

Memorandum of Opposition

With Recommendations



Al Cardillo
President & CEO

Alyssa Lovelace
*Director for Policy
& Advocacy*

Patrick Conole
*Vice President, Finance
& Management*

Andrew Koski
*Vice President, Program
Services & Policy*

Lauren Ford
*Director of Program
Research, Development
and Policy*

HCA, New York State's home care association, represents nearly 400 providers, organizations and individuals who collectively provide health care to hundreds of thousands of New Yorkers.

HCA members include Certified Home Health Agencies, Licensed Home Care Services Agencies, Long Term Home Health Care Programs, Hospices, Managed Long Term Care Plans, waiver programs, allied health and health management organizations, and others.

Home care provides and integrates care management and an array of clinical and supportive services for the care of individuals at home and in community. Home care provides primary, preventive, post-acute, long-term, and palliative care for individuals from newborns and children, to adults and seniors. Home care providers work with physicians, hospitals, clinics, health plans, and other health care partners to provide and manage care.

*"Helping New Yorkers **Feel Right at Home**"*

**To: Members of the New York City Council
Committee on Civil Service and Labor**

**Re: 1918-2020
COVID-19 Relief Package - Premiums for essential workers**

Date: April 26, 2020

On April 22, the New York City Council introduced a package of bills known as the "Essential Worker Bill of Rights." This legislative package contains language that would require employers to provide "premium pay" for essential, non-salaried workers, applicable to home care personnel.

The Council should withdraw this legislation that is a statutory mandate that the City has no way to finance, and that will only adversely affect the workers it intends to support and recognize.

Instead, HCA urges the Council advance its laudable intention as an adopted Resolution requesting state and federal supplemental funding for this explicit purpose of frontline worker wage enhancement.

Well before this legislation, HCA and HCA provider members have independently raised the idea of enhanced funding for home care agencies, hospices and managed long term care plans (MLTCs) compensation for all frontline workers in COVID-19. This work has been of heroic proportions.

Accordingly, HCA has asked the state Health Department to consider funding increases for home care, hospice and MLTCs for worker compensation, and recently affirmed the same enhanced funding echo the Governor's call for enhanced pay for these workers.

New York City's home care agencies, hospices and MLTCs are already facing major financial shortfalls addressing the innumerable, daily factors involved in providing care in the COVID-19 pandemic, including the exorbitant costs of personal protective equipment (which is still in great unmet need for home care and hospice in NYC), worker illness, and other severe aberrations in operations and service delivery patterns resulting from COVID.

This financial spiral is all the more reason why the goal of enhanced worker compensation should in no way be approached through the blanket statutory mandate as proposed by the NYC Council, instead be pursued through supplementation to provider and MLTC funding.

The proposed mandate is an unsupportable and unsustainable approach for home care as well as for the fulfillment of its own legislative goals. Beyond the COVID-19 payment mandate, the NYC bill goes on to mandate further unsupported and unfunded pay provisions.

Specifically, once the current state of emergency is lifted, this legislation would require MLTCs, home care agencies and hospices with more than 100 employees to pay hourly workers \$30 for a shift under four hours, \$60 for a shift of four to eight hours and \$75 dollars for any shift over eight hours. As the NYC legislation has no way to fund these new obligations, these are added reasons why NYC should

shift its approach from this mandate to a resolution calling for supplemental state and federal financing for wage support.

In many instances, providers are already paying above the mandatory threshold just to retain the workforce. Many New York City providers also report that they are already paying workers “premium pay” in recognition of heroic work. This best practice should be supported through supplemental state and federal funds.

Home care workers are providing quality care to the state’s most vulnerable populations, made more vulnerable in the COVID-19 pandemic. HCA supports increased state and federal funding to providers and health plans enhance compensation to these heroic staff. We urge the NYC Council to reconsider its legislation, and instead direct its efforts to convincing state and federal government officials to provide the supplemental financing that can best realize this goal of wage support in this urgent time.