Testimony on House Bill 166
State Biennium Budget
Wanda Whetsel Ross County Home Health, LLC
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Chairman Romanchuk, Ranking Member West, and Members of the House Finance Subcommittee on Health and Human Services, thank you for allowing me to provide testimony today on HB166—the state budget. My name is Wanda Whetsel and I am the Administrator at Ross County Home Health in Chillicothe, Ohio. I come before you today asking for your assistance to increase Medicaid home health rates, which are so low that my agency is seriously considering dropping our Medicaid services altogether.

Ross County Home Health provides skilled and non-skilled services in five counties in Southern Ohio. We are a rural provider. We were the only home health agency in our area providing pediatric therapy services to Medicaid and Medicaid Managed Care patients. Stagnant Medicaid rates are our biggest challenge. We have not had a rate increase since 1998. In fact, the low therapy rates have now created critical access issues for our pediatric patients and has left many medically fragile children without the ability to get home care therapy services. Worst of all, issues with managed care mean we may not even get paid at all. Prior authorization and delayed payment for Medicaid Managed Care adds an additional administrative burden. Combine this with expensive new regulatory requirements such as EVV and my agency’s ability to continue to provide Medicaid services is now in serious jeopardy. We were the last agency serving pediatric therapy patients in SE Ohio. How could we do this to Ohio’s most vulnerable kids?

Last fall management had to make a very difficult decision to discharge 55 of our Medicaid therapy children. The low Medicaid rates for therapy did not cover our direct and indirect costs. Continuing to provide the much-needed services meant providing the therapy visits at a loss. No longer could our agency cover the loss from Medicaid revenue from other payors. The medically fragile pediatric patients were unable to find another home health provider for the services as we were the only provider in our area accepting Medicaid and Medicaid Managed Care. This patient population is not able to obtain services outpatient as they are ventilator dependent and many have tracheostomies. The medically fragile patients are at high risk for infection and it is contraindicated to be in crowds. I still receive calls weekly from the families we discharged asking if anything has changed on the state level so services could be reinstated.

We cannot continue to provide Medicaid services if the State of Ohio is not willing to support reimbursement rates that cover the costs of providing care. As you can see we have already begun making decisions, but when Medicare pays three-times more for the same services and the number of Medicare recipients is growing, it’s a simple economic decision.

It’s for these reasons that I humbly ask for your help with increasing the home health therapy Medicaid rates in this budget, which includes therapy rates. Thank you again for allowing me to testify today. I’m happy to answer any questions you may have at this time. Thank you.