

## PANEL 4

**Staying at Home – What  
Kind of Help is Needed?  
Personal Hands-on Care  
and Housekeeping Chores**

**Moderator:**

Trish MacEnroe,  
CAPTAIN CHS Senior  
Services Committee



**CAPTAIN**  
Community Human Services

## Here Come the Boomers

**A Community Forum on  
the Future of Aging in  
Southern Saratoga County**

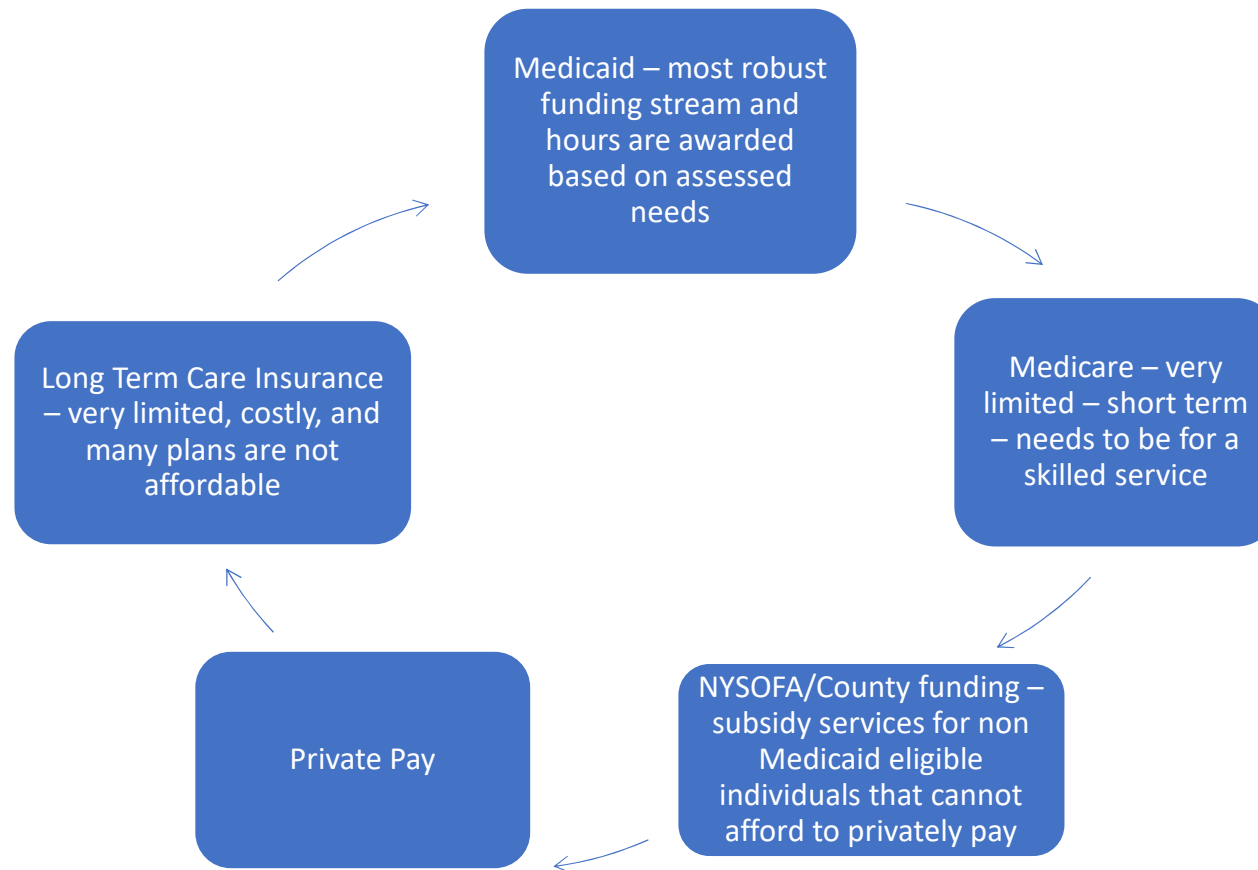


# Home Care in NYS

Rebecca Preve  
Association on Aging



# Background and Funding



# Provider Network

- Certified Home Health Agency – provide part time, intermittent health care and support services to individuals who need intermediate and skilled care.
- Medicare, Medicaid, private pay
- Licensed Home Care Services Agency – offer home care services through personal care assistants, home health aides, nurses, and therapists that are covered by Medicaid, private insurance, and Offices for the Aging. Services can be ongoing and long term.



# History

This crisis has been looming for years. Since the 1970s, the expansion of home- and community-based care as an alternative to institutional care, along with the growing preference for aging in place, has spurred rising demand for home care workers. By the mid-1980s, signs of a lasting labor shortage were evident across New York State. “Health Aides in Short Supply,” a 1987 New York Times headline warned.

-CUNY Home Care Report




## Current State

“Across home- and institution-based settings, the number of home health aide and personal care aide jobs is projected to rise from 440,000 in 2018 to over 700,000 by 2028, making these the two largest occupations in the State. The magnitude of this growth, driven primarily by demand for in-home care, is staggering home health and personal care aides alone will add as many jobs to the state economy as will the next forty largest occupations combined.”

-CUNY Home Care Report

# Status of Home Care

3.5 million New Yorkers are currently aged 65 or over, and this is by far the most rapidly growing segment of the population. Over half of people aged 65 and older will need some kind of long-term care in their lifetime, as well as over a million New Yorkers with disabilities, chronic illnesses, or other functional complications.



The state's long-term care system is insufficient to meet the needs of New Yorkers now, and the problem gets worse each year. The COVID-19 pandemic has only exacerbated a workforce shortage that has been dire for many years.

# Workforce Trends Health Care

Job growth in New York State exceeds job growth in every other sector. Most new health care jobs are in long term care settings.

Of the 150,000 health care job openings anticipated annually, 89,000 (60 percent) are for personal care aides (PCAs), home health aides (HHAs), and nursing assistants.

Between 2016 and 2026, annual openings for HHAs and PCAs are projected to grow by 52 percent and 41 percent respectively, while openings for registered nurses (RNs) are projected to grow by 20 percent and for nurse aides by 16 percent.



# Key Findings

## Workers:

- For workers, the most pressing issue is inadequate pay and lack of benefits. Many workers rely on public assistance and lack health insurance despite working full-time or multiple jobs. Other worker issues include:
- Stressful, complex, and high-risk work environments.
- Compensation does not reflect the skill and occupational risk associated with their roles, and higher wages and hazard pay are warranted.
- Failure to receive full pay for all hours worked. The “24-hour rule” allows workers to be paid for only 13 hours in a 24-hour shift.
- Gaps in employment after a client dies or is hospitalized, resulting in inconsistent hours and fluctuating income.
- A lack of opportunities for career advancement, promotions or raises.
- Excessive caseloads and understaffing in skilled nursing facilities.
- Women, people of color, and immigrants make up the majority of this workforce, so addressing long-term care workforce issues will support gender and racial equity.

# Employers

## Employers

- For employers, the key issue is New York State's low Medicaid reimbursement rates. New York State Medicaid reimbursement falls well below the cost to provide long-term care.
- Inadequate reimbursement has reduced providers' ability to offer higher wages for direct care workers. While long-term care worker wages remain at or near minimum wage, wages have increased in other sectors such as fast food that compete with the long-term care sector for workers.
- Responsible budgeting is extremely challenging, as the Medicaid reimbursement rate is set retroactively, sometimes a year late.
- Staffing shortages in home care agencies mean they must turn away as many as 30% of new cases.
- High turnover is costly and time-consuming. Average staff turnover in 2017 and 2018 was 94%; many nursing homes exceed 100% turnover in a one-year period. This requires rehiring and training the entire direct care workforce, including CNAs, LPNs and RNs.
- Many providers reported difficulty retaining managers due to the challenges of navigating shifting COVID-19 guidance, burdensome reporting requirements, and strict enforcement of fines for bureaucratic issues.

# Care Recipients, Family, and Patient Advocates

- For families and patient/resident advocates, the key issue is the need for consistent, reliable care with low turnover
- Consistency of care is instrumental to care recipients' health, quality of life, and independent living, and services.
- The need to find or recruit new caregivers is time-consuming and highly stressful for care recipients and family members.
- Inadequate home care services resulted in preventable health crises for individuals and produced strain for family members required to balance their job or school responsibilities with intensive caregiving roles.
- High turnover among long-term care workers impedes effective communication and collaboration with families. 3
- Underpaid home care workers are more likely to miss shifts due to transportation or child care issues.
- Training guidelines for long-term care workers are outdated and inconsistent; they do not meet Core Competencies developed by CMS for the direct care workforce.
- Foreign language skills and cultural competencies are needed for long-term care workers to best serve diverse populations across the state.

# Solutions

Fix	Invest in	Insure	Provide
Fix reimbursement mechanisms to cover the cost of care to the provider network.	Invest in prevention services through the Aging Services network to keep individuals in home and community settings, without spending down to Medicaid	Insure transparency in MLTC funding to providers	Provide workers in home care more than minimum wage level pay and benefits



# Companion Level Services

MARIA SPAGNOLA,  
COMMUNITY RELATIONS DIRECTOR,  
HOME INSTEAD

# Hiring for homecare: what are the options?

Presented by:

**Kym Hance, CMC**

**Aging Life Care Manager**



**HERZOG**  
LAW FIRM

# Long-Term Care Needs

- The number of people needing long-term care is growing as Baby Boomers turn age 65
- The number of individuals over age 65 will double from 2000 to 2030, to about 71 million seniors in America
- After you turn age 65, your chance of needing some type of long term care assistance increases – there is a 69% chance you will develop a disability







**87% of adults age 65 and older want to stay in their current home and community as they age.**



# Funding Sources for long term care

- ▶ Private Pay
- ▶ Medicare
- ▶ Medicaid
- ▶ Other
- ▶ County Office for Aging
- ▶ Long Term Care Insurance
- ▶ Respite/Caregiver Support Grants
- ▶ Veterans Services



# What does Community Medicaid pay for?

- Home Care
- Adult Day Care
- Assisted Living (ALP)
- Transportation





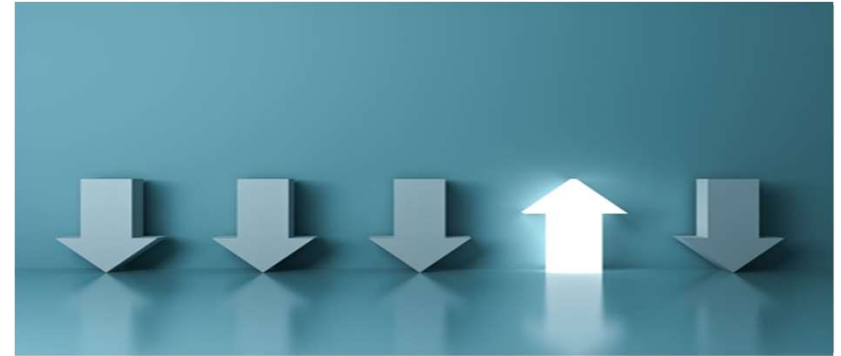
# Types of Community Medicaid

- ▶ **Waiver Programs – includes oversight and monitoring**
  - Nursing Home Transition Diversion (NHTD)
  - Traumatic Brain Injury (TBI) Waiver
  
- ▶ **Managed Long-Term Care – task-based services**
  - Personal Care Assistant (PCA)
  - Consumer Directed Personal Assistance Program (CDPAP)

# What is CDPA? (Consumer Directed Personal Assistant)

- Alternative, non-medical model to traditional homecare
- Must be capable of managing their own care (self-direct) – or may choose a designated representative to assume responsibility on their behalf
- A Fiscal Intermediary provides financial and administrative on the behalf of the consumer.
  - Payroll and Tax Withholding
  - Benefits Administration
  - Compliance Assistance
- Benefits of CDPA
  - Strength-based, person-centered
  - Promotes independence, autonomy and empowerment
  - Recognizes and values a person's cultural background
  - Improves access to home care in rural communities
  - OFFERS CHOICE!

# Private Hire (ups and downs)



- Benefits of private hire
  - Lower cost
  - More control
  - Direct communication with caregiver
  - More freedom
- Drawbacks
  - You're responsible for advertising and answering calls
  - You do the interviewing
  - Non-medical caregivers can be difficult to find
  - You're responsible for employer-related tasks, compliance, and payroll
  - You accept responsibility for liability (insurance for work-related injuries and accidents)
  - You're responsible for substitute care if the caregiver doesn't show up

Questions? Contact us!



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518-465-7581





# Our Mission

To provide home maintenance and other services that help seniors and people with disabilities live safely and independently in their own homes.





# Profile

- Founded in 1995
- Serve 4 counties in upstate New York
- Currently serve almost 500 households
- 140 handypersons



# Our Members

- 55 or older or with a disability that prevents them from maintaining their home
- More women than men
- From all socio-economic backgrounds



# Our Services

- Home maintenance
- Lawn care
- Snow blowing
- Shopping and transportation
- Meal prep
- Companionship



# What We Don't Do

- 2<sup>nd</sup> story outside work
- Roofing repairs
- Personal care
- Transportation in handyperson's car



# Our Workforce

- Seniors helping seniors
- Earn \$15.00/hr. as independent contractors
- Recruited through local “pennysaver” newspapers



# Workflow

- Job requests called into office
- Service coordinator matches requests with handyperson skills
- All work tracked through database
- Job tickets provide paper trail and member sign-off
- Members contacted to assure satisfaction



# Home Safety Inspections

- Free
- Done by licensed inspectors
- Alert homeowners to potential issues before they escalate



# Vetted Contractors

## Plumbing and Heating

- Electricians
- Roofers
- General contractors
- Masons
- Tree Service
- Pest Control
- Etc.





# Emergency Services

- Emergency number provided at signup
- 24/7 availability



# How We Exist

- Membership fees
  - Sliding scale
  - Based on income and size of home
- Fundraisers
- Grants, donations, matching funds



# Sustainability

Membership fees allow us to cover operating costs without relying heavily on grants and donations.

