Chairman Ginter, Vice Chair Swearingen, Ranking Member Howse and Members of the House Aging and Long Term Care Committee. Thank you for allowing me to provide written testimony on HB265—Dementia Care Training Certificate.

Established in 1965, OCHCH is a non-profit trade association that represents the interests of health care at home providers in Ohio. OCHCH advocates for ethical, compassionate, and quality home and community-based care, as well as for the individuals and families that our members serve. As the voice of health care at home, we strive to provide value, resources, and partnership for those who provide care for our most vulnerable citizens.

A majority of OCHCH’s over 600 home care and hospice agencies throughout the state provides care for those with Alzheimer’s and dementia related afflictions. Our members are seeing a growing number of people with memory-related afflictions, many of which can, should, and want to stay at home as their disease progresses. As such, we are supportive of any conversations around how to improve care for this population especially concerning their ability to receive those services in the community.

First, while we are supportive of the intention of this bill, many agencies already provide dementia care training for their staff precisely because of the amount of patients they serve that have memory related issues. While there might be a varying degree of expertise, we’re concerned that the language would lead to agencies being required to hold a special certificate to provide services to this population. This could lead to a disastrous access to care issue as an unintended consequence.

We believe that this certificate can be used to bolster the knowledge of frontline providers without mandating that providers have the certificate. We would like to clarify the bill language to ensure this certificate is an option, not a mandate. If it’s the committee’s desire to mandate the certificate as a prerequisite of serving this population, then it must be tied to some sort of reimbursement increase.

Secondly, OCHCH also believes that this certificate should be proposed at the agency level instead of just an individual provider level, or in the very least include the ability for an agency to hold the certificate without requiring all agency staff to hold the certificate individually. If the certificate is intended for each provider, an argument could be made that it should be a mandate for provider credentialing, not as a condition to provide services which fall squarely within a provider's scope of practice. To address this concern, we’d like to clarify the bill language that this certificate is either optional, or amended to include how this certificate might work at the agency level.

Lastly, we are concerned that this bill could create redundancy and confusion as the new Alzheimer’s and Dementia Related Task Force, which was created by SB24 (Arndt) begin its work very soon. We believe it might be more appropriate for that group to create education
standards for providers within the context of the overall plan that group will be recommending for the state. To address this concern, at a minimum, we recommend that the bill be amended to ensure that these are not in conflict.

Thank you for your time and consideration of these changes. We commend Ranking Member Howse for continuing this important work after Representative Arndt left the House. We look forward to working with you on this very important topic. If you have any questions or concerns, I can be reached at joe@ochch.org. Thank you!