

Written Testimony
HB 120 Compassionate Care
Senate Health Committee
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March 30, 2022

Chair Huffman, Vice Chair Antani, Ranking Member Antonio, and members of the Senate Health Committee, thank you for the opportunity to share our support of HB 120 on behalf of LeadingAge Ohio. I regret not being able to be there in-person this week, as I have scheduled meetings with our Ohio delegation in Washington, DC.

LeadingAge Ohio represents nearly 400 aging services and end of life care providers across the state. Our members serve older adults across the continuum, from those who live independently in affordable or market rate homes to those that are at the end of their lives, served by hospice. In between, they offer skilled nursing care and long-term care, assisted living, home health care, home-delivered meals, adult day and nearly any other service that would help maximize quality of life of older Ohioans.

LeadingAge Ohio's perspective is broader than any one provider type: we span the entire continuum of services available to older Ohioans to ensure they can age in the place they called home. Our perspective is also longer than most healthcare providers, with our first members having been founded during the Civil War, with plans to continue to meet the needs of elders in the community many decades into the future.

We have been working with the bill sponsors, Rep. Richardson and Rep. Frazier, since prior to introducing the bill. We appreciate their time and effort to understand the Centers for Medicare and Medicaid (CMS) guidelines for nursing home visitation during the COVID19 pandemic and that the nursing homes had to follow it along with the guidelines provided by the Ohio Department of Health (ODH). After a great deal of discussion and draft changes, we believe HB 120 that is pending before the Senate Health Committee achieves the goals of bill sponsors, which is to ensure that compassionate care visits can be provided to nursing home and assisted living residents as they are needed during a state of emergency.

Compassionate Care

We are now two years out from some of the hardest days of our lives. One member recalls the early decisions they were tasked to make—namely, closing the doors of nursing facilities and assisted living to beloved family members, as the “worst thing I will ever have to do,” while also recognizing its absolute necessity.

While isolation was necessary for the protection of residents prior to the development of vaccines and therapeutics, it was a challenge that we had not experienced in our lifetime. While social isolation challenged us all, it was particularly hard-felt on the residents of nursing facilities and assisted living, who did—and still do—live with the strictest infection control protocols of any population. Additionally, many residents of nursing facilities experience cognitive impairment and dementia, making it hard for them to understand the separation.

Ohio moved quickly to ensure end of life visitation by family members, and continually worked to refine guidance. In some situations, providers saw the effects of isolation outweigh the risks of infection, particularly once supply chains for PPE opened up, and outdoor visitation became a possibility. While it took some months, regulators eventually “caught up” and provided sufficient flexibility to providers to allow visitation for residents experiencing adverse effects of prolonged separation, including weight loss, depression, or bereavement from the loss of a loved one. Early in the pandemic, we looked to other states that created special designations for caregivers who were critical to the well-being of residents. Allowing a family member or a designated caregiver to be able to access the resident to provide that care during those times helped to improve their health and wellbeing. As health care providers, our members understand the importance of visitation for residents experiencing physical and/or cognitive decline or severe emotional distress.

We hope that we are all spared from having to experience another pandemic in our lifetime. However, should that day come, we hope to learn from where we have been these past two years. We believe HB120 provides a framework for future emergencies affecting our older adult population. Importantly, it defers to federal guidance from the Centers for Disease Control & Prevention, the Centers for Medicare & Medicaid Services, and other regulators, to ensure providers are not caught in the middle of conflicting regulation. The bill also provides the ability for the nursing homes and assisted living facilities to require any screening or testing protocols, to continue to protect their residents and staff members from the risk of infection. Finally, it offers important assurances to family members that will be able to have access to their loved ones if they are in need of compassionate visitation.

Thank you for your consideration of HB 120, and we respectfully request passage of the bill.