Rew York PACE / MANAGED LONG TERM CARE

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

Support Consumer Choice and Access to High-Quality Managed Long-Term Care

Managed long-term care (MLTC) plans manage and pay for the long-term care (LTC) services provided to more than 300,000 older adults and people with disabilities eligible for Medicaid in New York. Partially-capitated MLTC plans, as well as plans that combine Medicare and Medicaid services (Programs of All-Inclusive Care for the Elderly (PACE) and Medicaid Advantage Plus (MAP)), assist some of the most vulnerable New Yorkers to remain in the community by providing robust care management, arranging a custom-tailored set of LTC services, and supporting post-acute transitions from hospitals and nursing homes to the community. By delivering the health care services and supports in the home for individuals who would otherwise require nursing home care, these organizations enhance the quality of life of their members while helping to reduce overall Medicaid costs.

MLTC plans and PACE programs sponsored by not-for-profit LTC providers play a special role that combines a mission orientation with a wealth of experience and expertise in meeting the needs of Medicaid beneficiaries. They help to strengthen our LTC system by facilitating access to an array of customized, community-based services for this population on a local level.

This orientation allowed plans to step up their care management activities and telehealth and telephonic connections during the COVID-19 emergency to serve as critical lifelines to ensure that homebound seniors received the home care services they needed. MLTC plans also increased home nursing and personal care services for members whose adult day health and social day programs were unavailable during the public health emergency. They ensured that their members had access to necessary supports even if their usual formal or informal supports had faltered while helping beneficiaries to coordinate post-acute, COVID-related health services.

Despite disruptions precipitated by the pandemic and a persistent, statewide staffing crisis that has made delivering care in the community especially challenging, the most recent satisfaction survey found that nearly 90 percent of MLTC members rated their plan as good or excellent, comparable to pre-COVID percentages. 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. It is especially important to maintain stability for this vulnerable population during the course of the public health emergency unwind.

LeadingAge New York requests the following Budget actions:

Block Enrollment Minimums and Competitive Procurement of MLTC Plans. The Governor's Budget would require MLTC plans to have a minimum of 20,000 enrollees and/or 5,000 enrollees in an integrated Medicare or Medicaid product, by Oct. 1, 2024, in order to renew their authorization to deliver MLTC services. If an "insufficient" number of plans meets these and other requirements, the Department of Health (DOH) will conduct a competitive procurement of MLTC plans. This proposal appears designed to exclude plans operated by non-profit LTC providers. Most of the MLTC plans sponsored by non-profit LTC providers do not meet the enrollment thresholds proposed in the legislation. The proposal seems destined to result in a heavy reliance on large insurers that focus on *non*-elderly, *non*-disabled populations, and the specialized expertise and commitment of our MLTC plans sponsored by non-profit LTC providers will be abandoned to the detriment of consumers and providers. Moreover, this proposal will limit consumer choice and disrupt established relationships between consumers and providers and plans.

Reject the Proposed Elimination of the MLTC Quality Pool. The Governor's Budget would cut funding to MLTC plans, including PACE programs, by \$103.5 million (all funds) by eliminating the MLTC Quality Pool. The MLTC Quality Pool incentivizes the delivery of high-quality LTC services and supports value-based payment (VBP) initiatives with LTC providers. This cut disproportionately affects high-quality plans and the high-quality providers that may receive incentives through MLTC plans' Quality Pool distributions. Notably, current Quality Pool funding already reflects a 25 percent reduction enacted in the 2020-21 State Budget.

Earmark Percentage of Capital Transformation Grants For LTC and Ensure PACE Programs Are Eligible. LTC has been underrepresented in awards under prior Transformation rounds. At least 25 percent of the new technology/telehealth pool and at least 30 percent of the other capital pool should be dedicated to LTC. PACE programs should be specified as eligible for funds.

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

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