEN THE PCA WORKFORCE COUNCIL AND THE NEW ENGLAND HEALTH CARE EMPLOYEES UNION, DISTRICT 1199, SEIU.**

Every day in Connecticut, nearly 18,000 older adults and persons with disabilities receive care in the community that allows them to avoid nursing home placement. These individuals are all Medicaid eligible and represent some of the oldest, poorest, and frailest individuals in our State. They are enrolled in the Connecticut Home Care Programs, Medicaid waivers that give individuals a choice of where to receive essential care. Most individuals strongly prefer to receive care in their home and community. This is a benefit to taxpayers as it relieves the state of paying for the more expensive, institutional option.

The essential care may include nursing, personal care aides, meals, medication management, and adult day services. Service may be provided by Home Health (medical & skilled care), home care agencies (supervision and limited personal care) or self-directed/self-hired care (1199 SEIU or familial caregivers).  **In the case of the Elder Care waiver, only 9% of clients receive care from self-hired options.** **The State’s efforts to provide a viable alternative to nursing facility care do not work without a viable agency-based network.**

There are barriers to self-directed care for the remaining 91% who receive agency-based care. Physical and cognitive difficulties prevent many clients from self-directing care. Families already struggling with care oversight cannot direct or provide care on behalf of their loved ones due to distance, work, and other family obligations. Electronic verification systems are impossible to navigate with limited vision and unsteady hands. Supervision, training, and unscheduled visits confirming the quality of care are needed to protect our most vulnerable clients, some of whom are nonverbal and unable to advocate on their own.

We greatly appreciate the Administration’s commitment to fair and equitable union employee compensation. An unfortunate consequence is that it disturbs the balance in the health care ecosystem. To make an alternative to nursing home placement accessible to all, we must have an equitable system that rewards both self-employed and agency-based home care personnel. Aging and disabilities are personal. The proper intervention to help someone remain at home, receiving services with high quality is based on several factors. Both options are part of an essential care continuum. By rewarding one and leaving the other underfunded we are essentially eliminating an important option to care. Agency-based Providers are leaving the workspace and limiting options for adults who need the backing of the agency in case of absence, supervision, oversight and the inability to self-manage their care.

Medicaid providers have faced many years without a sustainable methodology to determine fair compensation for the work done by the employees of agency-based care. Studies have been completed without change. We understand that agency providers will be part of the Phase Two analysis and hopefully, a reimbursement realignment. Today’s testimony serves to make the legislators aware of the precarious imbalance between agency-based and self-hired staff and its potential for damage to the 16,000 clients receiving care at a reduced cost to the state. If clients enter a nursing home due to the lack of agency-based providers, the State will see cost increase and an unraveling of the rebalancing work that has been the centerpiece of Medicaid cost containment for the last fifteen years.

Submitted by:

Marie Allen, President, Southwestern CT Agency on Aging

On behalf of AgingCT

*Connecticut’s five Area Agencies on Aging collaborate under the name, AgingCT. We are independent, nonprofit organizations, with federal designation, dedicated to helping older adults and persons with disabilities thrive in the community with dignity and support throughout their lives. We advocate and educate legislators, policy makers and Connecticut residents on the issues of importance to older constituents and those who support them. Visit* [*www.agingct.org*](http://www.agingct.org/) *to learn more.*

Table demonstrating the number of older adults and persons with disabilities choosing to use Medicaid & State funds in the community at a lower cost to the State than institutional care.

|  |  |  |
| --- | --- | --- |
|  | Total | Percentage of Self-Directed |
| Elders Total | 16, 213 |  |
| Elders Self Directed | 1,509 | 9% |
| PCA Total | 1,004 |  |
| PCA Self-Directed | 773 | 77% |
| ABI Total | 483 |  |
| ABI Self Directed | 132 | 27% |