

HB 141 – Regards Prescribed Pediatric Extended Care Centers

Sponsor Testimony

Representative Rachel Baker and Representative Cindy Abrams

Thank you, Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members of the House Health Committee. It is a privilege to join Representative Abrams in offering sponsor testimony on House Bill 141, legislation that would establish Prescribed Pediatric Extended Care (PPEC) centers in Ohio.

PPEC programs are non-residential community-based daycare centers for children with complex medical needs. These centers offer a daycare and early childhood education experience for children, who because of severe medical needs, are often unable to attend typical daycare centers safely. These centers would offer daycare for infants and preschool aged children, and before and after school and summer services for school-aged children. The definition of children with medical complexity encompasses a big range of diagnoses - which is why the bill doesn't list specific diagnoses but instead requires a provider to prescribe PPEC as a needed service. To give you an idea, these are children who may have diagnoses like cerebral palsy, spina bifida, chronic lung disease, cardiac disease or defects, seizure disorders, or genetic disorders. They may have a trach and be dependent on a ventilator to breathe, they may have a feeding tube or require bladder catheterization.

Currently, there are a few care setting options for these children: They can live at home with direct care from their family, they can live at home with in-home nursing or aide services, or they can live in a residential setting like a skilled nursing facility or ICF. While all these options are needed and each child and family needs to be supported in what is best for them, providing supports to families to facilitate their child living at home is optimal when possible and PPEC centers would be one more option for families attempting to support their children to thrive living at home.

In March 2023, a southwest Ohio taskforce surveyed Child Care Resource and Referral Agencies, representing all 88 counties regarding childcare access for children with complex medical conditions, and 89% reported "poor access" to child care for children who require nursing services. Because of the scarcity of daycares equipped to serve these children, they often remain at home with 1:1 nursing care until they reach school-age. However, as we all know, Ohio is facing a shortage of home health aides and nurses and many families of children with complex medical needs find themselves without home health care services as needed. In learning about this need, we've also heard of children essentially living in a children's hospital inpatient room because their family was unable to secure nursing care to support them living safely at home. Even in the rare case when these families are able to find adequate home nursing, these children receive minimal socialization and inclusion in early childhood experiences spending the majority of their day at home with a home nurse or their family.

PPEC programs are a way to address the scarcity of home health nurses, while providing children with complex medical needs a safe early childhood education and socialization experience in a classroom environment. Centers are staffed with a medical director, nurses

providing routine and emergency care, and classroom teachers who build lesson plans and activities to meet each child's needs. Centers can even partner with local healthcare providers so that children can receive occupational therapy, speech therapy, and physical therapy while at the center, freeing families up from running to health appointments after work.

Many states currently license and fund PPEC centers, including Delaware, Florida, Kentucky, California, Colorado, Louisiana, Maryland, Minnesota, Mississippi, Nevada, New Jersey, New York, Pennsylvania, Texas, and South Carolina. There was a study conducted of medically complex children who received care in three types of settings: at home, in long-term care setting, or home with a PPEC. They found that children who attend a PPEC had the highest overall quality of life, and highest physical, emotional and social functioning. Additionally, other states who already have PPECs have reported cost savings to introducing this model into the options for families.

Ohio is home to the number 1 children's hospital in the country. I worked for Cincinnati Children's Hospital for years and met families of children with complex medical needs who moved to Ohio for our pediatric health care. However, once here many families discover that while they are getting the top level of medical care, the community does not have the resources in place for these children to have a typical early childhood education experience. In Cincinnati, many of these families choose to live across the river in Kentucky to receive PPEC experience.

In talking with families who have children attending these centers in Kentucky, I learned another perspective. Centers are designed to be inclusive environments with a portion of the children having complex medical needs and the other portion being typically developing children. This allows families to send all of their children to the same early childhood center and allows typically developing children to have an experience in an inclusive learning environment where empathy and learning about children with different abilities can occur. Siblings of children with medical complexities can meet other families like theirs, normalizing their family experience.

While these centers are life-changing for children, they're also very important for their parents. Finding the right childcare, especially for a child with complex medical conditions, can be an obstacle for parents entering the workforce. Having reliable and consistent early childhood education allows parents to remain in the workforce and allows some respite during the day so that parents feel more equipped to provide the care their children need after work.

This legislation would make PPEC centers a possibility in Ohio - this bill sets up a licensure process through the Department of Health through which centers would apply to become PPEC centers. Centers would achieve this licensure in addition to holding child care center licensures. Additionally, the legislation sets up a Medicaid waiver program that would pay a daily rate for a child who qualifies based on medical need. The most exciting part of this legislation to me is the basis it is founded in - that children with medical complexity are not just patients. They are CHILDREN first and they deserve to have the experiences of socialization, friendship, and play that will come with safe daycares.

Thank you so much for hearing our testimony today and now my joint sponsor, Representative Abrams will offer her testimony.

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members of the House Health Committee thank you again for providing us the opportunity to provide sponsor testimony on this important piece of legislation.

Finding the right childcare, especially for a child with complex medical conditions, can be an obstacle for parents. Having reliable and consistent early childhood education allows parents to remain in the workforce and reduces workplace absenteeism. PPEC centers, under this legislation, would be available to Ohio children following a referral to the program by a provider, the child must be either medically or technologically dependent, and the child must be medically stable prior to beginning PPEC services.

As Representative Baker mentioned earlier, we have both had the honor of visiting a PPEC center in Northern Kentucky - Easterseals Redwood. Easterseals Redwood is a licensed five-star child care center that currently provides child care to more than 140 children, 63 of whom have medical complexities. We would like to thank Pam Green, President and CEO of Easter Seals Redwood for working with us.

It is obvious that no parent, let alone any child, wants to be in a hospital if they do not need to be. The families who are able to utilize Easterseals Redwood will tell you the same thing; no matter how proud we are in Cincinnati of the top of the line care our children can receive at Cincinnati Children's Hospital. PPEC centers help to provide a sense of comfort for these families to know that their children are receiving safe educational experiences.

In closing, House Bill 141 is a win-win for children with complex medical needs, their families, and our communities to ensure proper and accessible early childhood education for children with complex medical conditions. Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members of the House Health Committee, thank you for allowing us to come and testify and we welcome any questions at this time.