Chairwoman Carruthers and Members of the Committee,

Thank you for the opportunity to testify. I am the mother of twins with profound intellectual and developmental disabilities who benefit from the care of an Intermediate Care Facility for Individuals with Intellectual Disability (ICF/IID).

I am here today to offer some common sense policy that will not cost the State money and actually save millions of dollars, while keeping people in the care of Ohio's Medicaid safe, healthy and happy.

You have heard a great deal about the pressing needs of the Developmental Disabilities (DD) System. While there is a great workforce crisis, part of the crisis has been created by the policies of Ohio's DD System which has forced downsizing and closures of congregate settings. Congregate care can provide more services to larger numbers of people with far less resources because of the economies of scale that a large setting can provide. For example, one nurse can take care of 20 patients on a shift at a large ICF home.

This downsizing is being forced on my children's home per Revised Code, but it will not make their lives better. Revised code calls for all settings to have two persons per bedroom or fewer. While this makes sense for many persons, it is not the safest way to care for people with profound needs.

Residents of some ICF homes have very complex needs. For instance, my children are profoundly intellectually disabled, quadriplegic, non verbal, tube fed and epileptic. And, they are not the most vulnerable individuals at the home where they live. Despite their challenges, they are extremely happy and healthy people thanks to the fantastic care they receive at Heinzerling Community.

My children share a bedroom with three or two other individuals. Because of their intellectual level, they are not concerned about privacy. They like the social interaction having lots of people around. Since they are quadriplegic, when they are in their rooms, it is at night when they are ready for bed. They are not walking around their rooms. During the day, they attend activities or spend time in the great activity room at their ICF home. As a parent, I know my children will be checked on more often by staff throughout the night knowing that there are three other roommates in their rooms. My children can have seizures and require rescue medication. Knowing they will be frequently checked on while they are in their rooms is important to my husband and me.

If Heinzerling is forced to downsize, they will lose 50% of their residents. Who will have to move out? How do you make such a decision? And why would we want 50% less people to have access to the fantastic care Heinzerling provides? Or, Heinzerling would be forced to spend millions of dollars to build onto their facility. If the do build on, how do they staff the larger facility? They will need more people and more funding to staff. Significantly more dollars will be sent with no increase in the quality of life. In fact, their qualify of life and safety will be negatively affected.

I propose that this policy is removed from Revised Code so that Heinzerling and ICF homes like Heinzerling can retain the care model that makes the most sense to their residents. In the face of a workforce crisis, let's not make it worse by downsizing facilities that have been providing high quality of care for decades.

Thank you, Caroline Lahrmann