

Testimony of RiseBoro Community Partnership and RiseBoro Homecare
Before the New York State Senate Standing Committees on Aging, Health, & Labor
Senator Rachel May, Chair, Standing Committee on Aging
Senator Gustavo Rivera, Chair, Standing Committee on Health
Senior Jessica Ramos, Chair, Standing Committee on Labor

Homecare Workforce – Challenges and Solutions

Submitted by Kevin Muir, Vice President, Health
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RiseBoro Introduction

RiseBoro Community Partnership (RB) unleashes the potential of communities to thrive, no matter the odds. Since our inception as a senior services organization in 1973, RB has become one of New York City's premier multiservice agencies. We care for over 7000 seniors annually through our senior centers, housing, case management, transportation, home-delivered meals, and home care services. Additionally, we offer a broad spectrum of programs that address the Social Determinants of Health (SDOH) needs of thousands of low-income households.

RB Homecare employs over 900 home health aides to serve approximately 600 frail, elderly clients throughout the five boroughs, though our clients and home health aides alike are mostly concentrated in Bushwick, Ridgewood, Bedford-Stuyvesant, New Lots, and Cypress Hills. Most of our aides are lower-income women of color, many of whom are recent immigrants, and our clients tend to mirror the demographics of the neighborhoods they represent – mostly communities of color – and skew heavily toward older adults, many of whom have significant medical needs.

Preserving Nonprofit Workforce

The nonprofit homecare workforce is a critical resource for underserved, low-income communities. It is even more critical considering the rising numbers of older adults who generally prefer care in the community versus institutions like nursing homes. Nonprofit, community-based providers like RiseBoro offer culturally-competent care linked to other critical supportive services and provide good jobs for neighborhood residents. However, the industry is at an inflection point, with compounding external threats in the form of regulatory uncertainty, competitive pressure from for-profits, and a constrained labor market. As such, many nonprofit homecare providers are struggling to maintain adequate service levels. This threatens to create a service vacuum which will inevitably be filled by for-profit agencies that provide minimum benefits to their aides and services to their clients. In the absence of mission-driven nonprofit providers, low-income individuals that rely on home care, largely medically vulnerable older adults, will receive for-profit care that is less comprehensive, less connected to local supportive services, and less client-centered. As such, investment in non-profit providers is critical to ensuring that home care services in low-income communities remain aligned with the needs of both aides and patients.

Role of Multi-service Nonprofits and Home Care

For many years, NYS Medicaid Redesign has sought to better integrate services to reduce costs, improve outcomes and improve participant satisfaction. Multi-service nonprofit organizations like RiseBoro are in a strong position to support the goals of Medicaid Redesign by acting as a bridge integrating Social Determinants of Health (SDH) such as housing, access to food, transportation, and wellness and

prevention education with more traditional healthcare institutions such as healthcare payers, hospitals, and nursing homes. Further nonprofit homecare providers are able to leverage a wide range of additional community-based resources quickly to address emergent needs – for example, eviction prevention services and meal delivery. When offered by a single organization, these services are more organically integrated, more effective and less costly. Homecare in particular is a critical component in the continuum of holistic social and clinical care that RiseBoro provides.

It is therefore important that nonprofit providers and their workforce are supported to both grow and improve their services further. RiseBoro is particularly focused on improving quality of care as we look to a future that includes a value-based system of payment. However, improving quality of care involves costly workforce training, adequate staffing levels with appropriate skills and a reliance on technology, data and information. All of these must be fully supported either through enhanced rates or government grants.

Overtime Hours

During times of significant labor shortages, overtime hours are unavoidable for providers and the law requires that overtime rates be paid. Given the low wages current government rates dictate for home health aides (HHAs), many HHAs also seek out overtime opportunities to supplement their income. Yet overtime remains an unreimbursed expense. Overtime hours are an expected expense in any business and therefore, NYS must establish rates that include an adequate standard for the reimbursement of reasonable overtime expenses. If overtime is addressed outside of the standard rate, it should be built into provider contracts with a clear mandate for managed care plans to pay

Expand Specialized Skills Training

Existing HHA's are a critical resource already deployed and ready to meet the many gaps that exist within current systems of care. By increasing the availability of enhanced skills training in areas such as mental health, Alzheimer's, diabetes, renal disease, hospice and palliative care, etc., HHAs will develop a career ladder that will attract and sustain the workforce. Currently, NYS DOH is not allowing existing LHCSAs to expand their license to include these types of enhanced services, thereby blocking this potential workforce benefit for some at a time when it should be expanded. LHCSAs must be allowed to include specialized services in their license as required by the populations we serve.

In Support of Other Testimony

RiseBoro understands that the Standing Committees will be receiving testimony that we also support from many of our colleagues. Rather than repeating all of that testimony here, we will mention below several of other providers and groups that RiseBoro is collaborating with on these issues and whose testimony we explicitly support:

- United Neighborhood Houses
- Home Care Association of New York State (HCA)
- NYC Community-based HomeCare Working Group
- Chinese America Planning Council

Thank you for considering our requests and please contact us at kmuir@riseboro.org with any additional questions.
