

Support Access to High-Quality Managed Long-Term Care

Managed long-term care (MLTC) plans and Programs of All-Inclusive Care for the Elderly (PACE programs) arrange and pay for the long-term care (LTC) services provided to approximately 374,000 older adults and people with disabilities eligible for Medicaid in New York. These plans and programs assist some of the most vulnerable New Yorkers to live in the community by providing robust nurse-led care management, arranging a custom-tailored set of LTC services, and supporting post-acute transitions from hospitals and nursing homes to the community. By arranging for community-based services for individuals who would otherwise require a higher level of care, these organizations enhance the quality of life of their members, while helping to reduce overall Medicaid costs. **At least 89 percent of each MLTC's premium must be spent on services** for members. Plans that spend less than the required amount must remit the difference to the State.

MLTC plans and PACE programs sponsored by not-for-profit LTC providers play a special role that combines a mission-driven orientation with experience in meeting the needs of older adults and people with disabilities. Partnerships between not-for-profit plans and LTC providers benefit consumers by facilitating access to services on a local level. The advantages of these partnerships are apparent in the high satisfaction ratings consumers give their MLTC plans. Despite a persistent, statewide staffing crisis that has made delivering care in the community especially challenging, the most recent Department of Health satisfaction survey found that nearly 90 percent of MLTC members rated their plan as good or excellent. Notably, 94 percent of members rated their plan as good or excellent in allowing them to remain in their home rather than requiring nursing home care.

LeadingAge New York requests the following budget actions:

Reject Proposed Elimination of the MLTC Quality Pool and Restore Prior Year's Cut: The Governor's budget proposes to eliminate the MLTC Quality Incentive Program. Currently funded at \$44.8M (all funds), the pool provides qualifying plans with resources to support value-based payments to providers, rewarding high-quality providers (primarily licensed home care services agencies) and providing additional supports to enrollees. This cut is particularly objectionable as it disproportionately hurts high-quality plans and providers. The pool was cut by \$60M in State Fiscal Year 2024-25.

Preserve Partial Cap MLTC and the Access It Has Created – Reject S.2332: Although not in the Executive Budget, this proposal is being advanced by some advocates as a money-saving measure. It would eliminate partially capitated MLTC (serving nearly 311,000 older adults and people with disabilities) and replace it with fee-for-service coverage or enrollment in an integrated plan. The proposal overestimates any savings that might be associated with the program's elimination and underestimates the cost and potential loss of access associated with shifting to a fee-for-service system. Advocates forget that, prior to the expansion of MLTC in 2012, when personal care was primarily reimbursed through the fee-for-service system, it was rarely approved and often unavailable in counties outside of New York City. In the absence of MLTC plans, no entity would be held accountable for developing networks of providers and securing access to services.

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