

HCA CHHA Advocacy Sample Talking Points for HCA Members

Below are talking points for HCA CHHA funding advocacy to use along with the attached HCA one-page advocacy document (also to send, or if you meet in person, to leave behind with your Assembly Member or Senator or their office staff).

It is also *strongly recommended* that you prepare and cite data from your agency on the # of patients and families you serve, # of staff you employ, services you provide, unique role you play in your community, including patient examples. This not only this helps show the significance of what you do in the district, it shows what is at stake should your services be lost.

Introduction Upon Call or Visit:

- My name is Mary Smith and I am with the "First Choice" Home Health Agency that serves patients direct care workers in your legislative district.
- Could I please speak with [Assembly Member or Senator] or a member of his/her legislative staff about an important concern for these services to his/her constituents?

When connected with the official or member of the staff:

- Repeat Intro - My name is Mary Smith and I am with the "First Choice" Home Health Agency that serves [#] patients and employes [#] clinical staff nurses, therapists and direct care workers – in your legislative district.
- The patients we serve live in [INDICATE THE AREAS]. Our main office is located in [CITY].
- "First Choice" is a state and federally certified home health agency. A certified home health agency, like ours, is an agency that has a unique role in the community and for patients. It specializes in providing highly skilled and therapeutic in-home services, caring for your constituents of all ages, and ranging in patients from maternity and neonatal care, to pre- and post-surgical patients, to adults with complex medical conditions like diabetes, heart failure, COPD, wound care, hip and other fractures, pneumonia care, and cancer and other specialty care.
- We work with the hospitals [name some of them] and physicians in the community to provide individuals skilled medical care in their homes and communities, keeping people from being hospitalized or entering nursing homes, or caring for them after hospitalization or medical emergency so that they can be discharged home safely to heal and recover with the needed in-home medical management. A certified home health agency's services like ours save huge costs for individuals, the taxpayers, and public programs like Medicare and Medicaid.

Advocacy Points – CHHA Background/Status:

- I'm calling today to ask your legislative help. The funding for the urgent services that agencies like ours provide to your constituents is years off the mark; we have been faithfully serving more and

more patients, who have greater and greater needs, with proportionally less and less funding for the services required and for the nurses and clinical staff who deliver them.

- Although for years there have been no stabilizing funds for certified home health agencies like ours in the state budget, we have pressed on, again doing more with less; but we have reached the point where the care we provide that your constituents and the local health system depend upon now need your faithful help to sustain.
- I'm asking for your [or your Assembly Member or Senator's] support for legislation and funding in the 2025 State Health Budget that will sustain our ability to serve the constituents and communities of your district. This is an initiative that will support certified home health agencies with annual aid such as is provided for other health sectors like hospitals and clinics. The program for this is already in the public health law, but needs to be updated and funded.
- The Home Care Association of New York State (HCA) is working on a bill with Assembly Health Chair Amy Paulin and Senate Health Chair Gustavo Rivera that will pave the way for the law update and the budget support needed for our services.
- I would like to send you a brief description of this legislation, and what it means for patients and communities.
- I'm asking for your [or your Assembly Member or Senator's] co-sponsorship of this critical legislation.

Follow-up Comments

- It would be a privilege to tell you more about our agency, our services, the constituents we serve (a patient story) and those we employ, or to answer any questions that you have about this legislative and budget support of our services that is so vitally needed.
- As November is National Home Care and Hospice Month, we would greatly welcome the opportunity for you to visit and celebrate with us, or better, to schedule a visit to the home of one or more of your constituents that we serve, to truly experience the care we provide, the staff who care for them, and what this all means to the constituents served.

See next page for HCA CHHA Funding Initiative One Pager

PASS & FUND STATE AID FOR CERTIFIED HOME HEALTH AGENCY SERVICES TO MEET COMMUNITY NEEDS FUND AT \$70M STATE/FEDERAL SHARE

HCANYS
Home Care is healthcare.

CERTIFIED HOME HEALTH AGENCIES IN YOUR COMMUNITY NEED YOUR SUPPORT!



Certified Home Health Agencies (CHHAs)

- Are a core part of the health care delivery system
- Deliver essential health, medical, therapeutic, and life-sustaining care for about a half million NYers - 50% of all NY home care cases.
- Patients are maternal, infant and pediatric; pre- and post-surgical; pre-, post-acute care and rehab; clinically complex; public health; and more.
- Services include: Registered Nurses, Licensed Practical Nurses, Physical/Occupational/Speech Therapists, Nutritionists, Registered Dietitians, Medical Social Workers, Certified Home Health Aides, Remote Patient Monitoring, Care Management, medical supplies, and other supports.

What Needs to be Done

1. Pass and fund in the 2025 state budget, legislation to update the public health law mechanism (Sections 3606 & 3615) for annual state aid to certified home health agencies to meet community need across all regions of the state. This mechanism and funding are supplemental to the rate process.
2. Essential needs to fund include: increased service capacity and access; services to high-risk, high-need and diverse populations; under-served areas and populations; health disparities; recruitment, training and retention of nurses and essential workers; specialized training; technology; and more.
3. This legislation will bring home care into parity with other sectors (e.g. hospitals, clinics) receiving public pool funding outside the rate process for vital public need.

Currently, the majority of NY's CHHAs are functioning well below sustainable fiscal margins, and are without the funding needed for the capacity to meet the current, and substantially rising, demand for care.

52% of CHHAs had a negative operating margin in 2021 across all payors.



CHHA closures have impacted **6,237** patients through **16** upstate counties since January 2024.

CHHAs reported an average accounts receivable of **120 days outstanding.**



20% of CHHAs reported opening opening a line of credit or tapped investments to pay for operating expenses in 2023.

-24.6% est. change in home health access from 2019 to 2023 in NYS.

188,000 Medicare enrollees who needed but did not receive home health care 2020 - 2023.

Because CHHAs function as part of the vital continuum of care for patients, CHHA underfunding greatly exacerbates the crisis in the overall health delivery system, including the overcrowding of emergency rooms, difficulty transitioning patients to post-acute service, ability to conduct preventative care in the community, and ability to keep patients out of nursing homes and more. This targeted investment in CHHAs will reduce overall costs in the health care system and improve care and access for patients.

Data sources: HCANYS 2024 State of the Industry Report; and VNS Health 2024 Health Studies

Contact Us



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