NEIL ABERCROMBIE GOVERNOR OF HAWAII

LORETTA FUDDY, ACSW, MPH DIRECTOR OF HEALTH



STATE OF HAWAII EXECUTIVE OFFICE ON AGING

NO. 1 CAPITOL DISTRICT 250 SOUTH HOTEL STREET, SUITE 406 HONOLULU, HAWAII 96813-2831 WESLEY LUM, PhD, MPH DIRECTOR

> Telephone (808) 586-0100

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Committee on Finance

SB1360, SD1, HD1 RELATING TO COMMUNITY CARE FOSTER FAMILY HOMES

Testimony of John McDermott
Long-term care Ombudsman
Executive Office on Aging
Attached Agency to Department of Health

Tuesday, April 5, 2011

2:00 p.m.; Agenda #1

- 1 LTC Ombudsman's Position: The Long-term Care Ombudsman (LTCO) opposes this measure.
- 2 Fiscal Implications: We defer to the Department of Human Services to address the fiscal
- 3 implications.
- 4 Purpose and Justification: The purpose of SB1360, SD1, HD1 is to amend the current
- 5 Community Care Foster Family Home (CCFFH) requirements by (1) mandating that all Medicaid
- beneficiaries receive the same commensurate amount of reimbursement for board and lodging and
- food and service, (2) requiring a CCFFH be certified and in operation for at least one year before a
- 8 third resident can be admitted, and (3) allowing a substitute caregiver to be a nurse aide instead of
- 9 a certified nurse aide.
- The LTCO strongly opposes this bill. Most of the testimony in favor of this bill has
- focused on the cost of hiring a certified nurse aide as compared to a nurse aide (\$10/hr vs. \$7/hr),
- but the focus should really be on what's best for the resident. This bill weakens the care that
- 13 CCFFHs will be providing to our most vulnerable population by reducing the caregiver
- 14 qualifications. Residents who are at a skilled nursing level are very sick and can have multiple

- 1 complications. Requiring that a nurse aide receive eight hours (the equivalent of one day) of
- 2 continuing education a year doesn't seem adequate or reasonable. If the issue for the caregiver is
- 3 money, as has been stated in much of their testimony, we would prefer the State consider
- 4 increasing the reimbursement rather than weakening the care provided. For the protection of our
- 5 kupuna, we ask that you not pass this bill. Thank you for the opportunity to testify.



PATRICIA MCMANAMAN DIRECTOR

PANKAJ BHANOT
DEPUTY DIRECTOR

STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

April 5, 2011

<u>MEMORANDUM</u>

TO:

The Honorable Marcus R. Oshiro, Chair

House Committee on Finance

FROM:

Patricia McManaman, Director

SUBJECT:

S.B.1360, S.D.1, H.D. 1 – RELATING TO COMMUNITY CARE

FOSTER FAMILY HOMES

Hearing:

Tuesday, April 5, 2011; 2:00 pm.

Conference Room 308, State Capitol

PURPOSE: The purposes of S.B. 1360, S.D.1, H.D.1, are to: require Community Care Foster Family Homes (CCFFH) to have a primary caregiver as a certified nurse aide and a substitute caregiver as a nurse aide with a certain minimum number of continuing education hours; require CCFFHs to be certified and in operation for a year prior to being certified for a third client; and make various certifications and licenses available for inspection. This bill also requires reimbursements for reason of parity of Medicaid beneficiaries in the same level of care in a community-based facility.

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports only the amendment in Section 2 of this bill proposed to amend the definition of CCFFHs or "home" in (2)(A) to include the requirement that the home be certified and in operation for not less than one year prior to accepting a third client.

Requiring at least one year's experience caring for two clients will provide both the caregivers and DHS the opportunity to determine whether the CCFFH caregivers are

able to adequately care for an additional adult without compromising the quality of care to any of the clients.

DHS opposes the other provisions in this bill for the following reasons:

1) Section 1, page 1 of this bill requires additional reimbursement for Medicaid beneficiaries who are at nursing level of care and residing in home and community-based settings. Currently, approximately 80 individuals residing in Type II Expanded ARCHS receive \$759.90 per month in State Supplemental Payments (SSP). Approximately 2,015 Medicaid recipients residing in Type I Expanded ARCHs and CCFFHs receive \$651.90 per month in SSP.

To provide additional SSP funds for the 2,015 individuals to match the amount given to the 80 individuals in the Type II Expanded ARCHS, DHS will need approximately \$2,611,440 per year in additional State funding (\$108 x 2,015 individuals x 12 months). Given the State's fiscal situation, it would not be prudent to pursue enactment of this provision at this time.

2) Section 2, page 2 of this bill proposes to amend the definition for "community care foster family home" in (2)(B) by requiring the primary caregiver of a CCFFH to be a certified nurse aide (CNA) and the substitute caregiver to be a nurse aide when the home is certified for three residents. Because the substitute caregiver assumes the responsibilities of the primary caregiver whenever the primary caregiver is absent from the home, the substitute caregiver must have the same qualifications as the primary caregiver in order to adequately care for the needs of the clients. The absence of the primary caregiver may be for short periods of time, or may be for as long as ten to twelve hours per day when the primary caregiver is employed outside of the home. For the health, safety and welfare of each client residing in the CCFFH, the substitute caregiver must be as knowledgeable and competent as the primary caregiver.

DHS would recommend that in lieu of section 346-331(2) being amended for the substitute caregiver as this bill proposes in (2)(B), that amendments to our existing administrative rules instead be promulgated to address situations when nurse aides may be used to provide coverage, such as in situations where there is a bona fide emergency for the primary caregiver. These amended rules would consider the primary caregiver's situation but would also ensure the health and safety of their very vulnerable clients.

3) The amendments to section 346-334(g) in Section 3 of this bill are not necessary because Chapter 17-1454, Hawaii Administrative Rules, already requires the posting of the CCFFHs' current certification to operator a home. The case management agencies' licensure must be posted at the agencies' place of business, not in the CCFFH. There is no certification for a nurse aide who chooses not to seek certification from the Department of Commerce and Consumer Affairs.

The Department acknowledges the concerns of the provider community on the issue of the substitute caregivers. DHS has already begun discussions with provider representatives on ways to address this issue. This is an issue that needs to be resolved through discussions with not only the provider community and DHS but also other agencies such as the Department of Health and the Executive Office on Aging.

This bill is well intentioned but DHS believes that a comprehensive restructuring of the service delivery with input from all will provide a more effective and efficient way to provide the long-term care services needed with the welfare of the clients as the primary goal.

DHS respectfully recommends that this bill be deferred and in the interim, all interested parties engage in discussions to restructure service delivery that ensures equity for the care providers and the safety of their clients.

Thank you for the opportunity to testify.

DEPARTMENT OF COMMUNITY SERVICES CITY AND COUNTY OF HONOLULU

715 SOUTH KING STREET, SUITE 311 ● HONOLULU, HAWAII 96913 ● AREA CODE 808 ● PHONE, 769-7762 ● FAX: 769-7792

PETER B. CARLISLE MAYOR



SAMUEL E. H. MOKU DIRECTOR

BRIDGET HOLTHUS DEPUTY DIRECTOR

Testimony of the Department of Community Services

MEASURE:

S.B. NO. 1360, H.D. 1, RELATING TO COMMUNITY CARE FOSTER FAMILY HOMES.

COMMITTEE(S):

HOUSE COMMITTEE ON FINANCE

HEARING DATE: Tuesday, April 5, 2011

TIME: 2:00 p.m.

LOCATION:

State Capitol, Room 308

COMMITTEE REQUESTS 2 COPIES

TESTIFIER(S):

Samuel E.H. Moku, Director

(Written testimony only. For more information, please call Elizabeth Bethea, Elderly Affairs Division, at 768-7708.)

Chair Oshiro and Members of the Committee:

The Department of Community Services opposes section 2 of this bill.

The purpose of this bill is to amend the current Community Care Foster Family Home (CCFFH) caregiver requirements to specify that, in CCFFHs approved for a maximum of three clients, the primary caregiver must be a certified nurse aide and the substitute caregiver must be a nurse aide.

Section 346-331, Hawaii Revised Statutes, currently requires that all caregivers in CCFFHs certified for up to three clients must be certified nurse aides. Having a third client at the nursing facility level of care significantly increases the degree of supervision and care required of the caregiver. Since the substitute caregiver must assume all responsibilities of the primary caregiver when the primary is absent from the home, it is imperative that the substitute caregiver have qualifications equal to those of the primary in order to adequately care for the needs of the clients and to respond to any emergency situations. Because many primary caregivers are employed outside the home, they may be absent for many hours of the day and evening. The substitute caregiver must therefore be as knowledgeable, competent, and up-todate as the primary caregiver to protect the health, safety and welfare of each client residing in the CCFFH.

Certified nurse aides receive initial certification from the Department of Commerce and Consumer Affairs (DCCA), and must go through recertification every two years. The

Testimony of the Department of Community Services Twenty-Sixth Legislature, 2011 Page 2

recertification process requires the certified nurse aide to behaviorally demonstrate skills competency at the level of a CCFFH caregiver's responsibilities. Nurse aides who are not certified by DCCA have no requirements to demonstrate the updating and maintenance of their skills, for which their initial training may have occurred many years previously. Section 2 of this bill would make it permissible for an uncertified nurse aide, who is not required to demonstrate current skills competency, to nevertheless assume the responsibility of a primary caregiver.

Because of these consumer protection concerns, we respectfully ask that section 2 be deleted.

ASSOCIATION OF HAWAII

P.O. Box 970092, Waipahu, Hawai'i 96797

April 4, 2011

Testimony in Strong Support of SB 1360 - FIN - 4/4/11 1:15 p.m. Rm 308

Thelma Ortal
President
Adult Foster
Homecare
Association of

Hawaii

Lani Akee Immediate Past President Adult Foster Homecare Association of Hawaii Chair Oshiro, Vice Chair Lee, and Members of the Committee:

The Adult Foster Homecare Association of Hawaii (AFHA) strongly supports SB 1360, which requires substitute caregivers in Community Care Foster Family Homes (foster homes) to be either Certified Nurse Aides (CNAs) or Nurse Aides (NAs).

Requiring substitute caregivers to be licensed as CNAs or NAs results in better quality of care and safety for elderly and disbled residents of foster homes. Both CNAs and NAs require training in skills such as first aide bathing, feeding, toileting, turning and moving patients in bed, walking with various amounts of assistance, and transferring patients to a wheelchair or stretcher. They also receive training in taking body temperature, pulse, respiration, blood pressure and measuring intake and output. CNAs and NAs have the same minimum educational requirements.

With these licensing standards, resident clients and their families can be assured of a minimum standard of care in foster homes. Both CNAs and NAs must submit their fingerprints for an identification and criminal background check. Anyone with a criminal record or history of elderly abuse can neither be a CNA nor a NA.

While CNAs undergo a 24-hour examination every two years, NAs take a minimum of 8 hours of continuing education every two years. This is the primary difference between a CNA and a NA. Nevertheless, case managers conduct a comprehensive skills check annually on NAs to ensure their skills meet minimum standards. This exam is quite onerous and costly, up to \$700 to take the test. If you fail, you have to pay extra to re-take the test.

Allowing foster home operators to use CNAs and NAs as substitutes would allow enough flexibility to ensure their continued operation. Reimbursement rates for home operators have been stagnant for many years. Without a third client, foster home operators have difficulty staying in business. When a client goes to the hospital, the operator does not get paid and may be left with one or no clients.

DHS designed the foster home program with a social model in mind, envisioning that families would take care of those who could not take care of themselves. Family members provide assistance to the operator, while pursuing other careers, and may be unable to take a 24-hour examination every two years because of the cost involved and difficulty with taking tests. Many family members use English as a second language, or may not be adept at taking tests.

In summary, AFHA reiterates its strong support of SB 1360 requiring substitute caregivers in foster homes to be either CNAs or Nurse Aides NAs.

Very truly yours,

Thelma Ortal President

About AFHA

The Adult Foster Home Association of Hawaii (AFHA) is the industry trade association of providers under the Community Care Foster Family Home program under the Department of Human Services, State of Hawaii. With a membership of almost 750 providers, AFHA's mission is to promote the interests of providers as well as resident clients. AFHA members provide 24-hour care to resident clients 7 days a week, 365 days a year.

THE PRIMARY CARE PROVIDERS P.O. Box 2441, Honolulu, Hawai'i 96804

April 4, 2011

Testimony in Strong Support of SB 1360 - FIN - 4/4/11 2:00 p.m. Rm 308

Chair Oshiro, Vice Chair Lee, and Members of the Committee:

The Primary Care Providers (TPCP) strongly supports SB 1360, which requires substitute caregivers in Community Care Foster Family Homes (foster homes) to be either Certified Nurse Aides (CNAs) or Nurse Aides (NAs). This chart illustrates that the only difference between CNAs and NAs is the requisite examination upon certification and bi-annual recertification.

CNA Substitutes v. NA Substitutes In Community Care Foster Family Homes

	Nurse Aides (NA)	Certified Nurses Aides (CNA)
Education	State-approved nurse-aide training	Same education and coursework
	program including Kapiolani CC	as NA, except must pass
	and Honolulu CC; skills taught	examination
	include CPR, blood pressure, vital	
	signs, transferring, bathing,	
	assistance with daily living activities	
Licensing	Registration with DHS contracted	Same as NA
-	CTA; final approval from RN case	
	manager after passing	
	comprehensive skills check	
Recertification -	8 Hours Continuing Education (CE)	12 Hours CE annually (24 hours
Continuing Education	annually; completion of skills check	every 2 years) including skills
and Skills Check	administered by RN case manager	examination
	during annual service plan	
Adult Protective Service	Annually – verification of ID,	Same as NA
(APS) and Criminal	including SS#, date of birth, and	
Background Clearance	fingerprinting	
Tuberculosis Clearance	Every time you are named as a	Same as NA
	substitute for a home	

In summary, TPCP reiterates its **strong support of SB 1360** requiring substitute caregivers in foster homes to be either CNAs or Nurse Aides NAs.

Very truly yours,

The Primary Care Providers (TPCP)

By: Maria Etrata
About TPCP

TPCP's mission is unite the home and community based care giving industry to improve the quality of care provided to elderly and developmentally disabled clients in various home and community based programs, as well as to improve the state of the industry. Together, members of the four organizations have a membership of about 500 and comprise about 35% of the home and community-based caregivers in the State of Hawaii.

ALLIANCE OF RESIDENTIAL CARE ADMINISTRATORS

P.O. Box 758 Pearl City, Hawaii 96782

April 4, 2011

Testimony in Strong Support of SB 1360 - FIN - 4/4/11 2:00 p.m. Rm 308

Chair Oshiro, Vice Chair Lee, and Members of the Committee:

The Alliance of Residential Care Administrators (ARCA) **strongly supports SB 1360**, which requires substitute caregivers in Community Care Foster Family Homes (foster homes) with 3 clients to be either Certified Nurse Aides (CNAs) or Nurse Aides (NAs).

Ironically, Adult Residential Care Homes (ARCHs) under the Department of Health with up to 6 clients, 3 of whom can be the same level of care as those in foster homes (expanded clients), may use NAs opposed to CNAs. HAR Chapter 100.1 of the DOH rules provide that ARCH operators and their substitutes need only be NAs. As we provide the same level of care as foster homes for our expanded clients, the standards should be applicable across the board. We believe our quality of care and patient safety are comparable with those of foster homes and in any event more than adequate, despite us using NAs for substitutes.

We have repeatedly observed the divergence between the standards of DOH with those of Department of Human Services (DHS). We find it peculiar in this case that DHS, which operates under a social model as opposed to DOH which operates under a medical model, requires CNA substitutes while DOH requires NA substitutes. We certainly want to preempt any attempt by DOH to require CNA substitutes.

Certainly, maintaining a CNA entails high costs, up to \$750 every two years to take a 24-hour test and to register with the Department of Commerce and Consumer Affairs. Although NAs must demonstrate their skills at least once a year to a RN case manager, NAs need not take the 24-hour examination, which costs an exorbitant amount, and need not pay to register.

Furthermore, the procedure to obtain a CNA remains convoluted and unclear, with no administrative rules promulgated. The very concept of a CNA is quite new. Prior to 2008, CNAs were unregulated, so any NA could call themselves a CNA. In 2008 after much debate, the 24-hour examination was imposed on CNAs wishing to recertify. There is still much confusion in the industry as to what is required to recertify as a CNA.

In light of the astronomical costs and the dreaded examination that lasts 24-hours, many NAs have chosen not to pursue CNA status. Yet, they possess the same skills.

For these reasons, ARCA reiterates its **strong support of SB 1360** that requires substitute caregivers in foster homes to be either CNAs or NAs.

Very truly yours.

Alliance of Residential Care Administrators

Medy DeLara, President



TESTIMONY IN SUPPORT OF SB1360, SD1, HD1

April 5, 2011; 2:00 p.m.; House Conference Room 308 Relating to Community Care Foster Family Homes

To:

Honorable Rep. Marcus Oshiro, Chair, House Committee on Finance

Honorable Rep. Marilyn B. Lee, Vice Chair Honorable Finance Committee Members

From:

Ron Menor, Chair, National Federation of Filipino American Associations

("NaFFAA") Region XII

My name is Ron Menor. I serve as the Chair of the National Federation of Filipino American Associations ("NaFFAA") Region XII which represents the interests of Filipinos in Hawaii, Guam and the Commonwealth of Northern Marianas Islands. NaFFAA Region XII is an affiliate of the national NaFFAA. Washington policy-makers, private industry and national advocacy groups recognize NaFFAA as the voice of Filipinos and Filipino Americans throughout the United States. We are a non-partisan, non-profit national affiliation of more than five hundred Filipino-American institutions and umbrella organizations that span twelve regions throughout the continental United States and U.S. Pacific territories.

I am submitting this testimony in support of the above-referenced bill because the vast majority of Hawaii's foster home operators, and a significant number of their patients, are persons of Filipino ancestry. The passage of this bill is necessary because the current requirement that only certified nurse aides can serve as substitute caregivers is cost prohibitive. Moreover, it would drive many foster care operators out of business at a time when a rapidly growing elderly population in Hawaii are in dire need of their services. Moreover, the current requirement is unnecessary because nurse aides possess the requisite skills and training that would enable them to provide quality care as substitute caregivers. Therefore, the passage of this measure will eliminate a significant cost burden for an important segment of our caregivers without affecting the health and safety of our elderly population.

Thank you for the opportunity to submit testimony in support of this bill.



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Website: www.filipmochamber.org FILIPINO CHAMBER OF COMMERCE OF HAWAII

Promoting Hawaii's Business Community since 1954

April 4, 2011

Testimony in Strong Support of SB 1360 - FIN - 4/4/11 2:00 p.m. Rm 308

Chair Oshiro, Vice Chair Lee, and Members of the Committee:

The Filipino Chamber of Commerce (FCCH) strongly supports SB 1360, which requires substitute caregivers in Community Care Foster Family Homes (foster homes) with 3 clients to be either Certified Nurse Aides (CNAs) or Nurse Aides (NAs).

As over 90% of foster home operators are of Filipino descent, SB 1360 and its companion bill currently moving in the Senate (HB 739) are **the Chamber's #1 priority** for the 2011 legislative session. We will defer to those in the industry to point out subtle differences between a CNA and an NA. Our testimony focuses on assurances of patient quality of care that the industry can voluntarily put in place, including:

- 1. Increase annual continuing education hours for NAs from 8 to 12, which is the same as CNAs.
- 2. Require RN Case Managers of clients to ensure NA substitutes possess requisite skills.
- 3. Make the primary caregiver as well as patient's case manager responsible to ensure substitutes' credentials are kept current whether NA or CNA.
- 4. Require all substitutes whether NA or CNA to be individually named in the liability insurance policy of each CCFFH.
- 5. Require each CCFFH to have 1 year experience before eligible for 3rd client (this was in HB 736, but this did not crossover).
- 6. Require DHS to engage the CCFFH organizations to look into developing a registry of NAs accessible to the public to promote greater accountability (although DHS will probably not like this or will use this as a means to exact more fees). Incidentally, the Adult Foster Homecare Association and the Primary Care Providers already have a master listing of all authorized substitute caregivers. It's just a matter of making this list public. This last concession will likely be a work in progress.

We believe these concessions will go a long way in ensuring quality of care and improving the services CCFFH's provide. As in previous testimony, we reiterate the numerous barriers that places Filipinos at a disadvantage in maintaining a CNA license and the financial crisis facing many CCFFH's because of their inability to pay the rates demanded by CAN substitutes.

In summary, FCCH reiterates its **strong support of SB 1360** requires substitute caregivers in foster homes to be either CNAs or Nurse Aides NAs.

Very truly yours,

Filipino Chamber of Commerce By: Bryan P. Andaya

Lou's Quality Home Health Care Services, LLC

95 212 Wailawa St., Mililani, HI 96789 Phone 808 623-7109 www.lousqualcare.com

April 4, 2011

Testimony in Strong Support of SB 1360 - FIN - 4/4/11 2:00 p.m. Rm 308

Chair Oshiro, Vice Chair Lee, and Members of the Committee:

Lou's Quality Home Health Care Services strongly supports SB 1360, which requires substitute caregivers in Community Care Foster Family Homes (foster homes) with 3 clients to be either Certified Nurse Aides (CNAs) or Nurse Aides (NAs).

My name is Lourdes Vergara Marcelo, and I have been a trained professional Registered Nurse (RN) for approximately 30 years. I founded Lou's Quality Home Health Care Services in 2005 and provide case management services, 24 hours Department of Human Services Nurse Aide Competency Proficiency Evaluation (DHS 1646) We visit our clients monthly and ensure substitutes, both CNAs and NAs, have the nursing skills adequate to deliver safe, quality nursing care. I understand I am accountable in ensuring that my clients are serviced by competent professionals who possess the necessary skills.

I have worked with many CNAs and NAs. I believe the primary difference between them are the required examinations at the initial certification and bi-annual recertification. They perform the same duties, have the same educational requirements, and perform the same skills. Up until a few years ago, any NA could go to Red Cross and become a CNA but now have to pass an examination, including a 24-hour skills examination every two years. A CNAs is simply an NA who has successfully completed their exam. I personally know NAs who can perform just as well as a CNA.

All else being equal a CNA would appear to be more attractive but to require a CNA at this time simply because a foster home has 3 clients is unwarranted. Although I encourage all NAs to try to obtain certification, sometimes it is not feasible because of the cost to become a CNA or because of a language barrier. Some individuals do not test well under pressure and fail the exam even though they have good command of their skills. Given many caregivers do not speak English as their first language, I believe the language barrier is significant barrier for them not pursuing the CNA title.

I also know that foster homes are being singled out. In other programs offering the same services, substitutes can be CNAs, NAs, or even just CPR certified.

For these reasons, I support SB 1360 that requires substitute caregivers in foster homes to be either Certified Nurse Aide (CNA) or Nurse Aide (NA).

Very truly yours,

Lourdes "Lou" Vergara Marcelo, RN, CDN, CM President, CEO Lou's Qualilty Home health Care Services, LLC

FINTestimony

⊂rom: ent: mailinglist@capitol.hawaii.gov Saturday, April 02, 2011 11;25 AM

To:

FINTestimony

Cc:

Tlenzer@hawaii.rr.com

Subject:

Testimony for SB1360 on 4/5/2011 2:00:00 PM .

Testimony for FIN 4/5/2011 2:00:00 PM SB1360

Conference room: 308

Testifier position: comments only Testifier will be present: No Submitted by: Anthony Lenzer, Ph.D

Organization: Individual

Address: Phone:

E-mail: <u>Tlenzer@hawaii.rr.com</u>

Submitted on: 4/2/2011

Comments:

Representative Oshiro and Members of the Committee on Finance:

My name is Anthony Lenzer. In my previously submitted testimony on behalf of PABEA, I expressed the Board's opposition to a provision of the proposed legislation on the grounds that it might affect the quality of care of foster home residents. That said, I want to assure the Committee that we believe that adult foster homes are an important part of the ontinuum of long-term care services for Hawaii's frail elders. We understand that caring for these residents is a difficult and demanding job, and one which requires appropriate compensation. However, I respectfully suggest that compensation issues be addressed in a way that does not compromise quality of care.

SB 1360

We received over 100 similar/form testimony in SUPPORT.

Via Fax (586-6001)

RE: SB1360 - Testimony in Strong Support - FIN 4/5/11 - Rm. 308 2:00 p.m.

Dear Chair Oshiro, Vice Chair Lee and Members of the Committee:

I strongly support SB 1360, which requires substitute caregivers in Community Care Foster Family Homes (foster homes) with 3 clients to be either Certified Nurse Aides (CNAs) or Nurse Aides (NAs).

Please be assured that the difference between CNAs and NAs is basically a 24-hour examination. Educational, training, and skills are identical between CNAs and NAs. Quality of care and client safety would not be compromised.

Furthermore, we face significant language and cost barriers in taking the CNA examination. We need our families to substitute when we are unable to be present, but the CNA examination makes unfeasible for our family members to become CNAs.

In today's economy, we cannot make it unless we get three clients. When one of our clients go to the hospital, we do not get paid. Ironically, if we have only 2 clients our substitutes as well as the primary caregiver need only be NAs. It is not that much more difficult to care for an additional client because clients often go to the hospital. When a client goes to the hospital, we do not usually fill their space, unless we know for sure they are not returning.

Foster homes cannot afford to pay rates CNAs demand. Foster homes receive Medicaid reimbursement of approximately \$1,800-\$2,500 per month per client for nursing home level services. Similar services in a nursing home would cost at least \$7,000 per month per client. Thus, care in foster homes saves 65-75% of the cost of care in a full-service nursing home.

Meanwhile, we are struggling to make our mortgage payments and other obligations. Please, we need your help.

For these reasons, I strongly support SB 1360.

Amely Suprit 018-346 Ponskiwila St. Aien Hi 96701