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I am a resident, Deputy Director, Office of self-funded CCRC at a small, self-funded CCRC with a 52 bed nursing home. It is not a large managed care facility, so at many places are. When we come to Footwear, we generally are living independently. As we age, we know we might spend part of our years in the nursing facility. Consequently we are well aware of the status of care in that facility. Many of us visit their residents and we first hand the level of attention and care at Brimley receive.

We want that level of care to continue. Several years ago, Footwear was a nursing facility withdrawn from Medicare funding because our program of care, if anything, exceeded the level prescribed, and the amount of time required to fill our staff (which guaranteed) would take a qualified nurse out of rotation, thus lowering the level of care.

Footwear is a transient community. We come here because we know as we age we will get the best of care. No amount of form filling will help. We receive no funds from Medicare / Medicaid to cover additional expenses. Improving those funds on a small facility will only one thing: increase the cost of care by at least \$125,000.

We at Footwear should be exempt from Federal Medicare regulations imposed on us by the state of Pennsylvania.

Sincerely,
Kathleen M. Mahony