



# Advocacy Day and Home Care's "Asks" Made Simple

*Some Questions You May Be Asked & How to Answer Them*

## Tips for Meeting with Legislators

- **Rely mostly on what you know: your own agency's experiences!**
  - Legislators are often most interested in hearing "on-the-ground" stories about what is happening with their constituents.
- **Feel free to leave the policy details to HCA,** unless you feel comfortable talking about them.
  - HCA can always step-in to discuss our proposals. We can also follow-up with legislative offices afterwards to field inquiries.
  - **Bottom line:** Don't be afraid to say that you are unsure about something. HCA's role is to help.
- **Use our reports.** They provide financial data about the industry. They also outline our requests of the Legislature. Review these documents ahead of time and highlight any language you feel comfortable talking about.
  - **HINT:** Think of examples from your agency that demonstrate a particular data point.
- **Remember these Buzz Words!**
  - Home care is **underinvested**.
  - Minimum wage increase is an **unfunded mandate**.
  - **Reimbursement fixes** are needed.
  - Home care needs **support under DSRIP, managed care and other new models**.

## Q&As: What Legislators Might Ask, and How to Answer

Below are some likely questions that legislators, or their staffers, may ask you during your meetings on February 2.

### **Q** *What are you here for? How can I help you? What can I do?*

This may be the first question. It's an easy one! Remember: They want to help!

- A**
1. First, **identify your agency**. Explain that it serves elderly and/or chronically ill patients in the legislator's district. You can say how many patients you serve, or how many people you employ.
  2. Explain that you are here for HCA's Advocacy Day. **Tell them your/our goal is to gain support for home care in the state budget.**
  3. Our budget request has two themes: a) **reimbursement fixes**; and b) **support/investment for home care under new models of care.**

### **Q** *What is your position on the Governor's minimum wage increase?*

A lot of energy is being spent on this issue. Legislators care how it affects your agency and staff, so you should be prepared to answer.

- A**
1. Explain the overall impact to the home care industry: **\$1.7 billion**. (You can also offer any calculations crunched for your own agency.)
  2. Stress that **you support better compensation for staff** because it helps with turnover, results in better care and rewards the great work your staff does. **(THIS IS IMPORTANT TO REINFORCE.)**
  3. However, the wage increase is a major new cost that will affect all services you provide (Medicare and private pay too). It would occur within a Medicaid reimbursement system that is capped, with **no additional reimbursement to pay for it.**



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**A** "wage increase" continued...

- Stress the enormity of this wage impact on top of an already struggling home care industry. As it is, Medicaid doesn't properly reimburse you to meet existing workforce needs. **Bottom line:** the state needs to fund existing workforce (and other) needs *in addition to* fully funding any new wage mandate.
4. Additionally, please stress your worry that **this proposal takes energy away from other urgent needs in home care**. Home care providers are already struggling, regardless of the wage increase. (Our financial condition report helps support this claim.)
  5. Note that **HCA's advocacy proposal** includes two parts. One of these calls for reimbursement fixes. These fixes would address workforce costs (including minimum wage increases) as well as other reimbursement challenges.

**Q** What else do home care agencies need?

**A** HCA's platform is outlined in our "Asks" document. This document has **two main themes**:

1. Reimbursement fixes.
2. Support for home care under new models.

Feel free to talk about either or both issues. You don't need to explain details. Just use your own experience to explain why both themes are important.

**Most importantly, explain that HCA has "legislative language" for addressing our two requests. Ask "that the Legislature include this language in the state budget."**

**Q** Can you give some examples or be more specific about HCA's proposals?

**A** *Proposal 1: Reimbursement Fixes*

You understand as well as anyone the need for reimbursement fixes to address unfunded costs you incur. Simply explain the extra costs you've experienced (i.e., workforce) or cuts that have harmed your operation (i.e., CHHA rebasing). Other areas may include:

- Increased overtime costs under the FLSA (which would only worsen with an unfunded minimum wage increase).
- Billing or payment challenges.
- The impact of the Wage Parity Law (again, only worsened by a minimum wage increase).
- CHHA rebasing.
- Inadequate funding of managed care to cover home care costs.

*Proposal 2: Support needed for home care under new models*

As far as our second theme (support for home care), you may want to explain your experience with DSRIP, managed care and other home care needs under these systems.

You can note that hospitals and other "lead entities" are getting billions of dollars to make DSRIP happen; yet home care has an uncertain role in DSRIP, after years of underinvestment.

Call attention to some specific investments or supports that would help you function under DSRIP and managed care, such as:

- We need health information technology investment so that our billing and medical record systems can "talk" to the systems being used by partners under DSRIP and managed care.
- Faster regulatory relief is needed under managed care. This would help clarify lines of responsibility and encourage home care's participation by unleashing home care's potential.

