



Americare™

Robert G. (Bob) Bethell Joint Committee on HCBS and KanCare Oversight

December 15, 2020

Chairwoman Brenda Landwehr

Chairwoman Landwehr and Committee Members:

I am Della Ribordy, Regional Director of Operations for Americare and Vice President, Secretary/Treasurer for the Kansas Health Care Association Board of Directors.

As you can see in my written testimony, Americare has a footprint of 17 care communities in Kansas, 13 of those are skilled nursing and the remaining 4 being our assisted living campus.

Community	Employees	Payroll	Property Tax	Kansas Income tax paid
Eureka Nursing Center	53	\$1,647,006	\$24,542	
Galena Nursing Center	58	\$1,854,424	\$13,378	
Heritage Health Care	57	\$2,257,252	\$39,933	
Hilltop Manor	62	\$1,699,241	\$20,301	
Moran Manor	42	\$1,175,763	\$5,201	
Montgomery Place	36	\$1,168,980	\$14,943	
North Point	67	\$1,993,123	\$19,742	
Osage Nursing Center	45	\$1,696,137	\$31,948	
Pleasant Valley Manor	59	\$1,717,234	\$14,013	
Quaker Hill	47	\$1,651,756	\$18,161	
Sabetha Manor	44	\$1,315,711	\$9,260	
Wheatland	48	\$1,619,614	\$16,772	
*Carrington	19	\$467,773	\$30,890	
*Monterey Village	40	\$485,322	\$136,258	
*River Bend	18	\$579,928	\$30,816	
*Waldron Place	39	\$479,082	\$52,827	
Grand Plains	53	\$1,800,000		
Total	787	\$23,608,346	\$478,984	\$155,620

\*denotes multiple care level without Skilled Nursing campus

Thank you, Chairperson Landwehr and Committee Members, for the opportunity to share the experiences we have had during this time of the COVID-19 pandemic. I will attempt to convey the difficulties, victories and tragedy that we have been through and is ongoing.

There are two primary issues that the pandemic has laser focused to our top priority, that of staffing and business loss.

- I. Staffing – lack of numbers of C.N.A., nurses and director level nurses
  - a. During the time of the pandemic, we have lost 8 of our Directors of Nursing in the skilled division of Americare.

- i. The regulations and experience
    - ii. Frightened about liability
    - iii. The job is too hard
    - iv. There are not enough staff
  - b. Across the 13 communities, I have 70 open positions
  - c. The issues was present prior to COVID-19, the data shows that our vacancies have tripled
  - d. Solutions
    - i. Proper funding for Medicaid
      - 1. Improve and stabilize the wages for staff, especially C.N.A.
      - 2. Don't make Medicaid reimbursement to SNF standardized
- II. Special funding for the Pandemic, CARES and SPARK
  - a. Source 309
  - b. Restrictions
    - i. Lost business
    - ii. Closure and consolidation
- III. Navigating through the process
  - a. Reporting
  - b. Local entities
  - c. Nature of the environment

We need the resources to improve the wages for the frontline caregiver and as well for there to be a change of heart in the value of the services that we provide in Long Term Care Facilities (LTCF). The first the legislator has control over and I ask that you strongly consider what can be done to improve the reimbursement for our LTCF through the Medicaid program. Can any of these tranches of pandemic funding be simplified so that we can stabilize the business losses that we are experiencing? In our situation, I will likely be closing at least one if not two Communities in the state. This will have a negative financial impact to 100 employees in Kansas and 80 residents. Some might say that is a small number, I just ask you this, what if it were your mom?

Thank you so much for the opportunity to speak about the concerns that have been noted regarding response, coordination and funding.

Della Ribordy, RN, LNHA  
[dribordy@americareusa.net](mailto:dribordy@americareusa.net)  
913-207-5109