

# **Emergency Managers Association Annual Statewide Meeting**

**Syracuse, NY  
February 12, 2015**

**Home Care Emergency Preparedness**

**Al Cardillo, Executive Vice President  
Home Care Association of New York State**



# I. Opening Remarks

- On behalf of HCA, thank you for this opportunity to work together to support health care emergency preparedness and particularly to discuss the home health sector of the system.
- HCA has been working with the State Department of Health, the Office of Emergency Management, the State Legislature, other state health associations, numerous other groups and, most recently, with regional HEPCs on initiatives in support of emergency preparedness and response in home care, hospice and health care systemically.
- Grateful for our ongoing opportunity to work closely with the DOH Office of Emergency Health Preparedness as a collaborating Federal Emergency Management Agency project partner.

## Opening Remarks – cont.

In today's presentation, I would like to cover:

- Background on HCA
- Describe the home care system in NYS
- Describe major changes taking place in the health care system
- Summarize HCA's roles in EP/ER
- Describe Collaborative initiatives in EP/ER with DOH –OHEP
- Describe Challenges in home care EP/ER
- Engage your questions, comments, recommendations, possible steps we can take together

## II . “The Home Care Association of New York State”

- The Home Care Association of New York State (HCA) is a statewide association of providers, organizations and individuals devoted to home and community based care services throughout the state.
- HCA is comprised of approximately 400 such members – including hospitals, nursing homes and free-standing providers certified or licensed to provide home care services in NYS.
- HCA’s mission is “to promote and enhance the quality, accessibility and availability of home and community based care by assisting providers to meet the needs of the individuals and communities they serve.”

## **Home Care Association of New York State – cont.**

- **HCA and NYS home care providers include all levels and types of home care:**
  - ❖ Certified home health agencies (CHHAs)
  - ❖ Long Term Home Health Care Programs (LTHHCPs)
  - ❖ Licensed home care services agencies (LHCSAs)
  - ❖ Managed long term care (MLTC) plans
  - ❖ Hospice
  - ❖ Home and community based waiver programs
  - ❖ Allied organizations and individuals involved in home care in New York State
  - ❖ “Consumer Directed Personal Assistance” models

# III. Home Care & the Changing System

- New York State has long had the **most diverse** home and community based care system **in the nation**, as reflected in the listing on the previous slide.
- Providers statewide; over 400,000 cases annually; role of increasing diversity and importance.
- The system has included primary programs and agencies for **post-acute, rehabilitative, supportive and complex long term care**.

# III. Home Care & the Changing System

- Home care not just the “in-home” visit and care by nurses, therapists, social workers, aides and others, but also care managers, partners to hospitals, physicians, managed care plans; partners in care transitions, ER diversion, medical management, public health, telehealth, and more.
- Home care has also included an **array of special needs programs**, agencies and services, such as for medically fragile children, persons with traumatic brain injury, and persons with AIDS.

## The Changing System – cont.

- Much of the system as it has been known is *changing.....*
- Recent state policy changes are requiring virtually all Medicaid and Medicare-Medicaid eligible individuals to enroll in managed care or managed long term care (MLTC) plans. Under this shifting paradigm, home care and other provider services to these patients must be via contracts between health plans and providers; major implications for patient service, reimbursement and provider-to-patient relationships, esp in LTC.
- *Still-further, and major, system changes are coming...*



## The Changing System – cont.

- **DSRIP** - Under the state's recently approved Medicaid waiver, its primary goal is foster large, integrated service delivery models built on interdisciplinary and cross-sector provider collaboration – called “**DSRIP**” or, **Delivery System Reform Incentive Programs**. Current major DOH focus in state health care development; \$6 billion in federal funds; major focus of provider planning across NYS.
- **FIDA** - MLTC plans will soon be required to expand to become Fully Integrated Dual Advantage (or “**FIDA**”) programs, or to contract with FIDAs, and to enroll dual-eligibles.
- DOH's goal is for one or select few DSRIPs to cover entire regions and for FIDAs to eventually be statewide.

## IV. HCA's Roles in Emergency Preparedness and Response

HCA has direct, multilevel participation in emergency prepared-ness and response in the state.

HCA serves as:

- A **principal source of information, education, training and technical assistance** for home and community based providers for emergency preparedness and response.
- A **principal communication point for home care** in emergency conditions, circulating and exchanging essential information, guidance and updates pertaining to any and all facets of the emergency in question.

## HCA's Roles in Emergency Preparedness and Response – cont.

- A communication point to and from state and local agencies, organizations, and incident command.
- A collaborating partner with the State Department of Health's Office of Health Emergency Preparedness under a Federal Emergency Management Agency (FEMA) operated initiative, which includes multi-tiered planning and structural improvement for emergency response in health care, including planning and response interface with Regional Health Emergency Preparedness Coalitions and Regional Training Centers.

## HCA's Roles in Emergency Preparedness and Response – cont.

- A collaborating partner with the Health Dept's Offices of Health Systems Management and Health Insurance Programs in their regulatory roles for providers and health plans, as well as in their jurisdictional roles in declared emergencies.
- A collaborating partner with health associations and organizations representing other sectors (hospitals, nursing homes, clinics, etc.) in the continuum of care.

## HCA's Roles in Emergency Preparedness and Response – cont.

- An interface with federal agencies on emergency response policy and execution.
- An advocate for policy development and/or revision to ensure the most effective emergency management system.

## V. Home Care Challenges in Emergency Preparedness & Response

- Along with the increasing number and acuity/complexity of the home care patient population, along the **home care setting itself provides for unique and especially challenging aspects** of emergency response, particularly when compared to facility-based care.
- Instead of patients and staff consolidated into a single, congregate (i.e., facility) setting, **home care and hospice patients are** nearly always in their own individual homes apartments, and **spread throughout their communities.**

## Home Care Challenges in EP - cont.

- Agency personnel must therefore “bring the care to the patient,” traversing to-and-from each patient’s home and neighborhood.
- Home care personnel must also manage, direct and administer services across a geographic expanse that will be impacted in many varied ways during an emergency.
- In home care, every patient, every home, neighborhood and community is a potential, distinct emergency in itself to be navigated and managed.

## Home Care Challenges in EP - cont.

- In addition to conducting emergency response for patients in their homes, **home care and hospice also reach beyond to assist other settings and the community at large.** Agencies conduct or assist with patient evacuation, provision of care in shelters, hospital transfers, and many other system supports.
- Providers **must marshal resources, services and patient management needs across** broken communications, severed service networks, extreme environmental dangers and an entire community in simultaneous need to reach, provide and manage care for patients.



## Home Care Challenges in EP - cont.

Home care providers are also challenged with major structural obstacles in the response system.

1. **Access to restricted zones**
2. **Access to fuel**
3. **Regulatory flexibility needs (see next slide)**
4. **Financing for preparedness and response**
5. **Education/Comprehension of Home Care**
6. **Communications, utilities**
7. **Clarity in role, with regard to managed care**
8. **Transportation**

HCA is currently working with the Department of Health, other state agencies, the Legislature and other partners to address these priority challenges in emergency preparedness and response.

## Home Care Challenges in EP - cont.

### **Regulatory Barriers/Flexibility Need**

Areas Currently Proposed by Home Care Providers & HCA to be Examined for Regulatory Flexibility Need:

- Geographic Service Area
- Physician Orders
- Patient Assessment
- Plan of Care
- Admission Requirements
- Minimum Standards
- Scope of Practice
- Discharge
- Claims/Billing
- Access to Fuel
- Access to Restricted Zones/Curfew
- Reporting

# VI. Home Care Emergency Preparedness & Response

## Collaborative Initiatives of Home Care & DOH OHEP

2013-14 Planning and Initiative Areas have included:

- Connecting with Health Emergency Preparedness Coalitions and coalition partners (e.g., regional training centers)
- Addressing Regulatory Barriers; Collaborating on Provider Guide for Obtaining Regulatory Relief During Emergency
- Promoting Incident Command System Awareness, Education, Use
- Facilitating Education and Implementation of Transportation Assistance Levels into Home Care Agency Planning & Response
- Assessing and Supporting Requirements of Providers in Coastal Storm, Flood Zone Planning

## 2014-15 HCA – OHEP Collaborative Initiatives

- **Further Connection with Health Emergency Preparedness Coalitions** - Engage in further HEPC regional and sub-regional meetings, activities and initiatives, and in enhancing emergency preparedness and integration of home care agencies into regional emergency preparedness
- **Exercises and Drills** – Participate in OHEP Exercise Advisory Committee meetings and provide comments regarding exercise design and objectives
- **Transportation Assistance Levels** – Promote and encourage agency implementation; assist with education, webinars, technical assistance; work with local response partners and EOMs for transportation allocation in an emergency.

## 2014-15 HCA – OHEP Collaborative Initiatives – cont.

- **Collaborate with OHEP and OPCHSM to ensure development of a Situational Awareness process for home care**
  - ❖ Develop and disseminate provider SA resource guide that includes, among other:
    - ❖ Potential triggers for SA
    - ❖ Association roles and responsibilities
    - ❖ Key state and regional resources
    - ❖ Regulatory requirements
    - ❖ And other
  - ❖ Support a process to obtain situational awareness through HCS

## 2014-15 HCA – OHEP Collaborative Initiatives – cont.

- ❖ Outreach to utilities and others re home care and home care patients and needs in emergency preparedness and response
- ❖ Provide information to NYSDOH, NYSDOH Regional Offices, NYC OEM, OEHP, other management organizations as appropriate during an event

## **Additional HCA Initiatives & Activities with DOH/Others**

- “Essential Personnel” Status for Home Care & Hospice
- Revision of DOH Survey/Reporting System for Home Care & Hospice
- Emergency Preparedness-Response Financing and other areas for support
- Shelter Access Proposal – Home Based Care Alliance & NYC OEM
- Managed Care-Home Care Delineation of Duty, Jurisdiction & Clarity of Roles
- Commenting/Advocating re proposed Federal EP Regulations
- HCA “HomeCarePrepare” Website
- Examination of additional geographic and regional health system emergency preparedness and response needs

## VII. New Developments

### Home Care Preparedness/Response Legislation

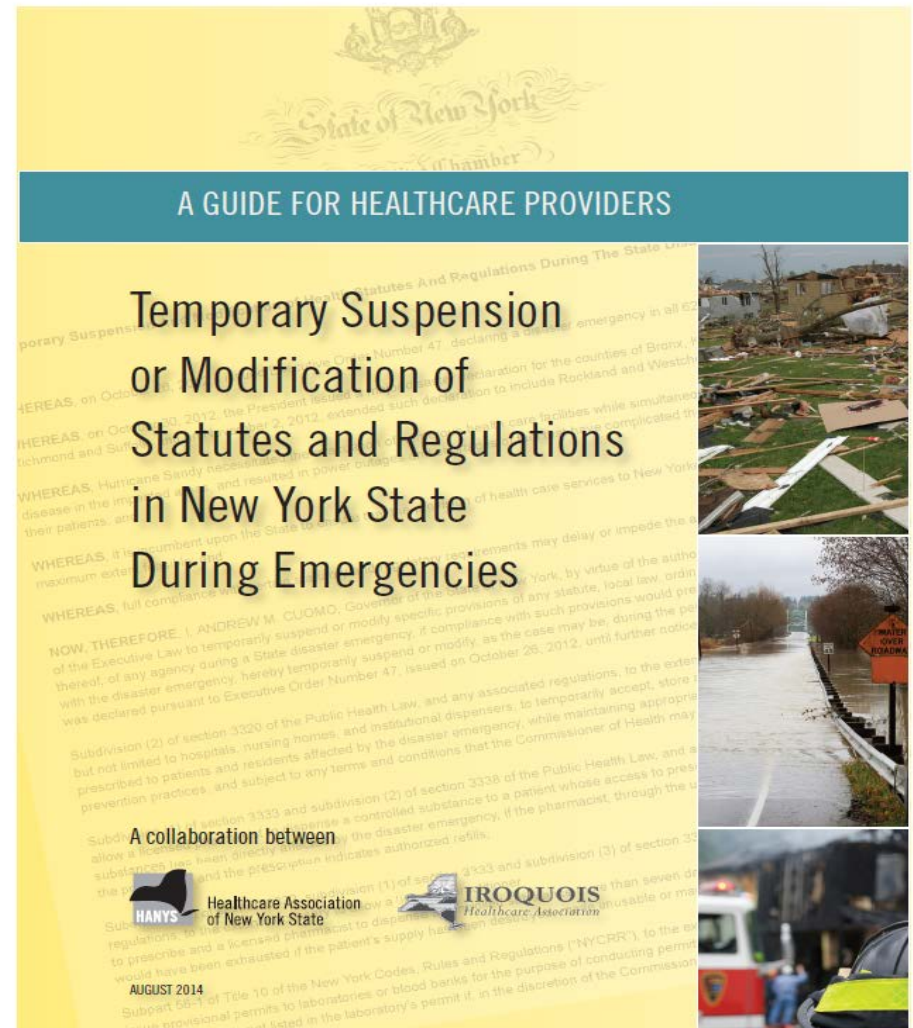
- S.3482-A by Senator Andrew Lanza and Assemblyman Michael Cusick, amends the State Executive Law to help ensure patient access to vital home health and hospice care during declared emergencies
- Last year passed Senate and Assembly unanimously; Governor did not approve; reintroduced with eye toward prompt repassage
- Key provisions are:



- Includes home health agencies and hospices among the officials, agencies and other entities whose “cooperation, advice and assistance” is to be sought in the development of the local emergency management plan.
- Requires local comprehensive emergency management plans to include procedures for deployment of physicians, nurses, medical professionals and personnel of certified home health agencies, Long Term Home Health Care Programs, licensed home care services agencies and hospices, as well as others (as “Essential Personnel”). Plans must also include provisions allowing access by these individuals to areas otherwise restricted or subject to curfew in declared emergencies.

# Guide for Regulatory Flexibility

- Newly issued guide for addressing statutory/regulatory flexibility during emergencies
- Addresses all health care provider sectors
- Special thanks and commendations to HANYS, Iroquois and DOH for leadership in coordinating, compiling, publishing
- Incorporates the work of HCA and other sector collaborating associations to derive content and recommendations from and about each respective sector
- Collaborative educational webinar planned



# HCA "HomeCarePrepare" Website



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## Welcome

June 20th, 2012 | Posted by [Administrator](#) in [Uncategorized](#) - (0 Comments)

Welcome to the home care emergency preparedness website of HCA Education and Research, an arm of the [Home Care Association of New York State](#).

This site provides resources, planning documents and education materials to help home care providers in their emergency preparedness efforts on behalf of patients and staff. In addition to this site, HCA also provides frequent emergency preparedness education sessions and other assistance to providers.

New York State regulations require home care providers to maintain an emergency plan which instructs staff on response procedures in the event of a natural disaster, mass casualty event, hazardous material accident, spread of infectious disease or pandemic, and other incidents.

**HCA to Hold Free April Programs on Emergency Preparedness: Register Today**

**March 24, 2014**

Amid a particularly intense winter — and following recent large-scale weather disasters like Superstorm Sandy and Hurricane Irene — emergency-preparedness issues remain at the forefront of state policy-making.

<http://www.homecareprepare.org/>



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# Questions

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