

## MEMORANDUM

S.2928 (Rivera)

*An act to amend the public health law, in relation to payments for personal protective equipment for home and community based long term care services.*

Legislation S.2928 (Rivera) would require payment of claims submitted under contract or agreement with Medicaid Managed Care and Managed Long Term Care (MLTC) plans for home and community based long term services and fiscal intermediaries to include reimbursement for expenses relating to the provision of Personal Protective Equipment (PPE) for direct care workers and care recipients, and for an emergency inventory of a 90 day supply of PPE. Under the bill, such reimbursement must be in addition to base rates of payment and supplemental to current contracts or agreements.

LeadingAge New York providers are on the front lines of care during the COVID-19 State of Emergency and have struggled to obtain appropriate supplies of PPE during this crisis. Adequate PPE - masks, gowns, face shields, and gloves -- are critical to containing the spread of the virus and protecting both patients and staff. This is particularly true in long term care, both congregate and home based, as the people served are chronically ill and have multiple serious underlying health conditions, making them particularly prone to infection and serious complications from COVID-19.

Obtaining and paying for PPE has been left largely to providers, with some support from state, local and federal government. These government sources, however, very often come up short, and providers receive only a fraction of their stated PPE needs. Providers have had to resort to suppliers offering PPE at exorbitant prices or scramble to obtain donations, while implementing strategies to conserve or reuse PPE and operationalize delivery of care to minimize the spread of the virus.

LeadingAge New York urges the state to make available adequate funding for the purchase of PPE for long-term care providers and their patients and residents. While this bill focuses solely on home care providers, we believe this initiative should extend to all categories of long term care providers and patients, including nursing homes, adult care facilities, and home and community based providers.

The State should adjust reimbursement rates for long term care providers, both under Medicaid fee-for-service and managed care, to address increased PPE expenses associated with the COVID-19 crisis. In its current form, this legislation puts the financial burden for PPE largely on MLTC plans without providing funding to support the mandate. This is not a viable solution to this challenge. MLTC plans cannot be expected to bear the cost of purchasing PPE without adequate funding through their premiums. Their rates have been subject to deep Medicaid cuts for the past three years and, most recently, plan rates were dropped to the bottom of the actuarially-sound range and subject to across-the-board cuts.

All long-term care providers need help from the State in confronting the many challenges COVID-19 presents. This is not a burden for plans and providers to face on their own. Both fee-for-service and managed care Medicaid rates need to be adjusted to address the additional expenses generated by this crisis. We urge the Legislature to consider the costs of this mandate and propose a more feasible plan, through Medicaid rate and premium adjustments, to help the long term care system effectively address these challenges and continue to care for the vulnerable patients and residents we serve.

**For these reasons, LeadingAge New York opposes S.2928 (Rivera) as it is currently written.**

LeadingAge New York

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