

# HOME AND COMMUNITY-BASED SERVICES

SENIOR HOUSING | ASSISTED LIVING | ADULT CARE FACILITIES | HOME CARE | RETIREMENT COMMUNITIES ADULT DAY HEALTH CARE | PACE/MLTC | NURSING HOMES | CCRC

### Protect Home and Community-based Services (HCBS)

## Ensure Adequate and Timely Reimbursement for Home Care Providers by Restoring MLTC Cuts and Ensuring Medicaid and MLTC Rate Adequacy

Medicaid rates paid to managed care plans must be adequate to allow plans to in turn pay home care providers adequate rates to cover the costs of providing quality patient care, employee benefit expenses and operating and administrative costs. The insufficiency of Managed Long Term Care (MLTC) rates has threatened the viability of providers, many of whom rely on plans for the majority of their revenue. Rate updates need to be timely to ensure providers are not waiting to be reimbursed for monies they have expended. *Our request: The Legislature should restore the Governor's proposed \$51 million in cuts to the MLTC program, and ensure plans have updated rates to provide needed reimbursement to home care providers.* 

**Reinstate and Level Fund the Nursing Home and Transition Diversion (NHTD) Medicaid Waiver Housing Subsidy** The Executive Budget Proposal moves the Nursing Home and Transition Diversion (NHTD) Housing Subsidy program to the "Health Outcomes and Advocacy" pool of programs, with aggregate funding reduced by 20 percent. The subsidy supports waiver participants to remain in the community for as long as possible with safe, affordable housing. If the housing subsidy were reduced, waiver participants would be at greater risk of nursing home placement. *Our request: Restore the NHTD Housing Subsidy as discrete line item, funded at \$2.4 million.* 

**Support the TBI/NHTD Carve Out of Medicaid Managed Care:** A.2442 (Gottfried)/S.1870 (Hannon) would allow individuals with traumatic brain injuries (TBI) or who qualify for nursing home diversion and transition (NHTD) Medicaid waiver services to continue to receive such services outside of managed care programs. There are no cost savings associated with moving TBI/NHTD into managed care. Given the significant programmatic changes absorbed by Medicaid Managed Care and Managed Long Term Care plans in recent years, the interests of all stakeholders would be best served by focusing on current populations and benefits. *Our request: Support this legislation.* 

#### Invest in Workforce Recruitment and Retention

LTPAC providers are experiencing workforce shortages that have led to thousands of authorized home care hours going unfilled, and ongoing recruitment and retention issues for nursing homes, assisted living and adult care facilities. These shortages have resulted in long waiting lists for community-based services, increases in emergency room (ER) visits and hospitalizations, and reliance on overtime and staffing agencies. The Legislature should ensure that the DSRIP workforce funding is distributed to LTPAC providers in need, that other available workforce recruitment and retention funds are made available for LTPAC services, and that a comprehensive plan is developed to meet the demand for LTPAC services. *Our request: Increase the Workforce Recruitment and Retention funding and develop a comprehensive plan across the long term care continuum to meet the demand for long term care services and supports for elders.* 

LeadingAge New York 13 British American Blvd., Suite 2 | Latham, New York 12110-1431 | P 518.867.8383 | F 518.867.8384 | www.leadingageny.org

#### Inspire Serve Advocate

#### Invest in Community Services for the Elderly (CSE)

The proposed budget continues a \$1 million increase for the Community Services for the Elderly (CSE) program, removes the 25 percent county share exemption and consolidates transportation funding within the CSE program. Removal of the 25 percent waiver is a cost shift to local governments, who are already constrained under the property tax cap. This could result in the inability to accept the additional CSE dollars that were enacted over the past few years and result in fewer older New Yorkers receiving vital services. Further, moving the \$1.1 million from the transportation line to the CSE line now subjects all of that funding to the local match, putting these critical services in jeopardy. There are already over 15,000 older adults statewide on waiting lists for critical community based aging services. \$24 million is needed to meet the demand for these critical services. *Our request: Provide \$24 million for CSE and reinstate the 25% county share exemption.* 

#### **Protect Federal Title XX Funding for Seniors**

New York State receives \$98 million in annual Federal Title XX funding that is allocated to counties. Of this amount, \$66 million is set aside for Adult Protective and Domestic Violence Services, \$5 million supports training activities for county and State staff, and \$27 million is for all other services, which counties can use at their discretion to fund certain services. The budget would require the \$27 million for all other services to be used to support Child Care subsidy costs, enabling the State to maintain the current level of child care subsidies while reducing General Fund costs for the program. Federal Title XX funds have been used to support senior centers for decades. These centers provide vital nutrition, socialization and health promotion activities to seniors. *Our request: Protect the Title XX funding for senior centers.*