



CDPAANYS 2021 Budget and Legislative Agenda

Cuts to Consumer Directed Personal Assistance (CDPA) over the past two years have exacerbated problems in the long-term care system and Medicaid overall. These problems have been made worse by COVID-19, which has also laid bare long-standing issues with nursing facilities and other congregate settings. CDPAANYS' agenda addresses this with calls for investment in community-based long-term services, specifically CDPA.

To address issues highlighted by the COVID-19 pandemic, New York must reimagine long-term care and invest in community-based long-term care services, especially CDPA.

COVID-19 has shown New York must act to dramatically reimagine the way in which long-term care services are delivered. The virus caused, and continues to cause, physical, psychological, emotional, and economic harm, with disproportionate impact to the disabled, seniors, and communities of color. While thousands died in nursing homes, CDPA was proven to be extremely effective at controlling the virus, limiting community-spread due to the idea that, primarily, one worker works with one person. New York must take dramatic action to reimagine our long-term care system and build back better.

Shift the focus of long-term care from nursing homes to the community. COVID-19 did not create issues in nursing homes that did not previously exist, it exposed those that many have known of for years. The right to live independently in the community is a basic human right established in *Olmstead v L.C. (by Zimring)*. To meet this obligation, New York must:

- Repeal the carve-out of nursing home services from managed care;
- Repeal restrictions on eligibility for personal care and CDPA, including the minimum activities of daily living requirement and the "high needs clinical review"; and
- Increase investment in Open Doors, which facilitates transferring people out of institutions.

Address the workforce crisis by raising reimbursement and wages, ensuring authorized hours can be filled. New York is the epicenter of a nationwide workforce crisis home care services. The existing workforce, primarily composed of immigrants and women of color, is paid at minimum wage despite the fact that it is a skilled workforce providing high quality, compassionate care. This has severe implications for seniors and the disabled as they seek to access these services, which recently led the 6th Circuit of the United States Court of Appeals to rule that similar situations in Michigan resulting in isolation and an inability to access services were a violation of the *Olmstead v L.C. (by Zimring)* mandate. To address this crisis and restore the right to live in the community, the state must:

- Restore the 25% funding cut to the Home Care Workforce Recruitment and Retention fund;
- Increase reimbursement and wages to allow for 150% of the highest minimum wage in a region for all home care workers, including personal assistants;
- Allow for equitable reimbursement of associated administrative costs by reforming the per member, per month methodology; and
- Introducing an overtime rate to allow for consumers to allow their personal assistants to work overtime while not causing unnecessary and significant financial hardship.

Protect and expand Medicaid. Medicaid is the primary source of health coverage for over six and a half million people, including hundreds of thousands with long-term care needs. Recent changes to the program threaten access to the high quality healthcare these people rely on that promotes equity within our healthcare system. To ensure the integrity of New York's Medicaid program, New York must:

- Repeal the Medicaid Global Cap;
- Repeal eligibility cuts and assessment procedures that limit access to CDPA; and
- Enact other policies and statutes as recommended by Medicaid Matters New York.

Increase Revenues by Raising Taxes on the Ultra-wealthy - New York has one of the highest wealth gaps in the nation, and COVID-19 has exacerbated this divide. Without increasing revenues, the state cannot meet the needs of its residents. To prevent further cuts to critical services and allow for the resources that must be made to provide for investments that allow the state to once again lead on progressive thought, New York must enact taxes to ensure everyone pays their fair share.

Pass New York Health With Long-Term Care – For New York to truly rebuild its long-term care system to prevent institutionalization and focus on the community, it must make sure every New Yorker has access to high quality community-based long term services such as home care and CDPA. For millions in New York’s rapidly aging population, home care is too expensive and CDPA is not an option because it is Medicaid only. To reshape the long-term care system and provide equity, we must pass the New York Health with a long-term care option.

Increase Affordable Housing Options - A lack of affordable, accessible housing hinders the state’s ability to further strengthen community-based long-term care. Particularly in high-cost areas Downstate, there is a shortage of high-quality, accessible housing. Existing housing programs such as Medicaid waiver housing subsidies, Housing Choice Vouchers, and public housing must be fully funded, new programs established, and universal accessibility options must be required for all new buildings.

Provide Timely and Accurate CDPA Data - Cost reports are now required for both managed care and fee-for-service providers, affording more precise data about CDPA. This data must be aggregated and made publicly available to facilitate open communication and foster improvements to the program.

Fund a CDPA Peer Support Line - CDPA affords consumers control over their services, but the intricacies of the program can be complex. Financing for a CDPA peer-run information line should be established to ensure those seeking to answer questions or overcome obstacles have unbiased and accurate information from others who have used this program.

Establish a Budget Authority Model For CDPA – Budget authority self-direction, demonstrated effective within the Office for People with Developmental Disabilities, represents the next step to both complement CDPA and increase consumers’ governance over their services. New York should expand budget authority into the larger Medicaid program.

Extend the Medicaid Buy-In for Working People with Disabilities to retirees over 64 – The Medicaid Buy-In for Working People with Disabilities (MBI-WPD) empowers people with disabilities to enter the workforce without losing Medicaid coverage, but Federal law limits participation to those aged 64 and under. As people age out, their efforts to create savings prevent them from accessing the Medicaid benefits they rely on to survive. This unintended glitch in the program must be addressed.

Enact meaningful campaign finance reform – Donors who contribute thousands, or even millions, of dollars to political campaigns are drowning out the voice of seniors and the disabled. They have an outsized influence on the financing and policies of Medicaid programs. To truly reimagine long-term care and build back better, meaningful campaign finance reform must be enacted.