



Government Affairs

Public Relations

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Testimony offered in SUPPORT of SB68

John J. Federico, JD; Federico Consulting, Inc.

On Behalf of AARP

House Health & Human Services Committee

March 14, 2017

Chairman Hawkins & Committee Members,

Thank you for the opportunity to appear before you today in support of SB68, The CARE Act. This bill is a simple attempt to bring a standard, minimum protocol to hospital admissions across the state when a patient chooses to include a caregiver. The bill essentially does 3 things: (1) it requires that the patient be asked if there is a designated caregiver and if so, the caregiver's name is recorded into the patients record, (2) the hospital is required to notify the caregiver if the patient is to be discharged, and (3) the hospital shall provide aftercare instructions to the caregiver, along with the patient.

The AARP has worked with the KHA in an attempt to find consensus on this legislation. And with the addition of the language in the Senate Committee, we believe we have reached a compromise. Upon passage of the legislation, the AARP, as they have done in other states, pledges to work with the KHA on a joint education campaign for consumers.

The bill is drafted broadly by design in an attempt to accomplish our goal, yet still put forth reasonable language. Versions of the CARE Act have passed in 35 states thus far, including the surrounding states of Colorado, Nebraska, and Oklahoma (MO is currently considering the measure). The vote total on the CARE Act in our surrounding states was 265 in favor and 6 opposed. In Kansas, SB68 passed the Senate by a total of 38-1.

This bill benefits the patient, the caregiver, and the state. There is no cost to the state nor the hospital facilities. I ask for your support, and look forward to working with you on behalf of the growing number of volunteer caregivers across the state.



Please SUPPORT SB68 (The Lay Caregiver Act)

I respectfully ask for your support, on behalf of the 320,000 volunteer caregivers across Kansas. This is an extremely reasonable bill that benefits the patient, the lay caregiver and better healthcare outcomes at times of stress and confusion.

What The Bill Does

In short, the bill simply sets a minimum standard protocol when a patient is admitted to the hospital and identifies a caregiver. The hospital then has a responsibility to **(1)** notify the caregiver if the patient is to be moved, and **(2)** notifies the caregiver, along with the patient, of any discharge instructions. (If a patient does not have a designated caregiver, there is no further responsibility of the hospital)

The Need

In spite of the assertion that “this is already being done,” it is NOT being done consistently across the state. This legislation is necessary to set a minimum standard protocol to help the patient AND the caregiver.

Other Support

To date, 35 states have passed a version of the CARE Act, with over a dozen passing the bills unanimously. The surrounding states of OK, CO, & NE passed the bill with vote totals of 265-6.

Cost

There is NO COST to the state, nor the hospital to implement this simple bill. There is evidence to show that it will SAVE the state money (Medicaid \$) by reducing hospital readmissions due to a designated caregiver also receiving discharge instructions in better care of the patient.

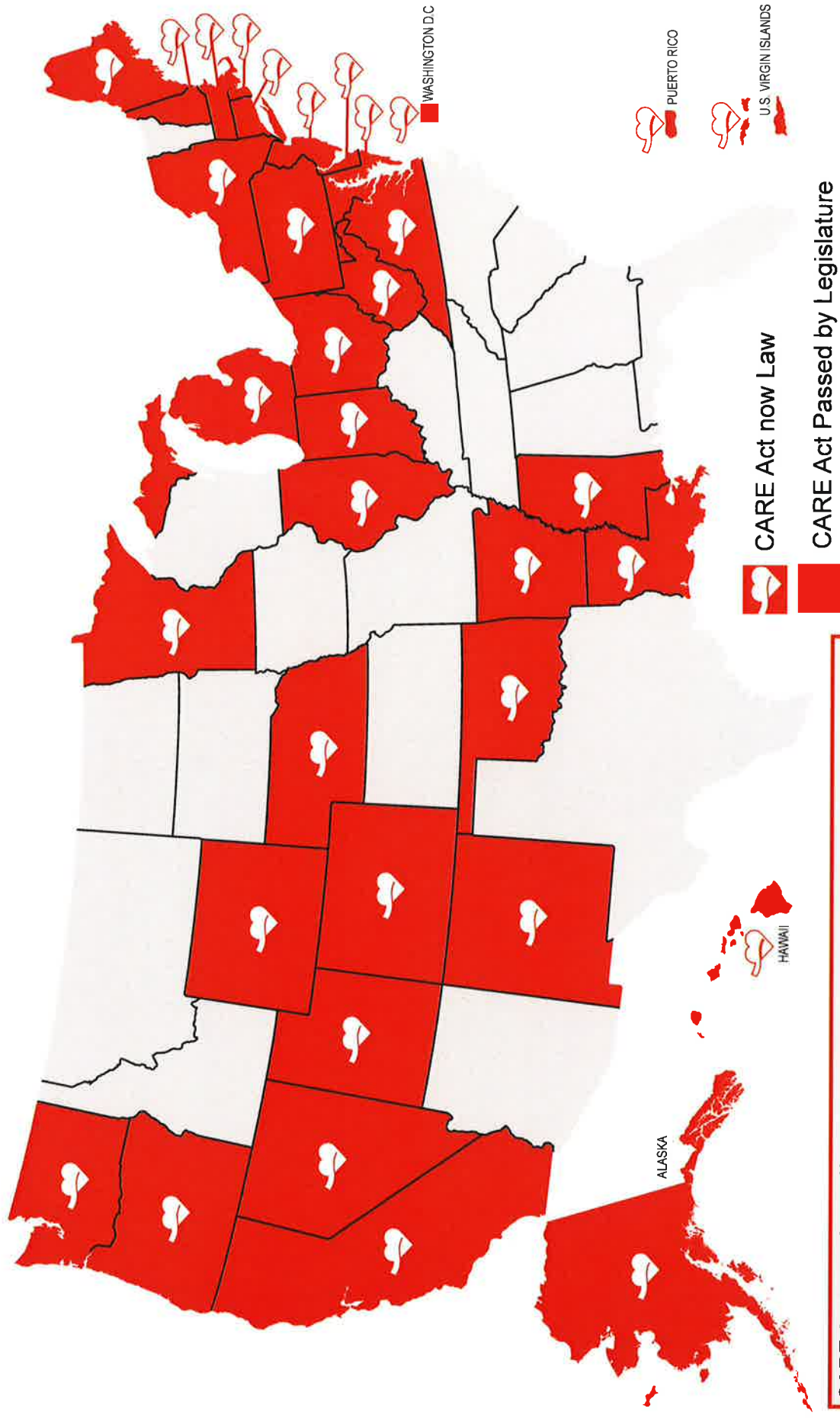
Protections/Limitations of the Bill

There is no obligation to the hospital if the patient chooses not to identify a caregiver. This is not a punitive bill and language in the bill **protects the hospital** from lawsuits and licensure penalties from KHDE & the Board of Healings Arts for non-compliance. Also in the spirit of compromise, language was added to the bill to delay implementation to July 1, 2018.

**IF ANY QUESTIONS OR CONCERNS PLEASE CONTACT JOHN FEDERICO
AT 785.554.6866 OR johnfed@cox.net. Thank you for your consideration.**

The Caregiver Advise, Record, Enable (CARE) Act

The CARE Act is a commonsense solution that supports family caregivers when their loved ones go into the hospital, and provides for instruction on the medical tasks they will need to perform when their loved one returns home.



CARE Act goes into effect:
Oklahoma, 11/5/14; Colorado, 5/8/15; New Jersey, 5/12/15; West Virginia, 6/8/15; New Mexico, 6/17/15; Mississippi, 7/1/15; Virginia, 7/1/15; Arkansas, 7/22/15; Connecticut, 10/1/15; Nevada, 10/1/15; Maine, 10/15/15; Puerto Rico, 12/31/15; California, 1/1/16; Indiana, 1/1/16; New Hampshire, 1/1/16; Oregon, 1/1/16; Illinois, 1/27/2016; Utah, 2/10/16; Rhode Island, 3/1/16; Nebraska, 3/30/16; Virgin Islands, 3/30/16; New York, 4/23/16; Washington, 6/9/16; Wyoming, 7/1/16; Washington D.C., 7/6/16; Michigan, 7/12/16; Louisiana, 8/1/16; Maryland, 10/1/16; Alaska, 1/1/17; Delaware, 1/1/17; Minnesota, 1/1/17; Pennsylvania, 4/20/17; Hawaii, 7/1/17; Massachusetts, TBD; Ohio, TBD

***Updated on 12/31/2016



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