

## 2019 JOINT LEGISLATIVE BUDGET HEARING

January 24, 2019

Thank you for the opportunity to testify on the impact of the 2019-20 Executive Budget proposal on older New Yorkers and the aging services network in New York State. My name is Ann Marie Maglione and I am the Legislative Chair of the Association on Aging in NY, and the Director of the Orange County Office for the Aging. I would like to thank Chairwoman Weinstein and Chairwoman Krueger for chairing these hearings as well as extend our appreciation to Senator May and Assemblyman Bronson for their strong leadership on aging issues.

The Association on Aging in New York, also known as AgingNY, represents the 59 mostly county-based Area Agencies on Aging (AAAs), which are local Offices for the Aging. AgingNY strongly advocates for our older New Yorkers and works closely with the AAAs and New York State Office for the Aging (NYSOFA) to assess changes within the aging environment and develop educational and training programs to strengthen the service network. The coordination of services, training, and funding, assist older New Yorkers to live independently in their homes and communities of choice and provide support to their caregivers. The AAAs and our network of 1,200 community based partner organizations are aware of the many social determinants to health and work hard to address the needs of older New Yorkers and their caregivers in a coordinated and holistic manner. The services provided by the aging network support healthy community-based living, address prevention, and help delay, and possibly prevent the need for more medically intensive and costly health care services. Examples of these intensive and costly health care services include avoidable hospital readmissions, ER visits, and nursing home admissions.

The ever-expanding 60+ population, coupled with more complex needs of those who are 75+ and 85+ has put a strain on New York's aging services network. In 2015 20% (3.7 million) of NYS residents were 60+ years old for the first time in history, due to longer life expectancies and the aging baby boom generation. This "age wave" will accelerate throughout the next three decades. *By 2025, 33 counties will have 25% or more of their population over the age of 60.* With more people living longer than ever before, New York State faces opportunities and challenges that necessitate a delivery system that evolves, that incentivize earlier interventions, and that adequately funds the services provided by the aging network.

### **Thank You for Your Support**

I would like to take this moment to thank Governor Cuomo for his unwavering dedication to our aging New Yorkers. His leadership resulted in New York being recognized as the first age-friendly state in the country, and his continued support of the prevention agenda, is creating healthier communities and individuals across New York State. In the Governor's 2019-2020 Executive Budget, he is adding \$15 million dollars for the Expanded In-home Services for the Elderly Program (EISEP). This increase is unprecedented, and the results will be felt in thousands of homes across the State.

### **Home Care Crisis**

As you are well aware, every county in New York State is experiencing a home care shortage that places the autonomy of individuals at-risk and increases utilization of higher cost care such as emergency rooms and nursing homes. Thousands of older New Yorkers are on waiting lists for home care due to a lack of

access to aides and inadequate funding to the network of area agencies on aging and their subcontracted licensed home care providers. A recent report by the Paraprofessional Healthcare Institute (PHI) found that nearly 9 in 10 home care workers are women, and their median age is 45. Nationally, home care workers earn a median income of \$13,800 which results in a high poverty rate among home care workers. On the average, the family caregiver spends an estimated \$7,000 per year in out-of-pocket caregiving expense, resulting in a loss of \$600,000 in earnings and benefits over their lifetime. The additional \$15 million in EISEP program funds will help the network address the home care crisis.

### **Expanded In-home Services for the Elderly Program (EISEP)**

The EISEP program helps older New Yorkers age in place within their homes, through the use of case management to help connect with non-medical in-home services such as home delivered meals, personal emergency response systems, and respite for their caregivers. EISEP is a lifeline for older New Yorkers who are not Medicaid eligible and prefer to live, with supports, at home and remain contributing members of our communities. We are thankful that the Governor and you, our legislators, recognize the importance of maintaining individual choice and preventing or delaying spend down to Medicaid and entry into a nursing home. This additional funding will create more jobs to fill the needs of the ever-increasing aging population **in every county** across NYS.

By utilizing this flexible funding streams such as EISEP, AAAs can possibly negotiate higher reimbursement rates for the home care agencies, with the understanding the increased dollars would be used to provide higher salaries to recruit and retain workers. Currently, many aides drive at least an hour to the client and often are not provided a full day of home care hours. We will be able to provide these workers with gas cards as their transportation to and from a client's home is not compensated. It is imperative that we have a host of options available to help those who are in need of home care. Thank you again Governor for proposing to increase EISEP to over \$65 million.



### ***Stories of their Lives***

Mrs. S was referred to OFA by her husband to find out what services were available as she had early onset Alzheimer's disease and he was her caregiver. She was 61 years old at the time and he was 67. They had been happily married for 38 years lived at home. Mrs. S was prescribed medication to help with the dementia and anxiety. Mrs. S had been a school teacher along with her husband, which was how they met. Their adult children lived out of state and were unable to help with care. They were interested in Home Delivered Meals as Mrs S could no longer prepare meals for them. They were also interested in the Social Adult Day Care Program (SADC). A complete COMPASS assessment was completed for both of them by the caseworker assigned. Initially, Mrs. S began attending the Social Adult Day Care Program 1 day per week and over time, increased her attendance to 3 days a week. Both began receiving Home Delivered meals 3 days a week. She thoroughly enjoyed attending the SADC program and this provided much needed respite for her husband. Her husband also was provided Caregiver Services available to him through OFA. He was (and remains) a very caring and attentive caregiver who made sure his wife was engaged in her community and led a full life. They went to local plays together, attended Yankee Games, concerts, Super Bowl games, went to the US Open, visited 48 states and also went on trips together with the local Johnstown Senior Center. A partner agency was able to arrange in home respite for his wife which was supplemented by private hire aides to help as their income allowed. Using these services he was able to keep his wife home, safely, for quite some time. As the disease progressed and Mr. S found it very difficult to care for his wife at home, and Mrs. S was placed in a Nursing Home four years after we met her. Estimated Savings: \$104,268.50; Cost of Social Adult Day Care and other OFA arranged support for a year= \$8,881.60; Nursing Home cost for a year= \$113,150.

As a network, we are working locally to find innovative ways to address the caregiver shortage. One example of this is that in Orange County my office is working with Mount St. Mary College to place second year nursing students with seniors for Personal Care I services. These nursing students will visit the senior in their home and help with basic housekeeping needs and provide a much-needed human connection to address isolationism and loneliness that we see too often.

### **Priorities for the 2018-19 Budget Include:**

#### **NYSOFA to Reinstate AgingNY's Education & Technical Assistance Program Funds (\$250,000)**

A real and urgent concern to AgingNY and the AAAs is the \$250,000 that NYSOFA has removed from their 2019-2020 budget that supports AgingNY's educational and technical assistance programs and services. Funds are used to survey AAAs to determine specific training and educational needs and then secure specific trainings to meet the needs of the AAAs. The primary areas where funds are utilized include: Case Management training for AAA staff to provide knowledge & strengthen the capability of the aging network to support our older New Yorkers; Business Acumen training, which strengthens partnerships and contracting opportunities with health care providers/systems and other payers; and New York Health Insurance Information Counseling and Assistance Program (HIICAP) Counselor Certification. The requests for support from certified HIICAP counselors continue to grow and cutting this service will have a direct, and negative financial impact on the older New Yorkers who use this service. In the past two (2) years alone, AgingNY's HIICAP program has certified 1,533 counselors, representing all counties in New York State.

AgingNY's *case management* services provides AAAs and their staff access to customized case management certificate training to address the knowledge, skills, and values essential for competent practice as a case manager. The case manager is the person conducting assessments and assisting older New Yorkers in obtaining the supports they need to remain independent. The case manager may connect them with home delivered meals, personal emergency response systems, arrange for transportation to medical appointments, refer them to partner agencies for services, and arrange for respite for their caregivers. AgingNY works with the Center for Aging and Disability Education and Research at Boston University to provide this case management training. This educational component assures that all case managers have the same basic core competencies across the state.

*Some Business acumen* training is made possible through these training dollars. Business Acumen training prepares AAAs to develop business strategies and engage in coordinated contracting models with the health care system. As New York State moves toward an integrated value-based payment system, the quality services that AAAs have fine-tuned over the years to assist older adults can be used to improve outcomes within the health care provider systems. It would be regrettable if the training dollars under this \$250,000 line ends, just as the AAA business acumen training is starting.

The Health Insurance Information Counseling and Assistance Program (*HIICAP*) *Counselor Certification Program* provides folks with the training and certification they need to offer confidential counseling and assistance to help Medicare beneficiaries and their families solve medical coverage problems. The Medicare system can be difficult to navigate and is complicated for many of our elders. As part of the Centers for Medicare & Medicaid Service's Quality Assurance Initiative, New York's HIICAP Program implemented a policy in 2012 requiring all HIICAP Coordinators, counselors and volunteers to complete and pass a Counselor Certification exam to ensure a standard level of knowledge prior to counseling. *The removal of these \$250,000 educational and technical assistance program funds will have a devastating effect throughout the AAA network, so please advocate for NYSOFA to reinstatement of AgingNY Education & Technical Assistance Program funds.*



### *Stories of their Lives*

This is the story about Mrs. H., a 91 year old widow who was referred for home delivered meals after a recent hospitalization. During the home visit assessment, Mrs. H. and her son raised concerns about recent and future medical bills. When she became Medicare-eligible at age 65, she declined enrollment in Part B due to having an Employer Health Plan. Upon retirement, she did not enroll in Part B because the premium was high. Now several years later, she needs Part B, but was told she would have to wait until the Annual Enrollment Period to enroll and she would have a significant penalty. The OFA caseworker, who is also a trained HIICAP counselor, screened Mrs. H for Medicare Savings Program (MSP) during the home visit and worked with the son to complete required documentation. It was also recommended to contact the hospital about applying for charity care for outstanding medical bills. When the OFA caseworker/HIICAP counselor followed up, DDS denied eligibility for Part B and said that even if she was eligible, she would have to pay a penalty. The OFA caseworker/HIICAP counselor explained to the local DSS Medicaid worker that Mrs. H was eligible for Part B and that MSP would eliminate the penalty. The OFA caseworker requested assistance from the Medicare Rights Center to advocate for the client and eventually Mrs. H. was found eligible for MSP and enrolled in Part B with penalty eliminated.

Estimated savings: Part B premium with 150% penalty = \$4,020+/year; Part B medical coverage – estimated \$8,852/year\*. Additionally, Mrs. H. was found eligible for the hospital charity care program. All of her recent hospital bills were taken care of in full (\$1,400) and she was eligible for charity care for 12 additional months with estimated savings of \$3,900 for future medical care.

We are very thankful to our legislators and the Governor for making state funding for aging services a priority. The record increases received over the past few years, speak to your unwavering dedication and care for New York's older citizens. Especially important is the increase in funding you secured for Community Services for the Elderly (CSE) last year. Your leadership ensures that thousands of older adults received home delivered meals, case management, personal care services, transportation to medical appointments and much needed respite, such as social adult day care, for their caregivers. Your support has truly made a difference in the lives of older New Yorkers and their families and we are grateful.

### **Community Services for the Elderly (CSE)**

We are requesting an additional \$19 million in funding in the 2019-20 budget, for a total of \$50 million, without the local match for CSE to support critical programs simply to meet the growing needs of older New Yorkers. As we are all aware, thousands of older New Yorkers are in need of community-based services offered through local area agencies on aging and their local partners. CSE funds are used for a wide array of programs and services that help older New Yorkers maintain their autonomy and independence, as well as for caregiver respite. These services include: assistance with daily activities such as bathing, dressing, eating, shopping, preparing meals, bill paying, case management, home delivered meals, transportation, and adult day services, among others. The unmet needs of older New Yorkers continue to grow as a result of the demand generated by both an increasing aging population and expanded awareness of these community-based programs. In a study conducted by Syracuse University for AgingNY, it's been identified that over 28% of Older Adults that are 60 and over are living with at least one disability and are in need of Long Term Care Services; that number jumps to over 42% for those adults who are 65 and older, living with at least one disability.

### **Health Insurance Information and Counseling and Assistance Program (HIICAP)**

We are requesting \$2.5 million dollars for 2019-20 funding, which is an increase from \$1 million. We indicated earlier, the HIICAP program helps older New Yorkers navigate through the complicated Medicare health care system. HIICAP is available for Medicare beneficiaries and their families, at no cost,



regarding Medicare, Medigap and other long term care insurance. HIICAP Counselors are the only certified Medicare counselors and are available to help explain medical benefits and coverage; review Medicare supplemental insurance and long term care insurance; and make appropriate referrals for Medicaid, Medicaid buy-in, and other related benefits. Assistance is also available to help process doctor and hospital bills, prepare health insurance claims and file Medicare appeals. While the open enrollment period is October to December, volunteers spend thousands of hours on the phone assisting people with their health insurance options throughout the year. *Approximately 250,000 older New Yorkers received counseling through HIICAP last year – saving older New Yorkers millions of dollars.* With 11% of older New Yorkers living below the Federal Poverty Level and over 15% living above the Medicaid level but still ineligible for certain public benefits, it is important to expand HIICAP counseling services to reach all older New Yorkers in need.

### **Long Term Care Ombudsmen Program**

We are requesting \$3 million in this year's budget 2019-20 funding, an increase from \$1.19 million. The Long Term Care Ombudsman Program is an advocate and resource for older adults and persons with disabilities who live in nursing homes, assisted living and other licensed adult care homes. Certified Volunteer Ombudsmen help residents understand and exercise their rights to good care in an environment that promotes and protects their dignity and quality of life. The program advocates for residents by investigating and resolving complaints made by or on behalf of residents; promoting the development of resident and family councils; and informing government agencies, providers and the general public about issues and concerns impacting residents of long-term care facilities. Additional funding is needed in order to adequately and appropriately provide these vital services for these residents.

### **NY Connects/No Wrong Door System Sustainability**

Thank you Governor Cuomo for maintaining the \$41.476 million – existing two year funding in the Medicaid Global Cap. The NY Connects/No Wrong Door is a locally coordinated system of specialized information and assistance on long term services and support options for the age 60 and older population, individuals of all ages with physical disabilities, the informal caregiving population regardless of payer source and providers of services (e.g. discharge planners). The core functions of the NY Connects system include information and assistance; benefits and application assistance; systems integration and advocacy; convening local Long-Term Care Councils; and an ongoing public education campaign to promote the community based services available. New York has spent years building this multi-agency, cross systems approach to service access and has invested in this system utilizing federal and state dollars. In order to ensure NYS residents continue to have access to this system as their needs change, a total of \$25 million annually must be allocated under the Medicaid Global Cap.

### **Our Commitment**

AgingNY is committed to working with Governor Cuomo and the Legislature to support New York's designation as the first 'Age-Friendly' state in the nation by doing our part to ensure our aging New Yorkers have the supports they need to maintain independence in their homes and live healthy lives. The community-based long term care services provided by the 59 Area Agencies on Aging and the 1,200 community base partner organizations are essential to reaching this achievement. We continue to need your help and sincerely thank you again for your support. These important hearings allow us to initiate a conversation about issues of critical importance to older New Yorkers and their families.