

## TESTIMONY

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

Government Oversight Committee Public Hearing  
**March 11, 2025**

### Senate Bill 1468: AN ACT CONCERNING GOVERNMENT ACCOUNTABILITY

To the distinguished members of the Government Oversight Committee, my name is Tracy Wodatch, President and CEO of the Connecticut Association for Healthcare at Home. I am also an RN with over 40 years' experience.

The CT Association for Healthcare at Home is the united voice for our licensed Home Health and Hospice agencies as well as several Homemaker-Companion Agencies (HCAs). Together, our members provide services that foster cost-effective home care for Connecticut's residents in the setting they prefer most – their own homes.

The Association fully supports moving the Homemaker-Companion Agencies to the next level for both quality of care and training of employees, which was the primary intent of [Public Act 23-48](#), in 2023 looking to Transition the HCAs from the Department of Consumer Protection (DCP) over to the Department of Public Health (DPH).

Fast forward to this raised bill (SB 1468) as well as companion bill SB 1344 in the Aging Committee. The Homemaker-Companion Agencies are registered with DCP under regulations from 2006 that don't align with current state-funded initiatives and needs for care in the home. We appreciate the addition of a definition for personal hygiene as outlined in SB 1468 as well establishing some training standards. However, several of the proposed training topics in this bill are medically driven (CPR, First Aid, identifying a change in condition of a client).

Remember that Homemaker-Companion Agencies are required to "provide solely non-medical care" whereas, many of these proposed training requirements are clearly "medical" in nature. Given that CPR and First Aid are not even mandated for licensed Home Health Care Agencies, it does not seem appropriate or necessary to mandate them for Homemaker-Companion Agencies.

On the other hand also within this bill, we do support training topics for personal care, communication, infection control and nonmedical care of the client with Alzheimer's/Dementia is appropriate for this level of care.

Furthermore, the importance of portability of training can't be understated as many direct care workers may be employed by multiple homemaker-companion agencies to optimize income.



In addition, the administrative costs to provide the requirements processes are unfunded mandates in a system that is already severely underfunded and stressed. As a reminder, the 26% self-directed SEIU PCA wage increase for these next two years doesn't come with the level of training in this bill. While we support such training and quality, it must be reasonable, affordable and aligned with all non-medical care providers including the self-directed PCAs. Let's start by investing more dollars in the agency-based Medicaid Homemaker-Companion Agencies so they can recruit, train and retain quality staff, who are prepared and adequate in number to serve the needs of those in the community.

Our Association supports training criteria aligned with the current level of non-medical, personal care services but strongly urge the removal of any training that is medically oriented, while still ensuring portability of any training that does pass.

Thank you and happy to answer any questions.

Tracy Wodatch

203-774-4940

[wodatch@cthealthcareathome.org](mailto:wodatch@cthealthcareathome.org)