



Don't Slash Medicaid Funding for ADHC Providers: Support High-Quality Community-based Care for Vulnerable New Yorkers

\$ 5 billion cut in already inadequate Medicaid LTC rates will hurt consumers

Adult day health care (ADHC) programs are cost-effective, community-based programs that provide skilled nursing services, case management, personal care and therapies to individuals in a congregate setting. ADHC programs serve adults with disabilities, adults with mental illness, frail elderly and chronically ill during the day so they can remain living in the least restrictive environment, their home.

ADHC programs have been proven to reduce emergency room visits, reduce hospital admissions, reduce falls and delay nursing home placement. ADHC programs are especially valuable in areas of the state where there are few community-based long-term care options and limited workforce.

ADHC SHOULD NOT BE TARGETED FOR CUTS

MRT II is tasked with slashing \$2.5B in Medicaid (state share) without impacting local governments or reducing Medicaid eligibility and benefits. If the Legislature fails to enact the \$2.5B in savings proposed by the MRT, the Executive Budget authorizes DOB to direct any uniform across-the-board reductions to Medicaid payments needed to achieve the \$2.5B state savings target.

- No high-quality, well-managed provider should be forced to close due to inadequate rates.
- A \$5 billion cut in already inadequate Medicaid long term care rates will hurt registrants.
- Wages, utilities, gas, food and supplies increase every year. ADHC providers haven't received a rate increase in eight years.
- ADHC programs continue to take a hit on transportation. Transportation rates for Method 1 providers have not been increased in 11 years.
- ADHC providers already took a 1% reduction of Medicaid payments effective Jan. 1, 2020.

TRANSPORTATION

ADHC providers are very concerned MRT II will attempt to carve non-emergency transportation out of rates of payment to ADHC programs. Under the proposal, transportation services would instead be managed through the State's transportation broker, Medical Answering Services (MAS). **The Legislature successfully defeated the Governor's proposal for the past four budgets.** Even though ADHC programs lose money with every trip, 70% of programs choose to manage transportation themselves instead of turning that responsibility over to MAS.

- Medical Answering Services (MAS) is a remote operator less familiar with local conditions and the frail elderly and disabled individuals served by community-based ADHC programs.
- MAS does not offer or reimburse for matrons, individuals who are trained to provide supervision and personal care to registrants during transport.
- This proposal would disrupt the care and attention registrants receive from our vendor drivers. ADHC drivers have a special relationship with registrants that grew from years and years of reliable service. Our drivers, and the trained matrons, are an extension of the care we provide.

QUESTIONS Please contact Anne Hill: 518-867-8836 or ahill@leadingageny.org.