



STATE OF NEW YORK
LEGISLATIVE COMMISSION ON RURAL RESOURCES

October 13, 2011

James Introne, Deputy Secretary for Health
Executive Chamber
State Capitol
Albany, New York 12224

Jason Helgerson, Deputy Commissioner
Office of Health Insurance Programs
NYS Department of Health
Corning Tower – Empire State Plaza
Albany, New York 12237

Eli Feldman, Co-Chair
Carol Raphael, Co-Chair
MRT Workgroup on Managed LTC Implementation and Waiver Redesign
C/o NYS Department of Health
14th Floor, Corning Tower
Empire State Plaza
Albany, New York 12237

Dear Mr. Introne, Mr. Helgerson, Mr. Feldman and Ms. Raphael:

As Chair and Vice Chair of the Legislative Commission on Rural Resources, we are writing to express our support for inclusion of the Long Term Home Health Program (LTHHCP) as a care coordination model for long term home care in the MRT.

The Legislature specifically and explicitly included LTHHCPs in the 2011 final budget agreement due to its clear and recognized track record as a provider-based care coordination model and long history of success in effectively managing care for nursing-home eligible patients. It is important that LTHHCPs remain a distinct care management option.

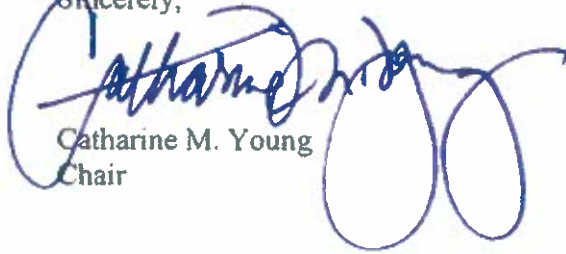
LTHHCPs have achieved the goal of maintaining low rates of hospitalization and institutional care, and its patient-based care coordination has proven effective for those receiving these services. This track record reflects the experience of LTHHCPs across New York State, including those operating in New York's rural areas.

Particularly for those in rural communities who face unique access challenges, it is important that LTHHCPs remain a care coordination program option. It is equally important that the MRT does not adopt care coordination guidelines that will restrict the models for patients in need of long term home care under Medicaid to insurance-based models. While not the sole model of care, LTHHCPs should be included as a specific care coordination program option for consumers and their communities, especially in areas of the state where other long term care resources may be limited.

We look forward to the MRT achieving its goals of reforming the Medicaid program to make it more cost-effective, while at the same time preserving the necessary services that meet the unique challenges of rural regions and populations.

Thank you in advance for your consideration.

Sincerely,



Catharine M. Young
Chair



Aileen M. Gunther
Vice Chair