



March 26, 2021

Senator Catherine A. Osten  
Representative Toni E. Walker  
Appropriations Committee  
Legislative Office Building, Room 2700  
Hartford, CT 06106

Honorable Members of the Appropriations Committee-

Elara Caring is one of the Nation's largest providers of home and community based health services, providing home health, personal care, behavioral health, and hospice assistance for 60,000 beneficiaries daily in 16- states. In Connecticut, we provide behavioral home health services state-wide and have historically been known as New England Home Care.

Please accept this written testimony related to the March 26, 2021 hearing of the Appropriations Committee on H.B. No. 5742, AN ACT CONCERNING THE USE OF COVID-19 RELIEF FUNDS FOR DOMESTIC VIOLENCE, MENTAL HEALTH, SUICIDE PREVENTION AND SUBSTANCE ABUSE SERVICE PROVIDERS. Specifically, the recently signed federal American Rescue Plan offers an elevated 10% FMAP specific for Home and Community-Based Services and including behavioral home health services. We respectfully request the state of Connecticut distribute these funds using a formula and process based on HCBS agency's Medicaid claims during a specific time period. Such immediate relief funding will help agencies not only recover from the pandemic but also strengthen their capabilities to provide comprehensive and supportive services for Connecticut beneficiaries substantially challenged by severe mental illness and, frequently, co-occurrent opioid use disorders and other substance use disorders (OUD/SUD).

Behavioral home health providers not only deliver nursing and medication assistance, but also serve as a facilitator of the relationship between patient, physician, family members and other community supports as we perform our healthcare treatments. When treating beneficiaries with co-occurrent SUD/OUD and significant mental illness, this wrap-around assistance greatly benefits patient's potential to reach their desired recovery and life goals. Accordingly, behavioral home health is, if you will, the hands on, field based partner, that meets patients where they are and coordinates the recovery process.

As an example, Elara Caring has developed a Home Care Recovery Program to complement and enhance the Principles of Recovery and to be used in collaboration with Outpatient Community Providers. Specifically, we are partnering with community providers to assist with SUD/OUD wrap around treatment when a client with a primary psychiatric diagnosis experiences co-occurring SUD. We partner with

Recovery Homes and IOP Programs, work to transition clients to the community from inpatient stays, and work in collaboration with clients in outpatient SUD Programs. Currently, we are working very closely with A New Beginning Recovery House in New Haven which also includes a Redemption House that provides stabilization when needed. In this work, we provide medication management, case management and stabilization to ensure clients stay on their path to recovery. We are also the Preferred Provider for Help, Inc. in Waterbury, Connecticut.

The availability of behavioral home health services, in Connecticut and nationally, has made a significant contribution to permitting patients to avoid admission to and, where unavoidable, return home from the hospital quicker, while avoiding skilled nursing facility admissions for post-acute rehabilitation. Accordingly, behavioral home health services have been very assistive in lessening the burden on health facilities during the pandemic and improving the safety of patient care and particularly for patients with significant health risks like those with co-occurrent mental health, chronic disease, and frequently an SUD/ODD diagnosis.

Please know though, the additional costs associated with providing health services during a pandemic and which include those associated with protective health equipment, testing, enhanced care coordination and wages, all of which are continuing, when added to the broader inflation providers have experienced since the current skilled home health rate was established in Connecticut 14-years ago, is creating an untenable situation. This is why a direct and timely distribution to providers of the 10% enhanced FMAP for HCBS in the American Rescue Act is so critical. This provider sector has simply been stretched to the breaking point.

Connecticut has been ahead of the curve with respect to its utilization of behavioral home care, and we commend the State for its excellent work in opening the door to a treatment modality for many who, but for its efforts, would have much less hope for life in their community and recovery. To ensure this trend continues, we urge you to recognize the important role of behavioral home health providers in supporting beneficiaries with significant mental illness and OUD/ SUD and to take advantage of this opportunity to build on Connecticut's successes to date by funding these providers with the short term, time limited financial assistance available through the elevated FMAP in the American Rescue Act and which they so critically required to continue their work on behalf of Connecticut beneficiaries.

Please know, whatever assistance we may be able to provide you in support of this request, we're happy too.

Respectfully,

Cale Bradford, Chief Government Relations Officer  
Elara Caring