



## **Medicaid Redesign – How It Impacts Home Care/Personal Care**

On March 16, 2012, Asian Health and Social Service Council (AHSSC) held its monthly session at the Charles B. Wang Community Health Center located at 168 Centre Street in Manhattan. The title of the presentation was "Medicaid Redesign – How it Impacts Home Care/Personal Care".

Dr. K. Loan Mai gave a presentation titled: *Medicaid Redesign: Impact on AAPI Communities*. The New York Medicaid Redesign Team was tasked by Governor Cuomo to find ways to reduce costs and increase quality and efficiency in the Medicaid program. Medicaid is the largest health insurance program in NYS and spends more than \$53 billion annually to provide health care to more than 4.7 million people in need. In 2000, of the estimated 10 million Americans requiring long term care: about 64% are people aged 65 and older and about 37% are people aged 64 and younger. As of 2050, the need for paid long-term care is anticipated to double from 13 million in 2000, to 27 million. This estimated is impacted by growth in the population of older people in need of care. Of those needing Long-Term Care, 79% live at home or in community settings, not in institutions. And only 16% of the total hours were paid care, leaving 84% of hours to be provided by informal caregivers.

The first keynote speaker, Regina Hawkey, VP of Clinical Operations at the VNSNY CHOICE Health Plans, presented the *Mandatory Managed Long Term Care Enrollment Plan* posted by NYS DOH dated February 16, 2012. Ms. Hawkey stated that the mandatory population refers



to: dual eligible, aged 20 and over, receiving community based long term care services for over 120 days, excluding the following for now: nursing home transition and diversion waiver participants; traumatic brain injury waiver participants; nursing home residents; assisted living program participants; and dual eligible that do not require community based long term care services. There will be different phrases of how people would be enrolled in the MLTC plan.

Beginning July 1, 2012, any dual eligible case new to services, fitting the mandatory definition in any NYC county, will be identified for enrollment and referred to the Enrollment Broker for action. For those people already in service, enrollment will be phased-in by service type by borough by zip code in batches. People will be given 60 days to choose a plan according to the schedule. As plan capacity is established, dually eligible community based long term care service recipients in other counties will be enrolled according to the schedule. It's anticipated that Phase V will begin in June 2014. Final Phase will include those who are previously excluded groups.

The second keynote speaker, David "Kwai Kin" Ho, VP of Home Care Division, 1199 SEIU United Healthcare Workers East, stated that there are two types of home care workers: "living wage" workers who work for agencies contracting with NYC HRA Home Attendant Program and earn \$10 per hour; and the "subcontract" workers who work for agencies subcontracting with MLTC plans, CHHAs and LTHHCP programs and earn close to the minimum wage. One of the MRT recommendations is the "Wage Parity" law that will bring subcontract workers (HHAs) up to living wage worker levels, phased in over 2 years. Mr. Ho expected that NYS to require that MLTC plans contract with HRA agencies pay the HA posted rate in order to ensure continuity of care. Moreover, workers should be able to go with their clients without receiving lower wages or losing their health insurance.

On the other hand, there are challenges ahead which include: a) transitions and new requirements will create confusion for both clients and workers so information and communication is key; b) managed care companies will prefer that workers are certified as HHAs, not just personal care aides, which leads to more resources needed to pay for upgrade training; and c) 1199 is working with Legislature to approve new advanced aide certification recommended by Medicaid Redesign Team Workforce Flexibility Committee.

## "Agencies Sharing"

Teresa Lin, Director of the Asian Home Care Program at the Visiting Nurse Service of New York, presented its services as well as the MLTC program. Ms. Lin stated that VNSNY was established in 1893 and has now become the largest non-profit home health care company in the nation. VNSNY is committed to serving the Asian communities with its location at 2 Mott Street in Chinatown since 1999. Helen Sit, Director of Chinatown NNORC, also presented her services specially designed to serve the residents in the Chinatown community.

David Chau, representative from the CenterLight Healthcare, presented its Pace program. At its day centers members can participate in enjoyable recreational activities, make new friends and look forward to nutritious meals. In addition, the centers also offer a variety of services, including medical care, rehabilitation and other types of therapy and social work services.

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# Agenda of Monthly Meeting

## Managed Medicaid Updates, Redesign and the Impact on Nursing Home

**Date:** 4/20/2012 (Friday)

**Place:** Chinese Consolidated Benevolent Association  
62 Mott Street, NY, NY 10013, Conference Room.

**9:00** Coffee/Networking

**9:30** Welcome Remarks – Ed. Ma,  
Senior Advisor of AHSSC

**9:35** Presentation:  
**MC: Susan Wong**, Senior Advisor of AHSSC  
Kieu-Loan Mai, Ph.D., Research Consultant  
and Psychologist  
Frank Winter, Partnership Manager with CMS New York  
Regional Office of External Affairs  
Amy Torres, Residential Care Specialist, Alzheimer’s  
Association New York Chapter

**10:35** Agencies Sharing:  
CMP  
Alzheimer’s Association New York Chapter

**11:30** Closing

