

**Testimony of Rhonda Boisvert**  
**President, Connecticut Association of Residential Care Homes**  
Re: H.B. 5055- H.B. No. 5005 AN ACT ADJUSTING THE STATE BUDGET FOR THE  
BIENNIUM ENDING JUNE 30, 2021  
*Concerning*  
**Department of Social Services Budget- Residential Care Home Funding**  
Appropriations Subcommittee on Human Services Public Hearing, February 19, 2020

Senator Osten, Representative Walker and Members of the Appropriations Subcommittee on Human Services: Thank you for the opportunity to offer testimony, specifically on the Department of Social Services Budget related to Residential Care Home Funding.

My name is Rhonda Boisvert and I am the President of the Connecticut Association of Residential Care Homes also known as CARCH. I own two residential care homes, one in Haddam and one in Watertown.

I am testifying today on behalf of CARCH and the near one-hundred residential care homes across the state about the need for a rate increase! I have been testifying for the last ten years. This is a long time to not be heard. Our industry cares for some of the most vulnerable residents, including the overwhelming majority who have a psychiatric diagnosis. Many residents also have substance abuse issues. Over the last decade, our increases have been few and far between and have not kept up with the cost of care or frankly the cost to pay our workers a decent wage.

Both residential care homes I own receive less than \$100 per day per resident. For this low cost, the residents receive room and board, all food and meals, medication administration, social activities, shower and other daily assistance as needed, help getting to and from medical appointments and an overall home-like environment that provides oversight and safety to our residents.

Our largest obstacle is years of insufficient funding. We have increases in food, heat, electricity, taxes, insurance and repairs. Oh, and there is that very large fire escape that will soon need to be replaced. Like all of my colleagues, there is always something that we need to figure out a way to pay for without the revenue to do so. We will need a loan for that, but banks aren't giving out loans to businesses that do not have a positive cash flow which is why my homes and many of my colleagues have limited means to make the necessary capital improvements. In the past, I have had to go so far as to pay for improvements and other operating expenses on my personal credit card. Keep in mind that these residents are state funded residents.

The biggest concern in residential care homes is the inability to pay our residents a decent wage. In a recent survey of some residential care homes, the average wage was around \$12.00 for new hires. This wage does not adequately pay our employees for the difficult work and challenging population that many of them face on a day to day basis. Employees in this industry often are tasked with assisting residents with showers, administering medications, deescalating situations that may involve residents

with substance abuse problems or having to provide personal care and oversight of a resident with significant psychiatric symptoms.

I would ask you if your family member lived in a Residential Care Home, how would you feel if staff turnover was constant. Recruitment is tough enough but retainment can be even more challenging when we pay low wages for work in a challenging environment. We strive to keep good staff that are sensitive to resident needs but many of our employees leave to work at group homes, for healthcare providers or even to the retail industry where the wages can often be better.

The Governor has put forth a proposal that would provide Residential Care Homes with the ability to bill Medicaid. We appreciate the attention to our industry and the desire to provide additional funding long-term. However, this is not something our industry has done before as we are a non-medical model.

Our Association has concerns about how this will work out for our homes especially since the Governor's budget also seeks to save \$2.1 million in Fiscal Year 2021 and over \$12 million when annualized for Fiscal Year 2022. Overall, this may be an opportunity but it needs more review and discussion without a severe budget cut hanging over the industry.

We also want to make sure that our model remains an option for our residents and does not change into another type of industry where healthcare professionals are needed and residents lose their independence. Additionally, homes will need time to become a Medicaid provider and make any necessary staffing changes or other changes to the home and its operations.

I want to reiterate that residential care homes need a rate increase. Long-term becoming a Medicaid provider may help but the answer is not to remove any funding from our industry. I ask you to please respect residential care homes and what they do for their residents. Include us in a budget that will give us some relief, provide our employees with raises and ensure that we can continue to serve a vulnerable population.

Respectfully –

Rhonda Boisvert, President  
Connecticut Association of Residential Care Homes