

February 22, 2021

Testimony to the Joint Legislative Health Budget Hearing on the 2021-22 Executive Budget proposal

Hello and thank you for the opportunity to provide testimony on behalf of the New York Association on Independent Living (NYAIL). NYAIL represents Independent Living Centers (ILCs) and the people with disabilities they serve. NYAIL leads statewide ILC efforts to eliminate physical, communications, attitudinal, and other barriers to all aspects of life. Over the past year, COVID-19 laid bare the dangers of institutionalizing people in nursing homes and other congregate care settings. Never has it been more important for the State to commit to the principles of Olmstead by funding vital programs that protect the rights and advance the State's community integration efforts for people with disabilities. Investing in the below priorities would show real leadership from the State in providing safer and more desirable options to seniors and people with disabilities and would help save lives. We urge the Legislature to take action in the 2021-22 budget as outlined below toward the full integration of New Yorkers with disabilities.

• Ensure access to home care, personal care and consumer directed personal assistance for all who need it by enacting the Fair Pay for Home Care Act, which would increase wages for home care workers to 150% of a region's minimum wage.

Over the past decade, New York has been increasingly facing a home care crisis where aging and disabled New Yorkers are too often unable to access the home care services for which they are eligible due to the lack of home care workers and personal assistants (PAs). This crisis will only worsen as the demand for home care increases.

COVID-19 highlighted the very real dangers that have long existed in nursing facilities. Now the general public is finally realizing what Independent Living advocates have known for years - nursing homes are not a safe place, and they are seeking better options. In fact, there is early proof that they are correct. In a recent study published in the Journal of the American Medical Directors entitled <u>Community-Based Long-Term</u> <u>Care Has Lower COVID-19 Rates and Improved Outcomes Compared to Residential</u> <u>Settings</u>, a Connecticut study showed significantly better outcomes for people receiving community-based services. Over the five month study, more than 1 out of 3 or 37% of nursing home residents tested positive for COVID. Only 2 to 3% of people receiving Home and Community Based Services (HCBS) tested positive. The percent of people in the study in nursing homes who died of COVID-19 was 11%, as opposed to less than 1% of people in the study receiving HCBS. This early data demonstrates that people are at a significantly lower risk of contracting the virus than those living in nursing homes or other institutions.

The State should be prioritizing access to home and community-based services as the answer to the tragic deaths in facilities during the pandemic. NYAIL has long advocated for better wages for home care workers. The home care shortage in New York is primarily due to falling wages. Fifteen years ago, home care workers and PAs earned approximately 150% of minimum wage. Today, most workers receive minimum wage or just above. Meanwhile, as wages increase in other sectors, it is increasingly difficult to find people willing to do this work. People working in fast food restaurants earn significantly more than most home care workers. Yet, home care is not minimum wage work. It is physically and emotionally demanding work that is critical to the health and safety of hundreds of thousands of New Yorkers.

A <u>new report by the CUNY School for Labor and Urban Studies</u> found that over the next decade, a projected 981,900 openings will need to be filled statewide for home health aides and personal care aides. Under the Supreme Court's 1999 Olmstead decision, people have a right to live and receive services in the most integrated setting, their home communities. As such, the State has an obligation under Olmstead to ensure people can access home care. In order to do so, it is critical that the State provide a living wage to home care workers in order to attract people to work in that field.

NYAIL is a proud member of the NY Caring Majority, which is calling for the State to pass the Fair Pay for Home Care Act as the answer to the home care shortage. This would increase wages for all home care workers and PAs to 150% of a region's highest minimum wage.

• Fund the Good Neighbor Program at \$500,000/year to assist individuals lacking informal supports transition out of nursing facilities.

People in nursing facilities often lose connections to family and friends in the community. When they try to leave the nursing facility, they find that home care agencies, managed long term care plans (MLTCs) and waivers can require that they have a backup caregiver for times when personal care aides do not come. This means people who could otherwise live in the community are stuck in nursing facilities due to the lack of informal supports. The Good Neighbor program, administered by NYAIL, connects these people to Neighbors who provide back-up care as well as connection to the community. This includes visits, check-in calls, shopping and other tasks agreed upon by the person and Neighbor. Neighbors are given a small monthly payment based on region and frequency of contact. This program has been funded since January 2020 by the Mother Cabrini Foundation and has successfully transitioned 10 people, with 15 more already matched to a neighbor. The funding for this pilot program will end in June 2020. To maintain the 25 people who will have transitioned and to transition 25 more people will cost only \$500,000/year. This is a small amount compared to the cost of care in a nursing facility and insignificant when compared to the value of living independently in the community.

• NYAIL strongly opposes extending the Medicaid Global Cap, which has led to harmful cuts and limited eligibility for essential community-based services.

For the past few years, the State has sought to cut long-term care and limit eligibility to deal with a "budget shortfall" in its Medicaid program. Much of the reason for the so-called budget shortfall is due to spending simply exceeding a self-imposed Medicaid Global Cap. Essential programs and services have already faced significant cuts in recent years as a result of the cap. Just last year, the Medicaid Redesign Team II enacted significant cuts to eligibility for community-based long-term care which will ultimately lead to institutionalization and worse health outcomes for many older New Yorkers and people with disabilities. Now, due to the pandemic, the Medicaid program has grown significantly, providing essential health care and services to hundreds of thousands of additional New Yorkers. The State must reject its current austerity approach to dealing with growth in the Medicaid program and instead spend what is needed to provide comprehensive health care and services to eligible New Yorkers. In order to do so, the State needs to eliminate the Medicaid Global Cap and take factors such as an aging population and growth in the program into account.

• NYAIL strongly opposes reducing recruitment and retention funding by 50% for home care personal care service workers, certified home health agencies, long term home health care programs, AIDS home care programs, hospice programs, and managed long-term care plans.

Recruitment and retention funding was established to provide much needed additional support specifically for the purposes of training, recruitment, and retention of home care workers and personal assistants. The Executive Budget proposes reducing this funding by an additional 25% on top of the 25% cut from last year, effectively cutting this important funding stream in half. This has been an important source of funding built into the rates for providers that has enhanced the ability to recruit and retain aides. The State should not be cutting this funding stream at a time when many parts of the State have a serious aide shortage. Many ILCs act as Fiscal Intermediaries under the Consumer-Directed Personal Assistance (CDPA) program. The ability of CDPA consumers to recruit and retain aides has dropped significantly in recent years. This has forced some into institutions and has prevented others from returning home. At a time when there is still a pandemic tearing through these facilities, the State should be investing more heavily in this funding to ensure people have access to vital home care services.

If you have any questions, please contact Meghan Parker at <u>mparker@ilny.org</u>, or at 518-465-4650.

Respectfully submitted,

Meghan Parker Director of Advocacy