Dear members of the Committee,

My name is Leaveine Damas-Younge and I live in Taunton, Massachusetts. 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.

My sole purpose of this testimony is to express my frustrations over the past ten years with the lack of nursing in home healthcare. My son Darnell “DJ” Younge Jr. is a ten-year-old boy who was diagnosed at birth with Congenital Fiber Type Disproportion Myopathy which required a placement of a tracheostomy tube and need for a mechanical ventilation. In addition, a gastrotomy tube. Aside, DJ has a history of epilepsy, scoliosis, reflux, food allergies, severe eczema, hydronephrosis and retinal opacification. He ambulates with a motorized wheelchair.

Our current family dynamic my husband and I both work full-time jobs. Just last year my husband had to leave his job because of the lack of nursing care for our son and is currently still unemployed. Aside, we have four-year-old twins who are on the Autism Spectrum.

The past ten years my family & I have dealt with immense stress and frustration due to the lack of nursing care for our son. The past year and half during the COVID-19 pandemic has been by far the worst we’ve ever experienced. We currently are working with three nursing agencies, Bayada Home Health Care being one and Community Case Management to assist us with recruiting nurses to fill our available hours. As of today, we currently have 695 unused nursing hours. Each year we have roughly the same, if not more unused nursing hours that we lose at the time of our annual assessment with Community Case Management. Let me just clarify that this is no fault to us that we are unable to fill these nursing hours. However, each year those unused hours are wiped away and a new authorization begins.

Most recently, we have struggled greatly with finding nurses. The feedback that we’ve received from nurses who have left our case and the home health care agencies is that there is a shortage of nurses. Specifically, due to the compensation that these nurses receive. If I am speaking candidly, it is absolutely no secret that a nurse can be paid more working in a hospital setting versus working at a home health
care agency. A simple salary analysis will show the compensation difference. In addition, the lack of benefits i.e., 401K, health insurance, paid vacation, sick/personal time, etc.

The risk of not having nursing care for our son is detrimental. First, our son needs to be able to attend school. The nurse needs to be here in the morning to ride on the school van with him to and from school. Aside, to ensure that he is medically safe while attending school. Also, with the lack of nursing care my husband and I become the sole caregivers for our son. Can you imagine working 24 hours around the clock? This will lead to sleep deprivation which will then lead to inadequate care for our son and that is a huge safety concern.

I am absolutely appalled by the Commonwealth of Massachusetts and their lack of compassion for families and individuals who need nursing care that today I am here testifying about higher-paying settings which are needed for nurses to be fairly compensated in home health care. Please understand the difficulty in finding nurses is becoming more and more challenging for our family and other families. At this point, we are hopeless because finding nurses to care for our son does not seem like a possibility.

I am hoping that the Commonwealth of Massachusetts will take the appropriate steps to resolving this issue and rather quickly because each day that we go without nursing each day our son suffers greatly with not receiving the appropriate medical care.

Thank you for your continuous support of Medicaid home care and hospice.

Sincerely,

Leaveine Damas-Younge

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