Goals for Home Care 2010 and Beyond

- Better utilization of State resources
- Improve quality of care
- Rationalize reimbursement system
Organizational Changes in OLTC / DHCBS

- Mary Ann Anglin, Division Director
- Lydia Kosinski, Director Bureau of Medicaid Waivers
- Rebecca Fuller-Gray, Director Bureau of Quality Assurance, Surveillance and Licensure
$5 million in 2009-2010 SFY budget to support the creation of an automated, statewide assessment instrument (UAT) for DOH home and community based programs.
A Uniform Assessment Tool will:

- Evaluate patient care needs.
- Generate care options for consumers.
- Provide consistency within regions and among programs with respect to the assessment process.
Current assessment tools are often used simply because they were available and familiar.

None of these tools have assessments based on empirically tested and validated means.

Several of our current tools are being challenged regarding their validity.
Why NYS needs UAT

- Multiple tools for service eligibility and screening: 12 or more used in LTC.
- Lack of standardization.
- Not tested for validity and reliability.
- Assessment fatigue.
Goals for the UAT

- Assessments are uniform from program to program and region to region.
- Assessment is based on validated means.
- The results of assessments are useful to developing care plans.
The Chosen Tool Will:

- When fully implemented, provide assessment for all LTC programs and services with minimum duplication and maximum consistency.
- Determine eligibility for nursing home level of care.
- Offer consistency of data to all LTC settings.
- Assess functional and clinical needs through empirically tested and validated means.
- Improve quality and consistency in assessment and care planning.
- Provide information for state policy making and oversight.
- Support values of the Omstead decision.
Important Features of Implementation

- The tool will be web-based.
- Training on the use of the tool will be provided to all assessors.
Implementation Plans

- Stage 1
  - Implement over a subset of programs
  - Implement over a subset of geography
Why the Home Care Registry?

- Required by Chapter 584 of Laws of 2008
- Ensure suitability of HHAs and PCAs
- Properly trained
- Approved for employment
- Protect vulnerable New Yorkers
Aides in Registry:
11,087 as of 10/26/09
Help Desk

YTD incoming calls: 1,754; 733 emails
How do we support you?

- Help desk toll-free number & email
- User manual available by Thanksgiving
- Quick Tips
- FAQs regularly updated
- Training – onsite & webinar
Quality Improvements within HCR

Communication:
- provider organizations, training programs, and state agencies

Functionality:
- enhancements to system performance

Usability:
- increase user functionality

Reports:
- management & user reports
Home Care Reimbursement Workgroup

- Report by December 1, 2010

  - Issues identified include:
    - Outlier policy
    - Level of funding
    - Subcontracting/Transparency
Flu Vaccine Mandate Update

- October 16: A judge issued a temporary restraining order regarding the mandatory healthcare worker vaccination regulation.

- October 22: The Governor announced that the State Health Commissioner suspended the mandatory vaccination of healthcare workers for both H1N1 and seasonal flu due to the inadequacy of the supply of these vaccines.
2020 State Budget Situation

- Majority of states saw record tax revenue drop during second quarter. (Rockefeller Institute, October 2009)

- New York hit hardest by Wall Street downturn: 20% of state’s revenues come from Wall Street.

- In New York State, revenues down over 36% for the last 3 months.

- For this fiscal year, New York State has a $3 billion budget gap.
First Quarter 2009-2010 Revenue Data

- General Fund personal income tax collections declined by $4.2 billion or 35% to $7.7 billion.

- General Fund sales and use tax collections declined by 6 percent to $2.6 billion.

- Declines are unprecedented, exceeding declines following 9/11 and recessions of the 1980s and 1990s.
Governor’s plan closes this year’s budget gap and addresses long-term structural deficit.

Proposed spending reduction plan spreads the pain without increasing taxes.

Current year reductions: $1.8 billion; $500 million administrative agency spending cuts and $1.3 billion cut resulting in a 10% across the board reduction in local assistance spending.
Next Steps

- 2009-2010: DRP actions debated in legislature.
- 2010-2011: Every program being reviewed.
QUESTIONS?

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