

Urgently Fund The State Aid for Home Health Community Need Program

Update and fund the statutory provisions in public health law for State Aid to Certified Home Health Agencies to Meet Community Need across NYS regions. Accomplish by incorporating A.1493 (Paulin) language in the Health and Medicaid Article VII budget bill (see attached initiative) and the associated funding at \$70 million (combined federal/state shares) for underserved populations and regions, staffing including nursing, and technological support.

- The Executive Budget provides over \$500 million in new funding for all major health provider sectors, but completely overlooks home health for the third successive year. Demand for skilled home health care is substantially increasing, while funding has eroded to the point of unsustainability and diminished access. Current HCA data studies show 58% of CHHAs providing services at steep and worsening losses. The omission of home health from the Executive budget proposal is unjustifiable, inequitable vs the support being provided to the other sectors, and jeopardizes the operation of the balance of the health care.

Hospital at Home

Modify the Executive's proposal to require that the program be provided under a collaborative relationship between the acute care hospital and an Article 36 state certified/licensed home care provider for the in-home acute and post-acute care components; also, consider targeting funds under Transformation Safety Net Program to support the development and hospital-home health collaborative rollout of the program.

Home Health & Hospice Workforce

Support the below-listed Executive budget health workforce proposals, with modifications. The Executive proposals include: the nurse licensure compact (support); the Nurses Across NY program (modify to add \$2M dedicated for the home care and hospice sectors), expansion of the Increasing Training Capacity in Statewide Health care Facilities grant program (modify to include and create parity for home care and hospice in this program). HCA also recommends amending language to require the NYS Department of Health (DOH) to adequately reimburse health plans and providers for the 2025 Minimum Wage increase, and to incorporate the NYS Preceptor Stipend Program (A.2331 McDonald) into the Health or Education Article VII budget bill.

CHHA Episodic Payment System

Support the Executive proposal for continuation of the CHHA episodic payment system, with modifications (aligned with S.4791-B Rivera/A.7460-A Paulin of 2024) that add flexibility to the methodology, update the rates, and support adequate CHHA rates by payors beyond Medicaid. The current methodology is not responsive to costs over the base year (outdated since 2013-15), nor to any emerging staff, wage or operational factors, nor been adjusted for trend factor in over 15 years.

Support Hospice Funding

HCANYS supports the Executive proposal to increase hospice funding. We further recommend that disbursement of the funds be direct to the hospice agencies and not based on Medicaid service claims only, as this greatly under-represents hospice's service base. (HCA current data studies show 40% of hospices providing services at a loss.)

MLTC/PACE

Reject the Executive's proposed elimination of the quality pool funding.

Nursing Home Transition and Diversion Program (NHTD)

Reject the Executive's proposed enrollment cap on the NHTD program. NHTD is currently an essential option in the delivery system.

Consumer Directed Personal Assistance Program (CDPAP)

While CDPAP is not currently addressed in the Executive Budget, HCANYS looks forward to legislative efforts to support this vital program.



Home Care
is healthcare.