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Home Health Care Services in New York State Uniquely Challenged by Punishing Gas Prices

*Solutions to nation's fuel crisis must consider impact on most vulnerable citizens,
particularly those with high-need medical conditions requiring in-home care*

In weighing the impact of rising gasoline prices and solutions for our current fuel crisis, the media and government officials should consider a vital sector of health care especially vulnerable to exorbitant fuel costs – home health care – as well as the patients who are served by visiting home health nurses, aides and therapists.

Rising gas prices present a unique challenge to the delivery of home health care services throughout New York State, and across the nation, said Joanne Cunningham, President of the Home Care Association of New York State (HCA), a statewide organization of home care providers.

“For our providers, the patient care environment is not restricted to a single facility at a defined location, but, rather, across entire geographic regions, often necessitating home care staff to drive many miles to provide vital services to the most needy individuals in their homes,” Cunningham said. “For Medicare and Medicaid certified providers who must absorb transportation costs, neither reimbursement structure recognizes or anticipates the kind of volatility we are seeing in today’s fuel market.”

“Home health care is a cost-effective model of care in large part because our infrastructure needs are not rooted in bricks and mortar,” Cunningham added. “Patient care provided in the home is a less costly alternative to constructing, maintaining, and powering an entire health care facility. However, rising transportation costs pose significant challenges to home care delivery, particularly in areas of New York where home health care providers may be servicing patients in multiple counties and during a time when providers are already experiencing workforce recruitment and retention challenges.”

New York State has 43 counties that are classified as rural, Cunningham noted. Of these, many are served exclusively by only one or two Medicare/Medicaid certified agencies.

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Home health care agencies rely on transportation to provide skilled nursing, therapy, home health aide and other vital health care supports in the homes of elderly and disabled adults and medically fragile children. Patients receiving home health care include the homebound as well as those recovering from an acute hospital stay or whose medical condition would otherwise make them eligible for institutional care in a hospital, nursing home or special-needs facility.

To provide in-home health services, aides and clinicians dispatched from a central administrative site must often travel miles to reach patients, sometimes while transporting durable medical equipment, monitoring devices and other essential clinical tools.

A study released in late June by the National Association of Home Care & Hospice (NAHC) shows that the number of miles driven nationwide by nurses, therapists and home health aides who serve chronically ill, elderly and disabled patients reached 4.8 billion in 2006. NAHC also reported that escalating gasoline expenses are threatening the ability of home care providers to serve patients, especially in remote locations.

In New York State, home health care providers conducted more than 57 million visits in 2006, resulting in more than 493 million miles driven, according to the NAHC report.

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*Committed to the principles of high-quality and cost-effective community based health care, the **Home Care Association of New York State (HCA)** assists its members on state and federal legislation, regulations and reimbursement issues pertinent to the home health field. As the premier home health care association in New York State, HCA represents more than 400 home health care providers, individuals and associate members who collectively provide service and support to thousands of New Yorkers.*