



## **TESTIMONY**

In Support Of

### **LD 1528: Resolve, Directing the Department of Health and Human Services To Adjust Reimbursement Rates for Certain Home-based Services**

**Brenda Gallant  
Maine Long-Term Care Ombudsman Program**

Before the Joint Standing Committee on Health and Human Services

**April 27, 2021**

Senator Claxton, Representative Meyer and committee members, my name is Brenda Gallant. I am the Long-Term Care Ombudsman. The Maine Long-Term Care Ombudsman Program is a statewide non-profit organization that provides advocacy for older adults and adults with disabilities who receive long-term services and supports in all settings. We serve residents in nursing homes, assisted housing including residential care and assisted living facilities, adult day programs and recipients of home care services. Additionally, we serve patients in hospitals who experience barriers in accessing long-term services and supports.

We support this legislation that directs the Department of Health and Human Services to increase reimbursement rates for nursing services for certain home-based services by January 15, 2022 and to index the reimbursement rates for certain home-based services provided under rule Chapter 101: MaineCare Benefits Manual, Chapters II and III, Section 40 to the low-utilization payment adjustment rate by January 15, 2022.

Through our work with home care consumers, we know how important nursing services are to enabling consumers to remain at home. Here are some examples of home care consumers in need of nursing services that we are working with.

- The guardian of a 22-year-old consumer with complex medical needs reached out to the Ombudsman Program for assistance with the inability to locate nursing services. The consumer's plan of care authorized nursing 24 hours per day, 7 days per week through MaineCare Benefits Manual, Section 96, Private Duty Nursing. The consumer had not received the full amount of nursing services for a few years, and recently even a minimal amount of nursing services was unavailable. The Ombudsman Program worked with the service coordination agency (SCA) and MaineCare provider relations to contact every MaineCare contracted nurse located in the consumer's geographic area, but no nurse could be located to provide the needed nursing care. The Ombudsman Program also

worked with agencies contracted to provide nursing services and the Department of Health and Human Services (DHHS) on advertising for staffing. Due to lack of staffing, the guardian ended up losing her job, which put the family in a financial crisis. DHHS allowed the guardian to be paid to provide some hours of care and the family was able to pay the mortgage and keep their home. The guardian is still providing a majority of the care, at times covering multiple days and overnight shifts and is struggling to continue. The Ombudsman Program continues to work with the SCA to locate nursing services but the consumer remains at high risk for hospitalization, as the current situation is not sustainable.

- The parents of a 21-year-old consumer with complex medical needs reached out to the Ombudsman program about lack of nursing services. The consumer has a plan of care authorizing 112 nursing hours a week funded by Section 96, Private Duty Nursing. Less than 40 of the nursing hours were staffed. We worked with MaineCare provider relations and contacted every agency and independent nurse in the consumer's geographic area without success. The parents were struggling with missing work as well as exhaustion from the care. They were told by agencies that if they were able to private pay, they might have more success in finding nursing services. They started a GoFundMe page to raise money to be able to private pay and this did help temporarily, but it was not a sustainable way to keep staff in the home. The family has been struggling with remaining employed, taking care of their other children, and providing complex nursing care to the consumer. As the consumer's condition progresses and requires more care, the family struggles to keep their child at home.
- A 74-year-old consumer reached out to the Ombudsman Program for assistance finding nursing services to manage her insulin pump at home. The consumer was receiving nursing services through Medicare home health once a week, as well as personal support services through Section 96, Private Duty Nursing. Eventually the consumer no longer met the criteria for Medicare home health services and was left without a nurse to manage her insulin pump. The consumer was authorized for a nurse once a week in her plan of care, but no staffing was available. The consumer had to travel to her physician's office weekly or to the emergency department to receive the care required weekly.

There is no doubt that an increase in reimbursement rates for nursing services is important to being able to provide critically needed nursing services in home care.

Thank you for your consideration.