



NEWS FROM THE HOME CARE ASSOCIATION OF NEW YORK STATE (HCA)

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New Survey of Home Care Providers Examines Workforce, Supply, Financial Impacts of COVID-19 in NYS

Findings again validate call for prioritization of supplies, Medicare home telehealth service and billing allowances to protect home care patients and staff

The Home Care Association of New York State (HCA) has again surveyed home and community-based providers in New York State – at the COVID-19 epicenter – to learn more about specific impacts of the health emergency on home and community-based services delivered to nearly 900,000 New Yorkers. It is available at <https://hca-nys.org/wp-content/uploads/2020/04/HCA-Phase-II-Survey-Summary-Final.pdf>.

This is HCA’s second survey on the home care impact. (The first was conducted in mid-March and shared publicly on March 17.)

Our latest survey, finalized on April 6, further examines: the number of suspected or confirmed COVID-19 cases among home care staff and patients; what agencies are doing to cope with equipment shortages; percentage changes in patient counts due to COVID-19; the numbers (in ranges) of patients refusing care for fear of exposure; what agencies are doing in cases where patients are refusing care; projected financial impacts for the foreseeable future; and more.

“These findings strongly support the need for priority access to supplies, like personal protective equipment (PPE), amid dangerous shortages and the absence of community-based providers from the prioritization lists when supplies are made available,” said HCA President Al Cardillo. “While PPE is scarce across all health care settings – and we certainly understand the pressing needs systemwide – it also must be acknowledged that there are many patients in home care who have medical needs as severe as some patients in other settings. These most at-risk patients cannot go without services, including care that requires high levels of contact. Every effort must be made to ensure the safety of patients and the health care personnel who provide their care.”

“One other important area of urgent need is greater flexibility and reimbursement under Medicare for remote-monitoring technologies – like home telehealth – that can be used to

manage patient care and extend the point of contact to in-home patients remotely in certain circumstances or phases in the care plan,” Cardillo added. “While New York’s Medicaid system has rightly allowed such flexibility for telehealth services and billing, the same must be done under Medicare so that these powerful tools can be brought to bear more uniformly for safety reasons.”

Guidelines from the U.S. Centers for Disease Control and Prevention (CDC) and the New York State Department of Health (DOH) describe measures for screening and precautionary quarantine of home care staff. Agencies are implementing these in their emergency procedures, resulting in some staff being unavailable for case assignment. Many other agencies report that fear of COVID-19 exposure is also having an impact on the decisions of individuals to work in home care. As a result of these and other factors, the largest share of respondents in our latest survey (73%) have seen a 1-10% decrease in the number of personal care aides and home health aides available for patient care since the state of emergency, while 67% saw a 1-10% decrease in nurses, therapists, social workers and other professional staff. Other agencies are seeing higher impacts.

Most home care agencies (80%) said that at least one patient was refusing care due to fear of exposure. Nearly a quarter of agencies had up to ten patients doing so at a time when organizations are utilizing every resource possible to screen patients and caregivers while significantly increasing their point of contact and support to staff and patients in the field. At the upper end, nearly 7% of home care agencies reported more than 100 patients declining service.

We stress that while representative, these are the findings of a survey sample (176 survey respondents with a total patient count of approximately 95,000 individuals served in the home), not the entire home and community-based care industry; yet the findings provide an important baseline of information to assess experiences in the field. We also stress that the survey provides a snapshot of findings at a particular moment in time, with conditions changing rapidly during the course of the pandemic.

HCA is a statewide health organization comprised of nearly 400 member providers and organizations delivering home and community-based care to several hundred thousand New Yorkers annually. HCA works to support providers in the delivery of high quality, cost-effective home and community-based care for the state’s citizens. HCA providers include hospitals, nursing homes, free-standing agencies and health systems which operate Certified Home Health Agencies, Licensed Home Care Services Agencies, Managed Long Term Care Plans, Hospices, Long Term Home Health Care Programs, waiver programs, and an array of allied, supportive services entities.