



**TO:** All Interested Parties

**FROM:** Home Care Association of New York State

**RE:** Phase III COVID-19 Survey: Summary of Impact on Home and Community-Based Entities, Staff and Patients in New York State  
*(Survey completed on October 14, 2020)*

**DATE:** November 1, 2020

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In late September and early October, HCA conducted our third survey of the industry to determine home care and hospice provider experiences in the ongoing public health emergency following the springtime surge and in anticipation of additional surges.

This third survey (Phase III) was completed on October 14, 2020, netting responses from **77 respondent organizations serving the home and community-based care needs of New Yorkers**, including Certified Home Health Agencies (CHHAs), Licensed Home Care Services Agencies (LHCSAs), Long Term Home Health Care Programs (LTHHCPs), Hospices and Managed Long Term Care Plans (MLTCPs).

Of immediate and urgent concern, the overwhelming number of agencies (85%) said that structural workforce shortages — especially the limited numbers of nurses, home health aides (HHAs) and/or personal care aides (PCAs) — have been greatly amplified by COVID-19, and these shortages are a primary obstacle to admitting patients, including for persons needing to be discharged from the hospital. Indeed, approximately 43% to 45% of home care and hospice agencies have experienced a decrease of 11% or more in HHA and PCA workforce capacity since March 7, 2020.

Simultaneously, home care and hospice providers have reported a major increase in referrals from hospitals and other settings, illustrating just how much the entire system relies on this community-based safety net. Hospitals, physicians and other long term care settings depend on home care in ordinary times — but especially so during an emergency — to accept patients and generally support systemic discharge-planning needs while also helping to provide relief in the event of medical surges.

According to our survey, 65% of home care agencies in New York State saw an increase in referrals to home care from hospitals and other settings since the onset of the public health emergency. Yet, alarmingly, 76% of agencies have reported challenges in accepting these new referrals, mostly because of reduced workforce availability.

Even now, well after the springtime coronavirus surge, most organizations (63%) have not fully recovered their normal patient counts (called their “census”), with 42% of providers remaining “somewhat below” and 21% still “substantially below” pre-pandemic census levels. Half of providers experienced an overall decline of 10% or more in their patient census since the start of New York’s public health emergency.

Home care and hospice financial viability also remains a critical concern, with almost all providers (94%) projecting a financial loss due to COVID-19. A plurality (40%) expect losses of 11% to 20%, with some reporting even higher impacts.

HCA will provide further detail on these findings and additional data points in the coming weeks as we advocate for critical supports — like provider stabilization funds and policies to stimulate workforce capacity — at both the state and federal levels. Below are some key bullet points.

### **Workforce, Referral and Access Impacts**

- **85%** of agencies said that structural workforce shortages — especially limited numbers of nurses, home health aides (HHAs) and/or personal care aides (PCAs) — have been greatly amplified by COVID-19, and these shortages are a primary obstacle to admitting patients, including for persons needing to be discharged from the hospital.
- **70%** of home care and hospice agencies believe that their need for additional staff and the reduction in their workforce capacity is a **high or significant need** for them over the next six months.
- **43% to 45%** report a **decrease of 11%** or more in HHA and PCA workforce capacity since March 7, 2020.
- **65%** of agencies have received an increase in referrals to home care, mostly from hospitals, physicians and family or self-referrals. However, **76%** of agencies have been forced to delay or deny accepting these new referrals, mostly because of reduced workforce availability.

### **Census Impact**

- **49%** of agencies reported an overall decline of 10% or more in their patient census since the start of NY's public health emergency.

To date:

- **63%** of have not fully recovered their normal patient counts (i.e., census).
- **42%** of providers are remaining “somewhat below” pre-pandemic levels.
- **21%** are still “substantially below” pre-pandemic census levels.

### **Fiscal Status: Projected Losses Due to COVID-19**

- **94%** of reporting providers project a financial loss due to COVID-19.
- **40%** expect losses of **11% to 20%**, with some reporting higher impacts.
- **84%** of home care and hospice agencies feel that the anticipated fiscal impact of 2020-21 state budget/MRT cuts on your organization and/or your MLTCP or provider partners is a **high and/or significant need** for them over the next six months.

- **57%** of home care and hospice agencies believe that the financial losses from COVID-19 are a **high and/or significant concern** for them over the next six months.

### **Telehealth Utilization on the Rise but Financial Resources Lacking**

- **22%** of home care and hospice agencies had a telehealth program before the pandemic. Today, **46%** of them do and for those who still don't have a telehealth program, a "lack of financial resources" was the most cited reason (at **38%**).
- Of the **46%** of home care and hospice agencies who currently have an operational telehealth program, **86%** of them have increased the use of their telehealth programs to help better serve their patients and communities.

### **Personal Protective Equipment (PPE) Status**

- **54%** of home care and hospice agencies are still either **somewhat or completely unable** to access the necessary amount of PPE to serve their communities safely.
- The cost of PPE remains an issue for health care providers, as **83%** of home care and hospice agencies report insufficient rates and premiums to cover the cost of PPE.
- **86%** of home care and hospice agencies are stockpiling at least a 30-day supply of PPE for the fall. But some home care and hospice providers (**8%**) are unable to stockpile PPE because their distributors are unable to meet their demand.