HCA Members Reconnect, Engage at Multi-feature Annual Conference

Wide-ranging event offers the latest policy and advocacy updates, HCA’s Annual Awards ceremony, the first health care speech by NY Congressional Delegation’s newest Member – and more

Hundreds of HCA members and home care community colleagues gathered this week in Saratoga Springs for HCA’s 2009 Annual Conference and Exhibition to gain critical updates on important policy topics, honor the shining stars of home care during HCA’s Annual Awards dinner, regroup, recharge, reconnect and prepare for the future.

Ms. Cunningham noted that HCA met these unprecedented budget challenges proactively by:

- Developing a comprehensive legislative package – the Home Care Accessibility and Efficiency Improvement Act (HCA-EIA) – with

See CONFERENCE p. 2

U.S. Congressman Scott Murphy (D-20) speaks with (from left) HCA President Joanne Cunningham and HCA Board Chair Victoria Hines, CEO and President of VNS of Rochester and Monroe County, before delivering remarks at HCA’s Annual Conference on May 18.
positive features for tapping home care’s cost-saving potential as a counterpoint to draconian cuts;

• Working closely with our allied partners from other health associations to forge a strong unified voice on policies that directly impact our shared constituencies, including our efforts with the New York Association of Homes and Services for the Aging (NYAHSA) to prepare a joint report on the perilous fiscal condition of New York’s provider community and our work with the Healthcare Association of New York State (HANYS) to ensure the proper allocation of increased federal Medicaid (FMAP) dollars; and

• Conveying the story of home care through our “On the Edge” publication and other public affairs efforts.

Ms. Cunningham also noted HCA’s continuing work to broaden and diversify our reach through HCA’s newly formed Political Action Committee (see related p. 10 story) and our recent venture into the world of online social networking tools like Twitter, Facebook, and YouTube – a further means of connecting with members and communicating the value of home care to external audiences.

Congressman Murphy delivers first health care address at HCA Conference

Ms. Cunningham’s theme of engagement – with policymakers and like-minded constituencies – resonated throughout Monday’s program, as Congressman Scott Murphy (D-20) used the occasion of HCA’s Annual Conference to deliver his first address on health care since joining New York’s Congressional Delegation approximately one month ago.

During his remarks, Congressman Murphy, who was elected to the House seat formerly held by U.S. Senator Kirsten Gillibrand, specifically focused on the importance of patient choice in determining the appropriate setting for care.

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“We need to be sure we provide choices for people,” he said. “We need to look at how we provide the whole range of services, from institutional settings to assisted living environments to home-based care, where people are living in the same family home they’ve always lived in and are able to have health care come to them.”

He also shared a personal example of home care’s impact on his family.

“My father-in-law who was an internal medicine doctor before he passed away always told us: ‘Whatever we have to do – I want to be taken care of at home,’” said Congressman Murphy. “A couple of years before he died, he fell and broke his leg and had to be in a hospital bed for several months. We were able to access home care services where he lived, he was able to stay at home, and his wife and family were able to take care of him. We had a nurse and other professionals come in to help him get through therapy. He got back up, got back to work and went back to practicing medicine. We lived through the home care experience and saw it work.”

In response to the speech, Ms. Cunningham said: “We were especially delighted to hear that Congressman Murphy and his family have personally experienced the benefits of home health care and we are thrilled that he is bringing to Washington an appreciation of the provider, patient and family perspectives when it comes to the delivery of quality, cost-effective home care services.”

Congressman Murphy’s remarks also garnered media attention, with the Capital Region’s Times Union newspaper publishing a photograph of his appearance at the Conference; and local NBC affiliate (WNYT) featured the Congressman’s speech during its evening news broadcast, generating further exposure for HCA and the home care community’s broader message about access to quality, compassionate and cost-effective in-home care.

A press release with further remarks from Congressman Murphy is available at http://www.hca-nys.org/pr.cfm.

Dan Sisto and Carl Young point to home care’s value across the continuum

Monday’s session also featured remarks by HANYS President Dan Sisto and NYAHSA President Carl Young, who each offered their perspectives on home care’s role within the continuum of care, especially as it relates to the provider communities Mr. Sisto and Mr. Young represent at their respective organizations.

HCA’s individual advocacy efforts this year were strengthened by the collective clout of all three Associations – HCA, HANYS and NYAHSA – working toward a common purpose of ensuring responsible State Budget actions that do not needlessly jeopardize access to care.

In furthering these important partnerships, we appreciate Mr. Sisto and Mr. Young’s enlightening remarks on home care’s niche in the wider universe of health care and for their recognition of home care’s essential role in service coordination across sectors.

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More from the federal front

Rounding out Monday’s session was a federal health reform panel discussion by Brett Heimov, Principal at Winning Strategies, where Mr. Heimov handles federal government relations for HCA and other organizations, and Emily Gibbons, Legislative Director for Congressman Eliot Engel (D-NY), who assists the Congressman on health care issues for the U.S. House Energy and Commerce Committee and global health for the House Foreign Affairs Committee.

With a federal budget that threatens to cut Medicare home health payments by $13 billion over five years – and by $712 million for New York agencies alone – as well as several new initiatives that have emerged as part of a national blueprint for health care reform, Mr. Heimov and Ms. Gibbons provided valuable insights from both the legislative and government-affairs perspectives on the challenging terrain that lies ahead, as well as the opportunities for New York’s home care community to play a prominent role in the federal health care debate.

Echoing this point, Tim Reeves, CEO of the Neiman Group, showcased for Conference attendees a dynamic new public relations campaign – called Help Us Choose Home – his firm has developed under contract with HCA’s federal partners at the National Association for Home Care and Hospice (NAHC) to heighten awareness at the state and federal levels of the need to make home care a central component of discussions about health care reform.

At the heart of Help Us Choose Home is a video screened at HCA’s Conference that blends together powerful images and compelling statements to convey the importance of home care. The video, accompanying advocacy tools, and overall campaign message are featured at www.helpuschooseshome.org – a site that Mr. Reeves encouraged all attendees to share as broadly as possible with elected officials, the media, community stakeholders, and staff as part of ongoing advocacy and outreach efforts. Members can also access Help Us Choose Home directly from the home page of HCA’s website at www.hca-nys.org.

Monday’s program also included a panel session on “Lessons Learned from the Front Lines of an OMIG Audit.” The session was moderated by HCA’s new Board Chair Victoria Hines, President and CEO of Visiting Nurse Service of Rochester and Monroe County (see p. 11 story on Ms. Hines’s confirmation as Board Chair at this year’s Conference). Panelists included Michelle Mazzacco, Vice President/Director of Troy-based Eddy Visiting Nurse Association, and a member of the HCA Board; Jacqueline King-Peters, Acting Administrator/Director of Clinical Services at the Center for Nursing and Rehabilitation (CNR) in Brooklyn; and Joya Jett, Compliance Program Administrator for Lifetime Care in Rochester, who shared the steps their agencies took to prepare for an Office of Medicaid Inspector General (OMIG) audit.

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Attendees also took part in several afternoon concurrent sessions on Monday, including “Tools to Enhance Your Agency’s Operation,” by Nancy Lisy, Senior Health Care Consultant for Loeb & Troper; “Enhancing Your Agency’s Internal Controls,” by Rebecca Fuller Gray, Director of the Bureau of Home Care and Hospice Surveillance and Quality Indicators/Evaluation of the state Department of Health; and “Health Care from the Media’s Perspective,” by Jeff Krasner, President of Krasner Health Strategies.

Home Care Luminaries

The power of home care lies in the strength of its people – be it the compassion, dedication and skill of front-line caregivers or the determined advocacy and vision of agency leaders.

Recognizing these attributes, HCA pays special tribute each year to home care’s brightest stars through our Annual Conference Awards Dinner, which was held on May 17.

This year’s winners of HCA’s Caring Award were Susan Rappaport, a social worker with Jewish Home Lifecare System’s Manhattan Long Term Home Health Care Program (LTHHCP) and a mainstay of the Central Harlem community where she has dutifully provided top-quality care in her 21 years at Jewish Home Lifecare; and Eddy Home Care home health aide Sallie Chapman, who was recognized for her success in serving a variety of challenging patients, including terminally ill women, post-stroke patients and individuals with chronic illnesses such as diabetes, chronic obstructive pulmonary disease and dementia. The Caring Award “recognizes a professional and a paraprofessional staff person who has exhibited the compassion, skills and service that sets their contribution apart, or whose actions on a particular day or over a period of time exemplify caring in home care.”

Tracey Sokoloff, Administrative Director of Isabella Home and Community Services, received this year’s Advocacy (“Giraffe”) Award, which “recognizes a provider agency or person who took risks or ‘stuck their neck out’ to improve the home care industry, clients and workers through their advocacy efforts.” Ms. Sokoloff was specifically recognized for her critical role in expanding Isabella’s scope of program offerings to include a Licensed Home Care Services Agency (LHCSA) and social services arm, as well as her unflinching ability to venture out on the limb to improve the environment of home care delivery for patients.

HCA’s highest honor, the Ruth F. Wilson Award, was bestowed upon Marilyn Liota, Visiting Nurse Service of New York’s (VNSNY’s) longest-serving veteran

HCA 2009 Annual Award Winners

From top: Marilyn Liota, RN, BSN, MA of VNS of New York, winner of HCA’s highest honor, the Ruth F. Wilson Award; Tracey Sokoloff, administrative director of Isabella Geriatric Center, winner of the Advocacy (“Giraffe”) Award; Sallie Chapman, home health aide at Eddy Home Care, winner of the Caring award; and Susan Rappaport, social worker at Jewish Home Lifecare System, winner of the Caring award.
One highlight of this year’s Conference was the Three Waiters, a performance troupe of singer-actors who masqueraded as Conference wait staff, feigning all kinds of mishaps in the process, and ultimately regaling the audience with popular show tunes and soaring opera numbers.

nurse, who has worked at VNSNY since 1952 – for half of VNSNY’s 115-year history.

Ms. Liota started her career as a staff nurse, treating patients on Manhattan’s Lower East Side where she followed in the footsteps of her role model, VNSNY founder Lillian Wald. Quickly promoted to a supervisory role, Ms. Liota managed VNSNY’s West Queens office, led Maternal Newborn Pediatric services, and now heads the Acute Care program in Queens. Over the years, she has mentored hundreds of colleagues and has been a longtime advocate of continuing education.

On Ms. Liota’s desk sits a treasured photograph of one of her very first patients: Jennie, an elderly Italian-American immigrant who suffered from diabetes and failing vision.

“She lived alone without family or friends in a tenement apartment, with a bathtub in the kitchen, layers of peeling paint, and a statue of St. Lucy, patron of the blind,” Ms. Liota says, remembering Jennie’s sweetness, loneliness, and how daily nursing visits to administer medication were Jennie’s whole world. Ms. Liota keeps Jennie’s picture as a memento – and as a ‘reminder of what our nurses do every day.”

HCA congratulates our award winners. We also thank them, their families, and the award nominees for the opportunity to hear such inspiring stories of incomparable dedication and achievement.

To learn more about this year’s award winners, download HCA’s Annual Awards program at: www.hca-nys.org/documents/2009AwardsDinnerProgram.pdf

DOH presentation on payment reform stirs lively discussion

On May 19, the final day of HCA’s Annual Conference, two of the state Department of Health’s highest-ranking officials responsible for home care policy development provided an update on the Administration’s plans for overhauling the Medicaid payment system along the lines of a proposal advanced by the Governor’s office but later rejected by the Legislature during the 2009-10 State Budget discussions.

Deborah Bachrach, Deputy Commissioner of Health Insurance Programs, and Mark Kissinger, Deputy Commissioner of the Office of Long Term Care, provided data which they said warranted home care Medicaid payment reform. According to Ms. Bachrach and Mr. Kissinger, the Administration will reintroduce plans to implement an episodic payment model that emulates Medicare PPS
(Prospective Payment System), much like the proposal opposed by HCA and rejected by the Legislature during budget negotiations.

The question-and-answer period following Ms. Bachrach and Mr. Kissinger’s presentation was lively and, at times, contentious, as HCA staff and members raised concerns about the Department’s proposal, including: the Department’s overly ambitious timeline for realistically vetting with stakeholders and then rolling out such a complex systematic overhaul; the need for more thorough pre-testing; evaluation, provider input, and details on patient need determinations and rate calculations before going live with an episodic reimbursement system; the fact that the chronic conditions of many patients with multiple and long term needs are not captured by the OASIS (Outcome and Assessment Information Set) and may not be compatible with an episodic system; and our assertion that reform of the patient assessment instrument must precede any plans to alter the current funding infrastructure.

In response to Ms. Bachrach’s request that the provider community be affirmative in its posture towards the Department’s proposals, Ms. Cunningham specifically pointed to HCA-EIA as an example of home care’s positive approach to achieving operational efficiency through constructive policies that do not imperil patient care, as opposed to the more blunt approach favored by the Department.

HCA also challenged the Department’s use of OASIS quality data as a rationale for altering the payment system, since OASIS does not segregate quality data for New York’s Long Term Home Health Care Program (LTHHCP) providers and Certified Home Health Agencies (CHHAs), thereby misrepresenting the performance of both provider types, which serve distinct patient populations.

Rather than move forward with the Administration’s episodic payment proposal, the final 2009-10 State Budget authorized the creation of a workgroup to study payment reform and other related issues. HCA has forwarded recommendations of several provider members and staff to serve on the panel and hopes to hear soon about the final selection so that we can further engage the Department on developing a constructive approach for Medicaid reimbursement that is in the best interest of patients and the long-term sustainability of New York’s home care system.

Keynote presenter Ann Rhoades

HCA’s Annual Conference also offered several sessions on leadership and management development.

Conference keynote speaker Ann Rhoades drew on her experiences as a former CEO of Jet Blue and executive at Southwest Airlines to share ways of developing a people-centric work environment that aids in the retention of quality staff while increasing productivity.

Ms. Rhoades, who is now President of People Ink, a consulting firm, stressed the importance of communicating well-defined workplace behavioral expectations, implementing peer-level interviewing processes for new applicants, and other value-based management approaches that are especially applicable to the home care field.

Home Telehealth Workgroup

The three-day event closed with a special post-Conference session for HCA members on current issues in home telehealth, moderated by HCA Vice President and clinical technology expert Lexi Silver.

The program featured a panel of “best practice” presentations on using technology to improve chronic disease management. Panelists included: Laurie Chichester, Vice President, Metropolitan Jewish Health System; Debbie Bobe, Telehealth Supervisor, Jewish Home Lifecare System; and Cindy Campbell of Fazzi Associates.

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Conference survey

On Thursday, May 21, HCA e-mailed a three-question survey to all who attended our Annual Conference. So that we can continue to enhance our program, please take a moment to complete the survey. Your feedback is always greatly appreciated.

If you attended this year’s Conference and did not receive a link to the survey, please e-mail HCA’s Lynda Schoonbeek at lschoonbeek@hcany.org.

HCA will soon be posting additional Annual Conference materials, including photographs and video footage, to the Annual Conference page on our website at http://www.hca-nys.org/anconf.cfm. There you will find many of the speaker handouts as well.

HCA would like to extend warm thanks to all who made this year’s Conference a success, including our expert lineup of presenters and panelists; our Conference sponsors, whose generous contributions made this year’s lineup of high-caliber speakers possible; HCA’s education committee, whose vision helped shaped the direction of this year’s Conference; the Conference exhibitors; and, of course, to all who participated.

Please be sure to save the date for next year’s Conference on May 19 to 21 (Wednesday to Friday) in Saratoga Springs.

HCA President Honored with Prestigious Ellen Wood Health Care Award

HCA President Joanne Cunningham was honored this week as the recipient of the prestigious Ellen Wood Health Care Award.

This award was conferred by HCA-member Agency Visiting Nurse Association of Hudson Valley on Thursday, May 21 during an awards ceremony in New Rochelle, New York. Leading the ceremony were VNA of Hudson Valley President and CEO Michele Quirolo and Westchester Television 12 Evening News Anchor Janine Rose.

Ms. Cunningham was presented the Ellen Wood Award in honor of her exceptional achievements and dedication to New York’s home care community as HCA President as well as her distinguished and celebrated work throughout her more than twenty years of service in the health care field, including her work in the hospital sector, Congress and other state and legislative governmental positions. Ms. Cunningham’s honors were saluted by a host of organizations and individuals, both in and out of the home care field, who joined in celebrating her recognition, achievements and dedication.

Also honored at the ceremony were: William Mooney, Jr., recipient of the Corporate Community Service Award, presented to a corporate entity or business professional in recognition of outstanding commitment to making the community a better place; Hope Levene, recipient of the Visiting Nurse Association Award of Merit, recognizing an outstanding community leader for his or her commitment to public service and to the organization; and the Spolzino...
Upcoming HCA Learning Opportunities
Registration available at www.hca-nys.org/events.cfm

Education on Demand Series through RBC Limited

HCA is partnering with RBC Limited to offer a full slate of Education on Demand programs — conveniently delivered via webcast or DVD — focusing on home health audit trends, ICD-9-CM code updates, clinical issues, infection control and many other important topics. Individuals who sign up for both a “program” and a “series” offered through Education on Demand will benefit from a $40 discount on their registration fee!

An Inside Analysis of Home Health Audit Trends — May 25, 2009

Critical industry audit trends continue to jeopardize accurate agency quality outcomes and reimbursement. Learn how your colleagues proactively address these ongoing audit risks to minimize potential adverse impact on both quality outcomes and agency reimbursement. Sign up for this program and several others through Education on Demand by downloading the registration form at www.hca-nys.org/documents/OnDemandEducation.pdf

The Clinical Advantage Teleconferences
Next teleconference is on May 28: Hypertension

Throughout 2009, HCA is offering a slate of informative teleconferences on clinical topics designed to advance clinical knowledge and positive patient outcomes. Participants will learn more about the symptoms, signs and treatments for a range of chronic conditions and disorders, including COPD, hypertension, multiple sclerosis and leukemia. These one-hour sessions are conveniently offered by teleconference and specifically geared for nurses. Sign up for any of the following sessions:

Hypertension — May 28, 2009; Multiple Sclerosis — June 25, 2009; Leukemias — July 23, 2009; Diseases of the Bone — August 27, 2009; Diseases of the Kidney — September 24, 2009


OASIS-C Revisions: "What to Do Now ... What to Do Later"

June 2, 2009 — audio conference, 11 a.m. to 12:30 p.m.

In 2010, CMS intends to transition to a revised version of the OASIS that will allow calculation of additional process measures. This educational session will provide an overview of the types of changes expected, insight on how these changes might affect data collection practices, and operational issues agencies should be preparing to address.

Innovative Recruiting, Hiring and Retention Practices for Home Care Providers

June 8, 2009 — Marriott Westchester, Tarrytown

This dynamic seminar is focused on helping home care organizations improve their recruiting, hiring and retention practices in order to reduce cost, improve performance, and increase both patient and staff satisfaction. This program will help attendees understand how to measure, manage, and reduce the costs associated with poor hiring decisions and excessive staff turnover.

Supervision/Plus 2009

June 9, 2009 — Marriott Westchester, Tarrytown

Supervision/Plus is a management training program designed specifically for supervisors, managers and directors in home care and hospice agencies. It is a skill-development, how-to-do-it training. Supervisors and managers will learn the most effective strategies for supervising and motivating staff and the newest approaches for increasing morale, team commitment and retention of valuable employees. Supervision/Plus was developed by Dr. Robert Fazzi, a nationally recognized leader in the home care and hospice field. The program is based on Dr. Fazzi’s highly acclaimed book, Management Plus, published by McGraw Hill and named as a main selection of Fortune Magazine’s Book of the Month Club.
Story continued from p. 8

Family, recipient of the Dana Reeve Caregiver’s Courage Award, presented to a person or family who embodies the true spirit of caregiving by providing extraordinary care to a family member (Dorothy Spolzino) at home.

In a journal ad for the awards program, HCA wrote: “We at HCA know firsthand Joanne’s unparalleled dedication to New York’s home care community through her efforts aimed at protecting the home and community-based health system for patients and their caregivers; her commitment to enhancing the practice and delivery of vital home care services through insightful programming and responsible policy development; and her firm conviction that a patient’s needs are best served in the setting of his or her choice.”

“We warmly thank the VNA of Hudson Valley for recognizing Joanne’s important accomplishments and for granting her this year’s prestigious Ellen Wood Health Care Award,” HCA continued.

HCA is proud to celebrate Ms. Cunningham’s award recognition, and we are fortunate to have her as our Association leader.

HCA Unveils PAC at Annual Conference

HCA has organized a political action committee (PAC), which we unveiled at our 2009 Annual Conference this week, to expand our reach in the political process.

PACs are used today by thousands of organizations across the nation to distribute funds to political candidates for office. The HCA Board of Directors voted to create an HCA PAC to offer members and individuals concerned with the challenges confronting the home care community the means to support worthy candidates for state elected office.

A strong PAC is a useful advocacy tool that can help the home care community maintain a strong voice in public policy efforts. Participation in the HCA PAC will help us to communicate that lawmakers must recognize the true costs of caring for patients, make investments in a strong and stable home care safety net, and ensure that home care’s place at the table is well represented.

Voluntary contributions may be accepted from any U.S. citizen and for-profit corporations. Contributions from tax-exempt, not-for-profit corporations cannot be accepted. Any eligible corporation is limited by state law to contributing no more than $5,000 for all political activity during a calendar year. All employees of HCA’s member organizations can participate. Participation is voluntary and contributions are not tax-deductible.

For more information, please download HCA’s PAC informational brochure and contribution form at:

HCA Welcomes New Board Members, New Board Officers

During HCA’s 2009 Annual Conference in Saratoga Springs this week, the HCA Board of Directors convened its annual open meeting to the membership and welcomed four new Board members as well as a slate of new officers.

HCA’s new Board officers are: Chair Victoria Hines, President and CEO of Visiting Nurse Service of Rochester and Monroe County; Vice Chair Bridget Gallagher, Senior Vice President of Jewish Home Lifecare System; Secretary Susan Caputo, President of Metropolitan Jewish Health System; and Treasurer Joseph Twardy, President and CEO of Visiting Nurse Service of Schenectady and Saratoga Counties.

HCA congratulates the Board officers on their new appointments. Officers play a key leadership role in the Board’s determination of critical policy directions and stances as well as in the overall organizational management of HCA. For instance, the Board and its officers played a central role this past year in HCA’s development and strategic advancement of our comprehensive Home Care Accessibility and Efficiency Improvement Act (HCA-EIA) during State Budget negotiations, as well as other policy-related decisions. The Board also approved HCA’s recent creation of a Political Action Committee (see related p. 10 story).

HCA also warmly thanks our immediate past Board officers for their service and commitment to HCA during their tenure. These include: HCA’s immediate past Board Chair Charles Blum, Vice President of Legal and Governmental Affairs for the Visiting Nurse Service of New York; Ms. Gallagher, HCA’s immediate past Board Secretary; Ms. Hines, HCA’s immediate past Board 1st Vice Chair; Kenneth Kilroy, Senior Vice President of Progressive Home Health Services, HCA’s immediate past Treasurer; and Michelle Mazzacco, Vice President/Director of Eddy Visiting Nurse Association, and HCA’s immediate past Board 2nd Vice Chair.

The HCA’s newest Board members include the following distinguished individuals.

Susan Brett, COO/Senior Vice President for People Care, Inc.

Ms. Brett has twenty years experience in licensed home health care, having worked her way up to her present position of CEO/Senior Vice President of People Care, Inc. She brings to the HCA Board hands on experience with the various components that contribute to the quality of care service. Her experience ranges from coordination of care, to obtaining home care licensure, to overseeing day-to-day operations. Ms. Brett has also co-chaired HCA’s Downstate LHCSA (Licensed Home Care Services Agency) Forum for a number of years – one of HCA’s most effective and well attended member forums – and has had the opportunity to advocate on behalf of LHCSAs throughout New York State regarding policy, regulatory and legislative issues that impact these agencies.

Emma DeVito, President and CEO of Village Care of New York

Since 2003, Ms. DeVito has been responsible for three different types of programs under the home care umbrella. Forging strategic relationships with key acute care providers and community-based organizations, she was able to increase the number of clients served over the last five years from 871 to 3,300. Ms. Devito also brings extensive fiscal and compliance abilities to her post on the Board. She is well versed in federal and state regulations and has gained an understanding of the fiscal and operating imperatives from the managed care plan payor’s perspective. Ms. DeVito is an effective home care industry advocate. Through Village Care, she has voiced recommendations to address home care worker and nursing shortages, administrative streamlining and pay for performance. Ms. DeVito is also an active member of the New York Association of Homes and Services for the Aging (NYAHSA) and New York City’s Continuing Care Leadership Coalition.

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Maureen Hinkleman, President and CEO of Hospice Care Network

Helping patients obtain needed health care in their own homes has been the primary focus of Ms. Hinkleman's professional life. For 15 years she worked at the Visiting Nurse Service of New York, beginning as a home care nurse. Her last position in that organization was as the Executive Director of VNSNY's Hospice and its specialized home care program for persons with AIDS. Ms. Hinkleman joined Hospice Care of Long Island (now known as Hospice Care Network) in 1988 as the Executive Director when the organization had just begun servicing patients. Under her leadership, as CEO of the Hospice Care Network, the organization has become one of the largest and most well-respected hospice organizations in the state. Ms. Hinkleman has been very involved in the activities of the New York State Hospice Association, serving as its President from 1994 to 1996. In 2003, she was the recipient of the Association's Selinski Founder's Award for Leadership in Hospice. Ms. Hinkleman also served on the Board of the National Hospice and Palliative Care Organization, and as its Board Chair from 2003 to 2005.

Karen O’Kane, Vice President of Continuing Care at Brookhaven Memorial Hospital Medical Center

Ms. O’Kane has spent the better part of her health care career in home care. After serving 10 years at the Visiting Nurse Association of Brooklyn, she moved on to Brookhaven Memorial Hospital Medical Center on Long Island. She assumed progressively more responsible leadership positions at Brookhaven and is now Vice President of Continuing Care. This encompasses administrative responsibility for home care, hospice and hemodialysis. Under her leadership, Brookhaven’s home health agency has seen much growth and expansion and is now one of the largest hospital-based home care providers in Suffolk County. Under her guidance, the home health agency successfully implemented point of care technology nine years ago. Ms. O’Kane has been instrumental in securing two state Department of Health grants and one HEAL NY grant for implementation and expansion of the telehealth program. She has been a longtime active member of HCA.

HCA welcomes the newest members of our Board and looks forward to working closely with them on home care policy, regulatory and fiscal issues.

DOH Conducts Charity Care Survey – HCA Objects to Timing and Content

On Monday, the state Department of Health (DOH) e-mailed Certified Home Health Agencies (CHHAs) a 23-question survey on charity care to be answered by June 1, 2009. To account for the Memorial Day holiday, HCA has since requested a deadline extension for completing the survey and at ASAP press time was awaiting word from DOH on the request.

Several weeks prior to the enactment of the State Budget, HCA had been asked by DOH to review a draft of the survey. At that time, HCA questioned the timing and content of the survey, particularly given that the State Budget proposal had included HCA’s recommended modifications to the charity requirements — namely, a reduction of the minimum percentage (intended to be consistent with that of hospitals) to 0.5 percent and the establishment of a community service plan requirement that would better reflect the wider array of charitable services performed by agencies (services not accounted for in the limited definition of charity care under prior regulations).

HCA vigorously communicated the position to DOH that the Department should wait until the new requirements were enacted so that the new survey could be constructed based on the new system rather than on the current system. HCA also offered other specific recommendations with respect to the content of the draft survey. Many of these recommendations by HCA were well received by DOH, which committed at that time to revise and to share the revised survey draft with HCA prior to requesting provider agencies’ completion of it.

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In the wake of the survey’s release this week by DOH, HCA has brought our questions and concerns to senior officials at DOH — including our concern that the survey was in fact not shared with HCA prior to release — and at press time is awaiting a response. In the meantime, DOH’s request of providers to complete the survey still stands until HCA and/or providers are otherwise advised.

HCA will keep members closely apprised of new developments related to this issue.

For further information, contact Patrick Conole at (518) 810-0661 or at pconole@hcanys.org.

**N1H1 Virus Continues to Spread in NYC**
*Despite spread, elderly appear to be less susceptible*

According to the most recent alert from the New York City Department of Health and Mental Hygiene, Novel H1N1 influenza is now widespread in New York City. Since there are more persons infected, cases of hospitalized and critically ill patients are also increasing.

Patients presenting with influenza-like illness in New York City health care facilities at this time can be presumed to have novel H1N1 infection, as we are seeing very little seasonal influenza A H3N2. Because it is not possible to prevent community transmission of influenza and mild illness at this time, the Health Department is focusing its efforts on reducing and preventing severe outcomes due to infection with novel H1N1 influenza.

Although outbreaks have been increasing among school-aged children, it is important to note that emergency department syndromic data do not show increases in influenza-like illness visits in persons over 65, and no outbreaks in long-term care facilities for the elderly have been reported to date.

The complete alert can be viewed at [http://www.hca-nys.org/documents/HAN19InfluenzaAH1N1.pdf](http://www.hca-nys.org/documents/HAN19InfluenzaAH1N1.pdf).

For more information, contact Lexi Silver at (518) 810-0658 or asilver@hcanys.org.

**Study Finds Home Health Services Save Billions**

A new study by Avalere Health LLC concludes that patients receiving Medicare home health services soon after a hospital discharge save Medicare over $1.71 billion compared to those who used other post-acute services.

The study also determined that an additional $1.77 billion in savings is possible if those other patients used home health services. The study focused on patients with congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD), and diabetes. The use of “early” home health (defined as the use of home health within the same quarter as the acute hospital discharge) was also associated with an estimated 24,000 fewer hospital admissions.

This study will support HCA and member advocacy for rejection of the home care Medicare proposals in the President’s 2010 budget that will cut approximately $13 billion from the Medicare home health benefit over the next five years. These proposals include a five-year freeze in the Medicare home health market basket update, an accelerated implementation of the 2.71 percent “case-mix creep” adjustment for 2011 to take effect in 2010, and development of bundled payments covering hospital and other post-acute settings.

HCA has aggressively advocated against these proposals through communications and numerous meetings with Members of New York’s Congressional Delegation and Senators Charles Schumer and Kirsten Gillibrand, utilizing our federal legislative affairs firm Winning Strategies.

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For more information, contact Andrew Koski at (518) 810-0662 or akoski@hcany.org.

HCA Participates in HEAL NY Phase 12 Applicant Conference


Phase 12 is intended to assist communities to organize, finance and develop alternatives for care through coordination of a variety of licensed residential programs, development of other residential options, and reductions of Residential Health Care Facility (RHCF) certified inpatient bed capacity. Access to Assisted Living Program (ALP) beds is also part of this initiative.

Proposed projects should represent multi-agency arrangements and make use of local resources available for development of housing with coordinated medical services, licensed residential programs – such as adult care facilities (ACFs), assisted living residences (ALRs) and enriched housing (EH) – and downsized residential health facility capacity to provide meaningful alternatives to nursing homes.

Eligible applicants include Certified Home Health Agencies; nursing homes; ALPs; ALRs; EH programs; ACFs; continuing care retirement communities; not-for-profit senior housing corporations; and others. During the question-and-answer period, HCA asked if HEAL NY 12 funding could be used to provide non-residential options (Long Term Home Health Care Program, Adult Day Health Care) such as increasing slots for existing programs or establishing new programs. The answer was initially no, but we were told to send the question in writing to give DOH time to review the inquiry and to provide a formal response.

It is expected that the grant term will begin on or about October 1, 2009 and run for a period of up to 24 months. HEAL NY 12 will provide up to $175,000,000 in grant funds for eligible projects. Grant requests within this category may not exceed $25 million.

Applicant questions are due by May 29, 2009 and applications are due July 14, 2009. DOH will post questions and answers as they become available at http://www.health.state.ny.us/funding/rfa/0905041240/index.htm.

The HEAL NY 12 request for grant applications is at:

For more information, contact Lexi Silver at (518) 810-0658 or asilver@hcany.org.

HCA Input Sought on Proposed EISEP Consumer Direction Regulations

The state Office for Aging (NYSOFA) has sought feedback from HCA on its proposed changes to existing regulations that would incorporate consumer direction into the Expanded In-Home Services for the Elderly Program (EISEP).

HCA has also been invited to a meeting with NYSOFA and other interested stakeholders next week to review the proposed changes and provide feedback. The proposed regulations make changes to the EISEP regulations that cover the provision of in-home and case management services.

Continued on next page
Yesterday, HCA sent members the draft regulatory changes and sought their comments.

In a related matter, HCA is a member of the Nursing Home Diversion Modernization Grant Subcommittee which has provided feedback to NYSOFA concerning its recently awarded grant to provide consumer-directed home and community-based services under a new Nursing Home Diversion program administered by the federal Administration on Aging. Under this program, services will be provided to older Americans and veterans of all ages who live in Onondaga, Oneida and Broome counties and who are not eligible for Medicaid, but who are at high risk of nursing home placement and Medicaid spend-down.

HCA recently sought and obtained helpful feedback from members on DOH’s recently released proposed regulations for the Consumer Directed Personal Assistance Program or CDPAP (see last week’s ASAP).

For more information, contact Andrew Koski at (518) 810-0662 or akoski@hcany.org.

NY Agencies Invited to Participate in New Performance Improvement Pilot

Health Insight, Utah’s Quality Improvement Contractor, has extended an invitation to New York Medicare certified home health agencies to participate in a free performance improvement pilot called “Keeping Patients at Home,” funded by the Agency for Healthcare Research and Quality (AHRQ).

During a study conducted last year, Health Insight found that 30 percent of hospitalizations were preventable. Of those, 80 percent resulted from a specific and identifiable cause.

The Keeping Patients at Home program is designed to help home health agencies address the most important causes of preventable hospitalizations by using practical, self guided materials that draw upon recognized professional practice standards and Medicare coverage guidelines. In contrast to other current programs, the program targets fundamentals of professional nursing practice in home care. It is not a toolkit or a collection of recommended practices.

The program will include the following modules:

- Patient assessment (fall 2009) – The challenges of accurate patient assessment and Outcome and Assessment Information Set (OASIS) data reporting have long been recognized. Associated problems impact patient care and the financial viability of home health agencies. This module will highlight common issues and improvement strategies.

- Patient monitoring and responding to changes in condition (fall 2009) – Delayed recognition of changes in patient status and/or communication failures are common contributors to preventable hospitalizations. This module will support agencies in establishing effective and reliable patient monitoring and communication practices.

Modules will include self assessment tools, staff training materials, process reliability and productivity tools, and strategies for monitoring and ongoing improvement.

While participation is limited, there is no charge for home health agencies to participate in the program or to use materials. Agencies must register through a confidential web-based system and provide feedback on program materials. The web address to register is http://kpah.healthinsight.org.

For more information, please contact Cher Edmonds, Keeping Patients at Home Study Coordinator, at (801) 892-6638 or cedmonds@healthinsight.org.
Free Online Course through Care2Learn

Members and colleagues of HCA have the opportunity to choose from over 400 online courses related to the health care profession through our new partnership with Care2Learn, the online learning platform.

Online learning allows you to keep up with your competencies at your convenience, since courses are available 24/7. You also will save time away from work and travel expenses.

What’s more, by accessing Care2Learn courses through HCA’s website at www.hca-nys.org, you will automatically receive a ten percent discount over the general public.

We invite you to register for the complimentary trial course Survival Skills for Professional Caregivers of the Elderly (1089). This course will only be available for free until June 30. Just click on the Care2Learn logo at www.hcanys.org and register as a new student. Enter coupon code HCANYS 1089 in the appropriate box and you will be on your way to the best possible learning experience to meet the demands of your profession.

HCA Education and Research is pleased to offer you another avenue for learning through Care2Learn. Encourage your co-workers and colleagues to try out the free Care2Learn course and sign up for additional courses as well.

For more information, contact Lynda Schoonbeek at Lschoonbeek@hcanys.org.

Joint Commission Seeks Comments on Safety Patient Goals

The Joint Commission is seeking comments on revisions to the 2009 National Patient Safety Goals (NPSGs), including home care, and the 2009 Universal Protocol for various other health care settings. This initiative is a first step in The Joint Commission’s efforts to focus on those issues that are of highest priority to safety and quality.

The proposed home care revisions for NPSGs in 2010 are at http://www.jointcommission.org/Standards/FieldReviews/fr_npsg_ome.htm. In this document, the current (2009) requirement is listed in regular type and the proposed revision follows it in bold type. It also identifies elements of performance and/or implementation expectations proposed for deletion or movement to standards.

Feedback on the National Patient Safety Goals (NPSGs) and Universal Protocol, if applicable, will be accepted for six weeks beginning on May 12, 2009.

More information is at http://www.jointcommission.org/Standards/FieldReviews/.

AOA Announces Grants for Aging in Place Programs

The federal Administration on Aging (AOA) has announced $5 million will be available for Community Innovations for Aging in Place (CAIP) grants.

According to the press release announcing the grant, “these new projects will promote aging in place for older individuals by developing and implementing innovative, cost-effective, comprehensive and coordinated health and
social services including evidence-based disease prevention and health promotion services that allow them to continue to live in their communities among their families and friends.”

Up to $4.5 million will be available to fund up to 15 new CIAIP grants. These grants will be funded at a federal share of approximately $250,000 to $500,000 per year for a project period of three years, contingent on the availability of federal funds. The AoA will also award one grant of up to $500,000 for a technical assistance cooperative agreement that will support the CIAIP grantees.

Eligible applicants for $4.5 million in CIAIP grants include nonprofit health or social service organizations, faith-based neighborhood organizations, community-based nonprofit organizations, area agencies on aging, local government agencies, or tribal organizations. Eligible applicants for the cooperative agreement include nonprofit organizations or partnerships of nonprofit organizations.

Successful applicants for the CIAIP grants include organizations that have demonstrated:

- Expertise in the provision of health and/or social services for older adults; and
- Experience in working with local aging network agencies, community-level aging service provider organizations, and community health provider organizations.

The closing date for CIAIP and cooperative agreement applications is July 15, 2009.

For more information, visit http://www.aoa.gov/AoARoot/Grants/Funding/index.aspx.

**HHS Provides Information on HIT Provisions of Federal Recovery Act**

The U.S. Department of Health and Human Services (HHS) has provided some information on its plans to implement the health information technology (HIT) provisions of the American Recovery and Reinvestment Act of 2009 (ARRA).

ARRA included $20 billion for investing in HIT infrastructure and Medicare and Medicaid incentives to encourage doctors and hospitals to use HIT to electronically exchange their patients’ health information.

Some programs that are expected to be funded include: (i) development of health information exchange capabilities at the regional and state levels; (ii) creation of regional technology extension centers to help providers install electronic health records (EHRs); (iii) efforts to train the workforce to assist with HIT implementation; (iv) educational programs for medical students; (v) grants and loans to states to assist with HIT adoption and interoperability; and (vi) temporary Medicare and Medicaid HIT incentive payments to hospitals and non hospital-based physicians to encourage use of HIT.

The HHS information is in two documents that are available at the following sites: http://www.hhs.gov/recovery/reports/plans/onc_hit.pdf and http://www.hhs.gov/recovery/reports/plans/hit_implementation.pdf.

For more information, contact Lexi Silver at (518) 810-0658 or asilver@hcanys.org.
The NYC Health and Aging Departments Offer Free AC to High Risk Seniors

The New York City Health Department and the city’s Department for the Aging are promoting the installation of free air conditioners to low-income seniors over age 60 in New York City.

Patients can qualify for this program by meeting income criteria and submitting a health care provider's note affirming that the patient’s health condition increases the risk for heat-related illness.

Funding is limited, so providers are encouraged to target patients at greatest risk. Complete information about the program and the 2009 application are available at:

U.S. Fraud Prevention & Enforcement Action Team Announced

Kathleen Sebelius, Secretary of the U.S. Department of Health and Human Services (HHS), and U.S. Attorney General Eric Holder have announced the creation of a new interagency Health Care Fraud Prevention and Enforcement Action Team (HEAT) to combat Medicare fraud.

Ms. Sebelius and Mr. Holder also announced the expansion – to Detroit and Houston – of Medicare Fraud Strike Forces, which currently operate in south Florida and Los Angeles to fight Medicare fraud on a targeted local level.

The HEAT team will include senior officials from the Department of Justice and HHS who will build upon and strengthen existing programs while also investing new resources and technology to combat fraud. The team will build on demonstration projects by the HHS Inspector General and the Centers for Medicare and Medicaid Services (CMS) that focus on suppliers of durable medical equipment (DME).

Other initiatives include:

- Increasing training for providers on Medicare compliance and fraud identification and prevention.
- Improving data sharing between CMS and law enforcement to identify patterns that lead to fraud.
- Strengthening program integrity activities to monitor Medicare Parts C (Medicare Advantage plans) and D (prescription drug programs).

For further information, contact Patrick Conole at (518) 810-0661 or at pconole@hcanys.org.

NPI Required for Telephone Users of Medicaid Eligibility Verification System

The state Department of Health (DOH) recently mailed a letter to providers who use the eMedNY Telephone Verification System (touch-tone telephone access) for eligibility verifications, service authorizations, prior approvals and check amount inquiry transactions to Medicaid.

The letter (available at http://www.emedny.org/NPI%20Compliance%20Letter-MEVS.pdf) informed these providers that on September 1, 2008, New York Medicaid implemented the National Provider Identifier (NPI), which required Medicaid providers to use their NPI for the above transactions.

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When prompted to “enter provider number,” providers must enter their ten-digit NPI, which is the same NPI that is used to bill claims to New York Medicaid. When entering the “referring or ordering” provider numbers, providers should also enter their NPIs. Providers that do not know the NPIs of their referring or ordering providers can refer to the eMedNY MEVS provider manual at [http://www.emedny.org/providermanuals/index.html](http://www.emedny.org/providermanuals/index.html) for further instructions.

DOH and the Computer Science Corporation (CSC), the state’s Medicaid fiscal intermediary, have been monitoring the progress being made by the Medicaid provider community toward full NPI compliance on all transactions. Although most providers have achieved compliance for claim submissions, the majority of providers are not in compliance for some of the other submissions.

Providers need to examine their submissions for all transactions as soon as possible to move to full NPI compliance. Failure to do so will result in future rejections or denials of any of these transactions and will ultimately result in payment delays.

*For further information, contact Patrick Conole at (518) 810-0661 or at pconole@hcany.org.*

**NGS Updates**

National Government Services (NGS), New York’s principal regional home health intermediary (RHHI), has posted the following updates.

- **Memorial Day** – In observance of Memorial Day, the NGS office will be closed on Monday, May 25. This includes the Provider Contact Centers and the Electronic Data Interchange (EDI) Help Desk, which will reopen on Tuesday, May 26, 2009 at 8 a.m. for normal business hours.

  The EDI Gateway will be open for Trading Partners to exchange transactions on Monday, May 25. Claims received after 5 p.m. on Friday, May 22 through 5 p.m. on Tuesday, May 26 will be delivered on May 26.

- **Electronic Data Interchange Online Enhanced Request Forms** – Beginning Monday, June 8, NGS will no longer accept handwritten or typed EDI Enrollment applications. Third-party billers, clearinghouses, billing services, and providers will be required to use NGS’ new online forms to request EDI products and services. The enhanced forms can be found on NGS’ website.

*For further information, contact Patrick Conole at (518) 810-0661 or at pconole@hcany.org.*

**DOH Announces Changes in Medicaid Treatment of Automobiles**

The state Department of Health (DOH) this week sent instructions to local department of social services commissioners reminding them of changes, effective April 1, 2008, in the treatment of automobiles when determining Medicaid eligibility for non-SSI related individuals and in application of the transfer of assets rule for single individuals and childless couples.

For all Medicaid individuals, excluding those who are aged, blind or disabled (known as SSI-related), the policy for the treatment of automobiles has been standardized: one automobile of any value is exempt as long as it is being used by the household, and a second automobile may be exempt if there is a medical need for it or if it is being
used for employment related activities. A third vehicle is also exempt if there is a child under 21 years of age in the household, and the vehicle is being used for school attendance, employment or medical purposes.

For aged, blind or disabled individuals receiving Medicaid, the treatment of automobiles remains the same. The value of the first vehicle is not counted if it is being used; if not in use, the full equity value is counted toward the Medicaid resource level. A second vehicle is exempt if used for medical or employment-related activities.

DOH’s instructions also remind counties that the transfer of assets rule was eliminated for single individuals and childless couples effective April 1, 2008. Single individuals or childless couples do not have to provide documentation of a transfer of assets in the past twelve months. However, if such an individual is institutionalized and eligible for Medicaid payment of nursing facility services, chronic care budgeting is applied and the transfer of assets provision is in effect.

The instructions are at:
http://www.health.state.ny.us/health_care/medicaid/publications/docs/gis/09ma016.pdf

The automobile rules applied to SSI-related individuals are in the Medicaid Reference Guide at:
http://www.health.state.ny.us/health_care/medicaid/reference/mrg/resources.pdf (see page 286)

For more information, contact Andrew Koski at (518) 810-0662 or akoski@hcanys.org.

Member News

A new report authored by HCA Board Member Alene Hokenstad of the Medicaid Institute at United Hospital Fund – titled An Overview of Medicaid Long-Term Care Programs in New York – provides an overview of the current organization of long-term care services under New York’s Medicaid program, a September 2007 snapshot of program enrollment and associated annual spending, and a summary of the rules that govern how each program operates.

Members can download the report at:

Health Care Resources

Publications

- “Assessment of Anxiety in Older Home Care Recipients,” The Gerontologist
  http://gerontologist.oxfordjournals.org/cgi/reprint/49/2/141

- “Safe Medicine Use and Poison Prevention Tips,” by the U.S. Department of Health and Human Services Health Resources and Services Administration

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• “The New York NORC-Supportive Service Program,” by UJA-Federation of New York
  

• “Almanac of Chronic Disease,” by the Partnership to Fight Chronic Disease
  
  http://www.fightchronicdisease.org/pdfs/PFCDAlmanac_Final2.pdf

• “Medicaid Managed Care Cost Savings – A Synthesis of 24 Studies,” by the Lewin Group
  
  http://www.ahip.org/content/default.aspx?docid=27090

• “Consumer Choice, Risk and Home Care in Massachusetts,” presentation by Elder Services of Merrimack Valley
  

• “The Promise of Care Coordination: Models that Decrease Hospitalizations and Improve Outcomes for Medicare Beneficiaries with Chronic Illnesses,” by Mathematica Policy Research
  

For more information, contact Andrew Koski at (518) 810-0662 or akoski@hcans.org.