

Center for Disability Rights, Inc.

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Support the rights of people with disabilities by creating Advanced Home Health Aides.

The Center for Disability Rights urges you to **support the creation of Advanced Home Health Aides**, (AHHAs) by amending the Nurse Practice Act in order to allow nurses to assign health-related tasks to trained, certified, experienced home health aides. The creation of AHHAs will protect the right of New Yorkers with disabilities who have been **forced into institutions**, or who are at risk of institutionalization, to live instead in home and community settings.

Allowing nurses to supervise AHHAs who are performing health-related tasks **dramatically increases** the scope and availability of home and community based services for people with disabilities. Making these services widely available is an **enormous advance toward the complete independence and integration** of people with disabilities into our communities.

The Nurse Practice Act must be amended in order to allow nurses to assign these tasks to the AHHAs.

People with disabilities, nurses, home care providers, and other stakeholders agree that New York should create AHHAs.

A workgroup of stakeholders, including representatives from the disability community, the New York State Nurses Association, and home care providers, has come to agreement on the tasks that nurses can safely assign to attendants. **All workgroup stakeholders support the creation of AHHAs**, and the workgroup has specified these tasks and made recommendations for training and supervision requirements. **In order for the AHHA proposal to move forward, the legislature must amend the Nurse Practice Act.**

Assembly Bill 7188 includes amendments to the Nurse Practice act that will create AHHAs. The Assembly proposal includes language that prevents a nurse from assigning to an AHHA the administration of routine subcutaneous injectable medication other than insulin and heparin. This restriction goes beyond what the workgroup determined to be safe, and **unnecessarily narrows the scope** of the AHHA program.

We urge you to pass legislation which will create AHHAs and allow the supervising nurse to assign to them all of the tasks which the stakeholder workgroup has determined may be safely

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assigned, in order to ensure that as many people with disabilities as possible are able to live in their own house or apartment.

Consumer Directed Personal Attendants already safely perform the health-related tasks that a nurse may assign to an AHHA.

Consumer Directed Personal Attendants (CDPAs) are already able to perform health-related tasks for consumers, and people with disabilities have **better health outcomes and live longer** with CDPA services than in an institution. CDPA services are not always available, though: individuals who are not self-directing – that is, who are not willing or able to hire, train, supervise, schedule, and fire their own attendants, and who do not have someone else who can direct for them, require a different option. Private duty nursing, although technically an option, is not realistically available to those who cannot afford it. AHHAs are a safe, necessary service that will meet the needs of people with disabilities who are not self-directing and have no other alternatives when it comes to staying in their home.

The AHHAs will bring in hundreds of millions of dollars through Community First Choice.

Not only will the AHHA proposal make dramatic improvement for New Yorkers with disabilities, it will also **help New York to increase its share of funding** available through Community First Choice (CFC). CFC is a Federal funding mechanism that offers states additional Medicaid funding for certain services provided in home and community based settings. In order to implement CFC, New York must make these services available to **all disabled people, regardless of their disability**, not just those who use CDPA services. The creation of AHHAs will enable all New Yorkers with disabilities to receive services in the community, and will allow the state to implement CFC.

A recent fiscal analysis indicates that when New York implements CFC, the state stands to receive **between \$299 million and \$439 million in additional funding per year**, with the higher figure attainable as more people with disabilities and elderly people live and receive services in home and community settings.¹ In order to accomplish this, **home and community based services must be made widely available**. The AHHA proposal greatly increases the availability of those services available, which in turn helps the state to maximize its funding through CFC.

Amending the Nurse Practice Act to allow delegation of tasks to AHHAs will **enable more people with disabilities to live in freedom** in integrated, community-based settings rather than being forced into nursing facilities and institutions, in turn increasing the share of funding that New York will receive under CFC. It is **vitaly important to the Disability Community** for this proposal to pass this year, and that its scope and implementation not be unnecessarily limited.

Accordingly, we urge you to amend the Nurse Practice Act in order to create Advanced Home Health Aides that will enable people with disabilities to live in freedom.

¹ *Fiscal Analysis of CFC and the New York State Medicaid Budget*, page 1. (November 18, 2014). Retrieved March 20, 2015, from <http://ilny.org/programs/cfc-tap/fiscal-analysis>.