Dear members of the Committee,

My name is Crystal Cameron and I am the covering clinical manager and field staff for the BAYADA Home Health Care Boston Skilled Nursing office in Foxboro. BAYADA is a non-profit, national home care agency. In Massachusetts, we are proud to employ 2,946 individuals who provide vital in-home nursing, rehabilitative, therapeutic, hospice, and assistive care services to 3,860 children, adults, and seniors across the state. Thank you for taking the time to consider this testimony and giving us the opportunity to advocate for our most vulnerable citizens and the highly qualified nurses that care for them.

H.737/S.774 amends existing Mass. General Laws that govern the rate setting processes for home health and home care services. This applies to the MassHealth Home Health and CSN programs and the Elder Affairs Home Care Program. As currently required, provider rates for these services are determined on a biennial basis. However, the methodology used by the rate determination team is vaguely prescribed in statute and does not require EOHHS to report on or disclose the analysis used to determine rates. The Massachusetts Home Care Alliance has filed this legislation jointly with the Home Care Aide Council and Mass Home Care.

Section 1 of this legislation would establish a paragraph in statute relating to rates for home health agencies as defined under 51K of Chapter 111. It requires the rate reviewers to use base costs not more than 4 years old. The legislation also requires established rates to allow for a reasonable administrative expense and profit factor. In analyzing rates, reviewers are required to look at the costs of providing similar services in other care settings as well as use national or regional indices to reflect changing norms. Lastly, EOHHS would be required to provide a report to the legislature detailing how the rates under this section were analyzed and determined.

The best way I can break this down is, put yourself into perspective. We all want to love what we do so we do not work, but sometimes we must live to work. Certain life situations put stressors on people to make choices differently than they might prefer, it is called sacrifice. We should not live in a society that forces someone to not do what they love and are passionate about but to do what financially makes sense. So please support us so we can support everyone. At the end of the day, home care and other aspects of “essential workers” that we learned through the pandemic deserve just as much support and credit as the typical “essential workers”. If there is nothing this last year has taught us is to appreciate the little things as well as recognize what truly is important and should be considered “essential”. Home care affects everyone and cares for everyone, even if some may turn a blind eye. Home care cares for patients, their families, and their community.

We appreciate that the Committee has taken this testimony into consideration and for taking on these important issues. Please do not hesitate to contact me if you need additional information. We at BAYADA look forward to continuing to be a valuable partner to the Committee and to the Assembly on matters that affect home care employees and beneficiaries. Thank you for your continuous support of Medicaid home care and hospice.

Sincerely,

Crystal Cameron RN

cc: Senator Cindy F. Friedman, Chair; Representative John J. Lawn, Jr., Chair; Senator Harriette L. Chandler, Vice Chair; Representative Jay D. Livingstone, Vice Chair; Massachusetts Home Care Alliance