Robert G. (Bob) Bethell Joint Committee on HCBS and KanCare Oversight
December 15, 2020
Chairwoman Brenda Landwehr

Chairwoman Landwehr and Committee Members:

I am Tony Johnson, Chief Operating Officer for Recover-Care Healthcare and hold the position of Vice President of Government Affairs on the KHCA Board of Directors. The following bullets provide an overview of our company's Kansas operation:

- Recover-Care operates 18 skilled nursing facilities 2 Assisted Livings, 1 Independent housing, and one hospital in Kansas.
- Our footprint extends as far north as Highland, as south as Conway Springs, as far west as Salina and as East as Shawnee, Kansas.
- We operate 1400 licensed beds
- Employ 2100 employees and approximately 250 contractors.
- Did not have first outbreak in our facilities until late July.

I want to thank the Chair and the Committee for hearing my testimony on the impacts of COVID-19 in Long-Term Care. I will share with you first-hand experiences, lessons learned, observations for future policy to strengthen Long-Term Care as we continue to battle COVID-19 and thoughts on life in the post-COVID world.

I want to focus my testimony today on the issues of COVID Management/Prevention and staffing.

I. COVID-19 Management and Prevention
   a. COVID has exposed our weaknesses across all sectors.
   b. No playbook.
   c. Providers left to innovate and apply protocols to prevent early spread.
   d. Inconsistent and inaccurate guidance from Public Health Officials.
      1. Nobody wanting to decide and deferring to another government entity.
      2. Admission bans, quarantine edicts, and testing directives all inconsistent, even within the same county.
      3. Banning admissions in facilities with no actively infected residents.
      4. CMS put out aggressive testing guidelines before providers could get the testing kits.
   e. Survey
      1. 37 infection control surveys, 5 completed by Federal surveyors.
      2. Only 2 deficiencies issued.

   f. PPE procurement has been akin to the Wild West.
      1. Early on, PPE would go to the highest bidder and would be redirected while in transit to another customer.
      2. We have spent an extra $600,000 on PPE through October.
      3. Johnson County has been a fantastic resource in obtaining PPE.
      4. Doniphan and Douglas and County have recently reimbursed us for PPE.
      5. COVID tests cost $1000 for a box of 30.

6. N95 Masks still difficult to obtain. Fit testing kits has been challenging.
   g. Potential solutions:
1. Centralize command of the county guidance for consistency.
2. If central command is not feasible, create a clear line of appeal to higher authority for consult and guidance.
3. Regulatory reform to support innovation, infection control, good patient care, not paper.
4. Regulatory support should be just that, not armchair quarterbacking and creating more paper compliance
5. Rate enhancement to support costs associated with additional qualified caregivers and resources to redesign facilities.

II. Staffing
   a. Before pandemic, it was difficult to recruit qualified caregivers. C-NAs make an average $26,000 year. Nurses prefer hospital/clinic environments due to higher wages and less regulatory oversight.
   b. COVID has made it difficult to recruit/retain staff.
   c. Agencies are hijacking caregivers by offering high wages and passing the cost along to us.
   d. Possible Solutions:
1. Encumbered monies to providers to invest in strengthening the LTC workforce.
2. Continue to promote the hero's work here program to bring public appeal to this noble profession.
3. Set limits on what staffing agencies can charge to slow wage inflation.

I ask that we take this opportunity to reshape the future of long-term care by regulatory reform and rate enhancements to strengthen our workforce and protect the most vulnerable Kansans. We are willing to work together for months and years to improve Long Term Care.

Thank you for your time and consideration.

Sincerely,

Anthony Johnson

Tony Johnson
Chief Operations Officer
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