

Submitter: APRIL GUNTER
On Behalf Of: OHA Supported Mental Health AFHs
Committee: House Committee On Early Childhood and Human Services
Measure: HB2495

This testimony is in regard to the above HB 2495. The past 8 years have been a whirlwind. Rates changed, standards of care changing, OARs changing, processes changing and all resulting in AFH's having to act and do business as nursing homes when that was not the initial need covered. We are a resource that is being squeezed out of the system. We are not included in the MOTS program, we are not included in stakeholders meetings, we get no training on new systems of procedures and OARs and yet we are expected to behave as large facilities. The system is broken from beginning to end. Rates are just a product of. I myself get paid \$1000.00 LESS than I did for a particular client than I did when I accepted him into my home in 2009. His care needs have increased and yet my pay decreased. This idea that these funds contribute to services only is a joke. It encompasses the entire business functions, such as wages, taxes, food, utilities, rents, fees incurred, supplies, gas, good working vehicles that we use to transport, not to mention the things that we buy for the clients such as cigarettes, special foods, depends, chucks, gloves, that the insurance won't cover. These funds have significantly been reduced because of the tool OHA has chosen to use that does not reflect the needs of our clients as well as Comagine's method of completing them. AFHs should NOT be included in the 1915i program. We are not transitional, my clients and others have been in our homes for 10+ years. Our clients Chronic. Not Acute. The system is trying to fit AHFs inside this box that we don't fit in. Again, this bill is in regards to rate increases. AFHs have been excluded from all previous rate increases the state has given to other types of housing. We did not get the 30% increase in which we should have been included. To exclude us is closing us down. There have been homes close in the last year that were due to the decreases in pay. You can research all of this. We are a resource that the state should utilize; however we are not. I just watched the news the other day and it was stating that AFHs were full; we are not. We have open rooms. You just won't pay us. With the increase in inflation costs and the covid pandemic and this crooked contract Comagine has with OHA will push these homes to close. Unfortunately I made these statements in a previous legislation meeting and was laughed at. Now everything I said is coming to fruition. We are being unfairly treated, our clients are being unfairly treated and I think the news outlets need to know how the state projects that they care about this demographic; however, they are making policies that will close our doors.

I appreciate your time.

April Gunter
Provider
Care A Lot AFH