

September 19, 2011

Comments to the Managed Long Term Care Implementation and Waiver Redesign Work Group public hearing on behalf of the New York State Nurses Association

The New York State Nurses Association is the professional association representing the interests of the over 270,000 registered nurses in New York, and with approximately 37,000 members, is the largest union for registered nurses in the state.

In these remarks, we would like to address role of the registered nurse in long term care.

New York ranked forty-first in a recent study that measured state-level performance of long-term services and supports that provide assistance to older people and adults with disabilities¹. The report, which was produced by the AARP, The Commonwealth Fund and the Scan Foundation, demonstrates that we must do a better job of meeting the needs of our older and disabled residents.

The Nurses Association applauds the Medicaid Redesign Team's efforts at implementing care coordination as a way to provide high-quality, cost-effective care. Any Care Coordination Model should include registered nurses in a significant way in the initial assessment, care management, provision of complex care and in the ongoing quality assessments of all individuals receiving services.

The New York State Nurses Association has historically supported self-directing individuals in their efforts to receive appropriate care in their homes. It is essential though, that the individuals or the family members, who are participating in consumer-directed models of care, be self-directing. It is equally important that the registered nurse determines that the individual or family member is appropriate for a consumer-directed model of care and that the registered nurse be involved in an ongoing and regular basis, in evaluating the quality of the care provided. There must be robust consumer protections in place and the process for un-enrolling from a consumer-directed model of care should not be a cumbersome one, if an individual wishes to do so.

There are opportunities in the Affordable Care Act that can be leveraged in order to enhance the long term services and support provided for New Yorkers. Some of these opportunities include the

¹ <http://longtermscorecard.org/>

establishment of health homes with nurse practitioners as team members and/or leaders and also accessing the Independence at Home program from the Affordable Care Act, which reimburses for nurse practitioner-directed, home-based primary care teams.

Another opportunity resulting from the Affordable Care Act is the expansion of transitional care services through programs of the Federal Coordinated Health Care Office – this office is intended to better integrate Medicare and Medicaid programs to improve care continuity, and to ensure safe and effective care transitions for dual eligible individuals (those who are eligible for both Medicaid and Medicare). Transitions of care are vulnerable periods that contribute to unnecessarily high rates of health service use and healthcare spending; transitions of care expose chronically ill people to lapses in quality and safety.² Transitions have also been associated with increased rates of potentially avoidable hospitalizations. The knowledge and skills of the registered professional nurse are ideally suited to the effective management of care transitions.

One final point we would like to make regarding long term care services in New York state is the current lack of consistency in training and certification of unlicensed, direct care workers across long term care settings. The Nurses Association recommends requiring the uniform training and certification of all unlicensed, direct care staff in order to ensure that all personnel who provide direct care to residents have received a uniform training program with a standardized curriculum. Completion of the curriculum and subsequent certification should be required of all individuals employed as unlicensed, direct care staff across all long term care settings.

Thank you for the opportunity to provide comments on this process.

² Naylor, M.D., Aiken, L.A., Kurtzman, E.T., Olds, D.M. & Hirschman K.B. (2011). The importance of transitional care in achieving health reform. *Health Affairs*, 30(4): 746–754.