My name is Derrick Ek and I am the Outreach and Systems Advocacy Coordinator for AIM Independent Living Center in Corning, N.Y. AIM provides advocacy and a wide array of services for people with all types of disabilities in the Southern Tier and Finger Lakes regions of upstate New York.

AIM has been involved with the Consumer Directed Personal Assistance Program (CDPAP) since 1997, soon after the program was launched in upstate New York. We served as a fiscal intermediary with extensive support to consumers until this year's transition to a single statewide fiscal intermediary. AIM now serves as a Facilitator agency under the new statewide FI, Public Partnerships LLC (PPL).

AIM would like to share concerns regarding two specific aspects of the transition to PPL: The equitable allocation of consumers to Facilitators, and the health insurance coverage available to personal assistants through PPL.

When the state established the statewide FI model, independent living centers were intended to play a key role, leveraging our extensive experience as providers of CDPAP and other disability services to offer program education and ongoing support to consumers and their personal assistants.

AIM has hired and trained staff across our designated service region in anticipation of a much higher caseload.

However, PPL is not actively recommending Facilitator agencies to consumers. As a result, AIM remains far short of our targeted caseload and faces the time-consuming and costly task of marketing and promoting facilitation services as prescribed by PPL in competition with other Facilitator agencies.

With the transition mostly complete, PPL should focus on the primary responsibilities of an FI, such as Medicaid billing, payroll, and benefits for PAs, and step back from the facilitation role that directly supports the consumer to manage their CDPAP services in the home.

PPL, after first giving CDPAP consumers the opportunity to choose a Facilitator, should allocate all consumers to Facilitator agencies in an equitable manner. This provides consumers with a localized, independent advocate to help them manage their home care services. It is how the new CDPAP model was intended to function.

Our second concern is that the health insurance plan provided by PPL to personal assistants is lacking. It has a high deductible and provides limited coverage, and the coverage is much less robust than what many PAs received through their FIs in the previous CDPAP model. Many PAs are older and have disabilities and chronic illnesses themselves, and quality health insurance is critical.

Furthermore, since the PPL health insurance offering is deemed "affordable" under the Affordable Care Act, PAs will be ineligible for any tax credits for better coverage through the New York State of Health marketplace.

In the long-term, this issue is likely to lead to fewer PAs available in CDPAP, exacerbating the already declining workforce. Some will leave for better health plans in other jobs, making the already difficult task of finding PAs even harder.

We urge the Legislature and the administration of Gov. Kathy Hochul to ensure that the Facilitator model works as intended, with all consumers assigned to Facilitators and ILCs playing a prominent role. We also urge PPL to invest in better health insurance for PAs. It is crucial to the sustainability of CDPAP.

Thank you for your consideration.

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