Dear Ms. Weidman:

I am writing on behalf of my organization, Phoebe Ministries, which is based in Allentown, Pennsylvania. Phoebe is a non-profit organization, affiliated with the United Church of Christ, that has been providing care and services to seniors in Pennsylvania for over 100 years. Phoebe already operates three Personal Care Facilities in Pennsylvania, among many other services ranging from home-based geriatric care management to skilled nursing services. We are evaluating the proposed regulations for Assisted Living licensure, and are very concerned about several proposed regulations that we would ask you to reconsider. They are as follows:

1. The proposal does not include any means of additional publicly funded reimbursement to AL facilities. There are many low-income Pennsylvanians who would require care in an AL facility who would be denied admission simply due to a lack of funds to pay privately.

2. The proposed licensure fee is extremely excessive. Proposing a $500 fee plus a $105 per bed assessment is prohibitive to many providers. The proposal would put PA at or near the most expensive in the nation. It seems like this fee is simply being proposed to cover the cost of additional licensing surveyors, which we feel is a core function of government. Currently, the highest fee required to renew a Personal Care Home Facility is $50. Under these proposals, a 100 bed facility would pay $11,000 for a license renewal.

3. We agree that each facility should own a handicapped accessible vehicle, however not every resident requires a vehicle that is accessible. Requiring that every facility owned vehicle be handicapped accessible is very burdensome, and may cause facilities to simply decide not to provide any transportation to their residents.

4. Requiring that an administrator be present 40 hours per week is excessive especially given the number of CEU's required throughout the year. This doubles the requirement of Personal Care Homes, and ensures that an administrator cannot serve in both a personal care home and an AL facility. Since the regulations so closely mirror each other, and the proposals allow for a facility to be licensed as both, under the same roof, 20 hours should be sufficient.

5. Since AL facilities are required to provide 3 full meals per day, requiring a kitchen area with hot and cold running water in every unit, could be excessive. A shared or "country" kitchen area would adequately meet the needs of residents.

6. It is not clinically necessary to have a Registered Nurse complete assessments and support plans, and will significantly increase costs associated with operations. Having an RN review and validate could be reasonable, but requiring the direct supervision of an RN is not warranted.

7. The proposed regulations allow for a resident to rescind the contract for up to 72 hours after signing, which is appropriate. However, it also allows for a resident to rescind upon receipt of the initial support plan. Since the initial support plan is not required to be completed for up to 30 days post admission, allowing a resident to rescind after this amount of time is burdensome. Given that the resident is given the opportunity to have input into their own care planning, this is unnecessary.
I greatly appreciate the opportunity to share my views with you. If you have any questions about these issues that I raise, please feel free to contact me at 610-794-5131.

Very truly yours,

Scott R. Stevenson
President/CEO

SRS:dab