

Home Care...Where the home is a healthful, independent choice for quality care ©

The Oregon Association for Home Care (OAHC) is an organization representing providers of skilled home health, hospice, and in-home care throughout the state of Oregon. Home health care promotes better patient outcomes, is the patient preferred setting for medical care, provides access to the latest therapies and medical technology and brings proven cost savings.

OAHC has 25 provider members with 33 branch locations across Oregon. 95% of OAHC members are Medicare Home Health certified. 56% of OAHC agencies have a gross annual revenue of under \$3M, and 44% of the agencies serve Central and Eastern Oregon.

OAHC is grateful for the opportunity to share information with the Task Force on Hospital Discharge Challenges. We know that home health is a critical tool to ease hospital capacity challenges and discharge challenges, and we know firsthand that patients want to be served in the comfort of their home whenever possible.

Unfortunately, home health agencies are facing their own set of challenges— including recruiting and retaining workforce and low reimbursement rates. This has led to an environment where agencies are struggling to stay afloat, and some are making the difficult decision to close their doors. However, there are actions that the Legislature can take to address these challenges and support this industry.

To prepare to provide input to the Task Force, OAHC recently surveyed its membership, which identified the below solutions:

- Increased reimbursement rates and/or policies to offset low reimbursement rates. The majority of
 patients being served by home health agencies utilize some form of public insurance. These carriers do
 not provide adequate reimbursement. While Medicare reimbursement rates are largely outside of the
 control of Oregon, there are steps that can be taken at the state level to offset the burden that low
 reimbursement creates for the industry. For example, exempting public payer receipts—like Medicare
 and Medicaid—from the taxable income under the Corporate Activity Tax would provide meaningful
 relief
- Reduce administrative burden. For example, the face-to-face requirement for certifying a patient creates a burden. Our home health members report that the largest barrier to admitting a patient from a Skilled Nursing Facility is improper Face to Face referral documentation. At the state level, it may be helpful to reduce administrative burden in the provider licensing process. OAHC has previously supported efforts to add Oregon to the Nurse Licensure Compact.
- **Funding to increase accessibility to CNA training.** One OAHC member notes that the training program in their area averages ~\$500, which is a barrier for potential CNAs who would be paid ~\$18/hour.
- Increased capacity for behavioral health programs, and increased capacity at the State Hospital.

OAHC thanks the Task Force for your time and your consideration of our members' input. Home Health agencies play a critical role in addressing hospital discharge challenges, and they are providing care in the setting most preferred by the patient. We are hopeful that the recommendations put forward by the Task Force will include policy solutions that properly value the home health industry, and we stand ready to assist the Task Force and provide any additional information requested.