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House Aging and Long Term Care Committee  
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Chairman Bethell and Committee Members

My name is Cindy Luxem, Executive Director of the Kansas Health Care Association and Kansas Center for Assisted Living, a trade association with a membership of over 185 nursing homes, assisted living, residential health care, home plus, and nursing facilities for mental health. Thank you for the opportunity to testify.

HB 2147 changes the number of residents residing in a Home Plus residence. We have Home Plus providers in our membership. Additionally, through the Operator's course which we provide three times a year qualifies the registrant to operate a state-regulated home of less than 60 residents, which includes Home Plus.

In my testimony I would like to provide you with points on both sides of the issue. First, for those currently providing services in a home plus model, they would like to have the number increased because it becomes financially impossible with only eight residents. One of my providers shared a story with me about how of the eight residents, five passed in a short amount of time. It is difficult replace the revenue. She is a registered nurse and also employs licensed practical nurses so she is doing exactly what this model is about. And of course, this is a popular model for many people because it serves fewer people. And because it is state regulated, the burden of weeding out incompetent providers would be left up to the surveyors. We do have the concern some Home Plus operators might choose to have this kind of home to avoid federal regulations and because potential residents are not screened, these folks could be running mini nursing homes.

Our concerns are some of the following. Home Plus is a state-regulated living environment. There are no staffing requirements. All the regulations say are: direct care staff or licensed staff shall be in attendance and responsive at all times. A registered professional nurse shall be available to provide supervision to licensed practical nurses... The issue about consistent quality care also concerns us because we see many entrepreneurs who believe senior care is the place to be and because they have taken care of a family member or friend believe they could just expand and start making money.

Also because Home Plus traditionally does not accept Medicaid, it might serve only well to do seniors and Medicaid clients would be relegated to the nursing home. The funding of HCBS is probably not feasible because there is nowhere to absorb the costs. Most Assisted Living providers write off about \$1400 per month because of low reimbursement of waiver services.

We do believe there is a place for the Home Plus particularly in the rural settings. And a Home Plus is certainly home-like.

In conclusion, I would respectfully ask that this have more time to be studied and put in the proper safe guards before we just make the change.

Thank you. I would be happy to answer any questions Cindy Luxem

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