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The Honorable Kathy Hochul
Governor of New York
NYS State Capitol
Albany, NY 12224
Sent via email

RE: Independent Living Community's 2022 budget priorities

Dear Governor Hochul:

The New York Association on Independent Living (NYAIL) is a statewide membership organization of Independent Living Centers (ILCs) across New York State. ILCs are cross-disability, locally administered not-for-profit organizations, run by and for people with disabilities. We are writing regarding our top Executive Budget priorities for SFY 2022-23. New York State can be a champion for the rights and independence of people with disabilities by including the below priorities in the Executive Budget, all of which would help advance the State's integration efforts for people with disabilities.

During the pandemic, the dangers of institutionalizing people in an antiquated system of care were highlighted for all to see. Further, it has only become more difficult for people to access community-based long-term supports and services (LTSS) since the pandemic. Little was done as part of last year's budget to address these barriers and make it easier for people to leave institutions and live in the community. The State must take steps to prevent this crisis from reoccurring by expanding access to LTSS and actively promoting this as an option to the broader community. Investing in the below priorities would show real leadership from the State in providing safer and more desirable options to seniors and people with disabilities and would help save lives.

- **Increase base funding for Independent Living Centers (ILCs) to \$18 million in SFY 2022-23 as supported by the State Education Department and Board of Regents.**

Independent Living Centers (ILCs) provide critical services to people with disabilities designed to assist them in navigating the ever-changing service system in order to live independent, fully integrated lives in the community. ILCs provide a wide range of critical services based on the local needs, all of which are aimed at addressing the social determinants of health: education, employment, housing, transportation, and other independent living skills. ILCs acted quickly in the early weeks of the pandemic to help meet the needs of people with disabilities in their local communities, including by making wellness checks, delivering meals, and even providing iPads to residents in nearby nursing facilities.

Centers have even helped with vaccination efforts by becoming sites where people with disabilities could get vaccinated, providing accessible, culturally competent assistance.

ILCs have been severely underfunded for the better part of two decades while the cost of providing services has increased dramatically, creating a crisis for centers and the people with disabilities they serve. We are calling on this administration to provide necessary support to the network of Independent Living Centers so they can meet the needs of the over 100,000 people with disabilities they serve annually by increasing their funding to \$18 million.

- **Address the home care crisis by increasing wages for home care workers to 150% of the State's minimum wage, as outlined in the Fair Pay for Home Care Act.**

There has long been an aide shortage in parts of the State, making it difficult for people in certain regions to obtain home care. However, over the past few years, this crisis has worsened to the point where it is an acute crisis in all parts of the State from Long Island to Buffalo. The home care crisis has surpassed the lack of accessible housing as the primary barrier to transitioning people back home. The State has an obligation under the Supreme Court decision, *Olmstead V. L.C.*, to provide disabled people with supports and services in the most integrated setting, their home communities. Yet the lack of available home care is making this an impossibility for many.

The home care crisis is primarily due to falling wages and disparate treatment of women and people of color who comprise most of the home care workers. In 2006, home care workers earned 150% of minimum wage, a time when people were more readily able to access the hours they were approved for. Yet, these wages remained stagnant while wages increased in other sectors. Now, home care workers earn minimum wage, while workers in fast food restaurants earn at minimum \$2.50 an hour more in all counties north and west of Westchester County. The Fair Pay for Home Care Act would effectively address this crisis, ensuring seniors and people with disabilities are able to obtain home care, while the people who provide their services can get paid a living wage. NYAIL joins with others in the Caring Majority calling for Fair Pay for Home Care to be included in the Executive Budget and highlighted in the State of the State address.

- **Create equity in Medicaid eligibility for seniors and people with disabilities**

New York must act to address a blatant inequity that makes it harder for people with disabilities and those over 65 to qualify for Medicaid. The Affordable Care Act (ACA) made it easier for working families and low-income individuals under 65 to qualify for Medicaid by raising the income eligibility to 138% of the Federal Poverty Level (FPL). However, the ACA did not increase income eligibility for disabled people and seniors, and as a result, the income eligibility limit for these groups is merely 84% of FPL. This means that single non-disabled individuals under age 65 can earn up to \$1,482 monthly and qualify for Medicaid, while seniors and people with disabilities can only qualify if their income is at or below \$884

monthly. In addition, only seniors and disabled people are subject to asset tests when applying for Medicaid.

Access to Medicaid is critical for seniors and people with disabilities, especially as it is the only insurer who covers comprehensive community-based long-term supports and services (LTSS). Other states like California have addressed this inequity which disproportionately impacts people of color by eliminating the asset test for these populations and raising income eligibility limits. It is time for New York to step up and join states like California by lifting income limits to 138% of FPL and eliminating the asset test for these populations.

- **Repeal cuts to eligibility for Medicaid advanced during the Medicaid Redesign Team (MRT) II which makes it more difficult for people to receive vital community-based long-term supports and services (LTSS).**

The Medicaid Redesign Team (MRT) was directed to advance policies that would achieve Medicaid savings without impacting access to services. Yet, multiple proposals were advanced through this process which would make it much more difficult for certain people to receive community based LTSS. In particular, the State raised the eligibility threshold for qualifying for LTSS. Now, people must require assistance with physical maneuvering with at least three activities of daily living (ADLs) to qualify, or they must have a dementia or Alzheimer's diagnosis and be assessed as requiring supervision for at least two ADLs. This effectively eliminates level I home care, which provided many people with vital assistance with activities such as cooking and cleaning (also known as Instrumental Activities of Daily Living, or IADLs) to remain in their homes, but who did not require assistance with ADLs. It also sets up a discriminatory eligibility standard which bases eligibility in part on diagnosis. This policy, if enacted, would put many people at risk of injury and hospitalization and institutionalization. NYAIL urges the State to repeal this policy in the proposed Executive Budget, as laid out in A5367/S5028.

- **Increase the State's share of funding for the Long-Term Care Ombudsman program by \$6.2 million.**

The Long-Term Care Ombudsman Program (LTCOP) serves as an advocate and resource for people living in nursing facilities and other institutions. The program is intended to promote and protect residents' rights as well as their health and safety by receiving, investigating and resolving complaints made by or on behalf of residents. We saw during the pandemic the need to expand this program to ensure people can access an ombudsman when needed. The State must increase its share of funding to adequately serve the State's population of people in long-term care facilities.

The LTCOP receives Federal funding, but it is insufficient to provide adequate services in NYS. Despite this, New York's match is one of the lowest when compared to other States, leaving providers overly reliant on volunteers. This has become a huge problem as it has become increasingly difficult to recruit volunteers for the program and it is crucial the program have a presence in facilities across the State. To address this crisis, we urge the

State to increase funding by \$6.2 million. This would double the staff, making it a more reliable program and less reliant on volunteers.

- **Increase funding for Access to Home to \$10 million.**

Access to Home is an important program administered by NYS Homes and Community Renewal (HCR) that provides funding for home modifications to allow individuals with disabilities and older New Yorkers to stay in their homes and out of costly institutions. For many people, the addition of a ramp to their front door makes the difference between being able to leave the house and being homebound.

Access to Home was cut by 75% several years ago. Ever since, it has been funded at a mere \$1 million Statewide, leaving many parts of the state without the program and resulting in years long waiting lists. Meanwhile, the State created Access to Home for Heroes, which provides home modifications to veterans. The program initially received a \$19.6 million allocation from the JP Morgan settlement. While NYAIL supports providing home modifications to veterans, this program has been undersubscribed with the bulk of this allocation still unspent years later. Part of the reason for this is the U.S. Veteran's Administration provides home modifications to disabled veterans as well, and their program is more generous. We urge the State to increase HCR funding to \$10 million for this program, because by investing in Access to Home, seniors and people with disabilities around the State will remain in their home and out of institutions, and the State will more than recoup this investment in other State agency expenditure reductions.

We would welcome the opportunity to meet with you and discuss the above concerns.

Sincerely,



Lindsay A. Miller
Executive Director

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