



December 3, 2024

Amir Bassiri
Deputy Commissioner and Medicaid Director
Office of Health Insurance Programs
New York State Department of Health
One Commerce Plaza
Albany, NY 12210

Via E-Mail

Re: Comments on Career Pathways Training Program and MBI-WPD Proposed Amendments

Dear Mr. Bassiri:

I am writing on behalf of LeadingAge New York, an association of non-profit and government-sponsored long-term care and aging services providers, to offer support and comments on the proposed amendments to the State's 1115 Waiver in relation to the Medicaid Buy-In for Working People with Disabilities (MBI-WPD) Program and the Career Pathways Training Program.

Career Pathways Training Program

LeadingAge New York supports the proposal to increase backfill cost coverage under the Career Pathways Training (CPT) Program and recommends two additional amendments to the Program. The expansion of backfill coverage from 2 days per week to 5 days per week will assist providers and their patients, when CPT trainees are participating in program-related classes or other activities. The current 2-day per week limit on backfill costs will not allow for coverage of employees enrolled in more time-intensive coursework and may disincentivize participation. It may also exacerbate current workforce shortages among health care providers. A 5-day backfill component would support broad participation, access to care, and appropriate levels of staffing in all health care settings.

In addition to this amendment, LeadingAge New York urges the State to propose two additional amendments:

- 1. Add certified nurse aide, home health aide and personal care aide titles to the titles eligible for support under the CPT Program.**

We recommend that the State seek to amend the CPT Program to include training of home health aides (HHAs), personal care aides (PCAs), and certified nurse aides (CNAs) – personnel in extraordinarily high demand to serve our state's growing population of older adults. The waiver invests \$646 million in the CPT program to develop health care personnel in 14 job titles, but excludes these long-term care aide titles which are among the health care titles in shortest supply. According to a 2024 study conducted by the Center for Health Workforce Studies, 94 percent of nursing homes and adult care facilities reported difficulty recruiting CNAs and HHAs, and 67 percent of home health agencies reported difficulty

recruiting HHAs.¹ Severe workforce shortages in the long-term care sector are forcing nursing homes and home care agencies to limit admissions and maintain waitlists.² This is not only depriving consumers of needed care and forcing them to seek care in facilities far from loved ones, it is also prolonging their hospital stays, creating gridlock in hospitals, and forcing emergency departments to go on diversion.

Given the tremendous and growing need for their services, the CPT Program should also include training and supports for individuals who are seeking certification as home health aides, personal care aides, or certified nurse aides.

2. Allow Individuals who are Currently in LPN, RN or Other Qualifying Education Programs to Participate in the CPT Program

It is our understanding that individuals who are enrolled in an LPN, RN or other qualifying education program prior to registering for the CPT Program are ineligible for financial or other supports through the CPT Program. This is short-sighted. Many individuals enrolled in these programs experience difficulties in completing them, due to financial, academic, and/or personal challenges. With the support offered by the CPT Program, these individuals may be able to overcome barriers that would otherwise be insurmountable and receive their degrees or certifications. Moreover, in light of the short timeframe allotted for completing the Program, it would be helpful to include individuals who have already completed their application processes and been admitted to academic programs.

MBI-WPD Program Expansion

We support the proposed amendment related to the MBI-WPD Program, including the expansion of income and resource thresholds and the elimination of the age limit for participation. The MBI-WPD allows individuals with disabilities to work and maintain financial independence, while retaining their Medicaid coverage, despite earnings and/or resources that would otherwise exceed Medicaid limits. Medicaid coverage is often essential to enable individuals with disabilities to work, since private health insurance typically does not cover all of the services and supports needed to live independently in the community. For example, commercial health insurance typically does not cover long-term personal care. Medicaid is the primary payer for long-term services and supports (LTSS) to address physical, cognitive or behavioral health conditions and assist with activities of daily living.

Under the current eligibility thresholds, program participants must carefully limit their earnings and savings to avoid losing the Medicaid coverage that supports their employment. They may have to turn down promotions and/or have to spend money that they would otherwise save for future needs. As a

¹ Martiniano R, Romero A, Pang J, Akeju O, Kang B, Allegretti M. *The Health Care Workforce in New York State: Trends in the Supply of and Demand for Health Workers*. Rensselaer, NY: Center for Health Workforce Studies, School of Public Health, SUNY Albany; April 2024.

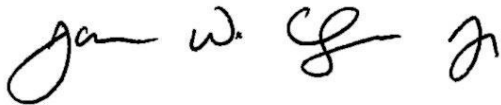
² For purposes of evaluating compliance with nursing home staffing standards, Commissioner McDonald has declared an acute labor supply shortage of certified nurse aides, licensed practical nurses, and registered nurses statewide through the second quarter of 2023. See [Commissioner's Determination on Acute Labor Supply Shortage](#), Jan. 12, 2024.

result of the current limits, individuals with disabilities are prevented from accepting opportunities to advance in their careers and from saving for the future. At the same time, employers lose the opportunity to fully utilize the expertise of program participants in higher level, higher paying positions. And, the federal, state, and local governments lose incremental tax dollars that program participants would have paid based on higher income or property ownership.

The proposed waiver amendment would expand eligibility by increasing the Medicaid income and resource levels for MBI-WPD enrollees, deeming income and resources of legally responsible relatives as unavailable, and including those working past the age of 64. It would also restructure the sliding scale premiums for participants. These changes will help to optimize the ability of individuals with disabilities to live independently and realize their career goals, while contributing to the cost of their care.

As always, LeadingAge New York is eager to inform and participate in the implementation phase of this waiver.

Sincerely yours,

A handwritten signature in black ink, appearing to read "James W. Clyne, Jr.", written in a cursive style.

James W. Clyne, Jr.
President and CEO

Cc: Kimberly Hill
Chloe Coffman
Amanda Lothrop
Valerie Deetz
Carol Rodat