

Testimony of Gregory J. Sorrentino, President and CEO of the Center for Disability Services

Joint Legislative Budget Hearing Health

February 28, 2023

Thank you for the opportunity to submit testimony regarding the need for enhanced Medicaid reimbursement to providers of medical and dental care to Individuals with Intellectual and Developmental Disabilities (IDD), the population that is served by the Center for Disability Services (CFDS) in the Capital Region.

CFDS is a private not-for-profit health and human services agency headquartered in Albany whose mission is to enable and empower people with disabilities to lead healthy and enriched lives. CFDS provides a full array of integrated services for individuals with IDD and their families including residential, educational, adult day/vocational programs, a pediatric skilled nursing facility, and outpatient healthcare services (including primary care, psychiatry, dental and physiatry) through an Article 28 Diagnostic and Treatment Center and an OPWDD (Office for People with Developmental Disabilities) Clinic Treatment Facility. We serve approximately 12,000 individuals and their families in the Capital Region and beyond each year.

We are submitting this testimony in support of inclusion in the 2023-2024 New York State Budget of language that would advance Health Equity and provide for additional Medicaid reimbursement to medical and dental providers serving the IDD population for currently uncompensated time needed to assist and support individuals with IDD during clinic visits with issues that are related to their disability.

Historically, little consideration has been given to the barriers that exist for the IDD population when seeking health and dental care. Initially, very few providers in the community are equipped to serve this population, lacking accessible buildings and clinic space. Center Health Care, our Article 28 clinic, is specifically designed to serve this population, with appropriate physical building access and adaptive equipment, such as wheelchair scales, Hoyer lifts and high-low examination tables. We also include programmatic changes, such as longer appointments, reduced wait times, tele-med visits and higher support staff/provider ratios. Many of these additional expenses are not covered by the current reimbursement structure in Medicaid or Medicare.

For example, in order to serve an individual in a wheelchair, that patient must be transferred from the wheelchair to an exam table. This generally requires the use of a Hoyer lift and two staff members for safe transfer, and can take as long as 15 minutes of an appointment. After an examination or treatment, the patient must be transferred back into the wheelchair, adding up to another 15 minutes to an appointment and, again, use of two staff members. Additionally, in many cases, patients are unable to undress or dress themselves, requiring additional time and staff to accomplish this both before and after treatment. Another example would include four staff, two stabilizing the legs, and two stabilizing the head and upper body, plus the physician, for a woman to get a pap smear.

Many patients have behavioral issues which can disrupt a medical or dental exam or treatment, and which need to be addressed, requiring more staff than would be necessary for a typical patient, who can cognitively understand what is happening and why. This is particularly true with respect to dental work, where patient stabilization methods, such as sedation and physical restraints, are often necessary to limit a patient's freedom of movement to decrease the risk of injury and permit the safe completion of treatment. This can be as simple as having staff hold a patient's hand to prevent the patient from swatting away a professional trying to conduct treatment or even to provide comfort and reassurance to calm a patient with a disability. Again, even the most simple methods require additional staff.

Moreover, many individuals with IDD are on a higher number of medications due to co-morbidity issues or seizure activity, and the State of New York requires more frequent medication reviews for individuals with IDD that also require additional unreimbursed physician and nursing staff time.

These are only a few examples of the services necessary to support patients with IDD.

One more complicating factor emphasizing the significance of Article 28 Diagnostic and Treatment Center Clinics like Center Health Care is that more community physicians are closing their independent practices and joining hospital and health networks. Independent physicians have historically been the resource clinics like Center Health Care have hired for part time support, like a day a month or a half day a week, etc. With more independent physicians joining larger networks, it has limited providers in the community that accept Medicaid, and has limited the availability of clinics like the Center to hire part time support for primary care or specialty medical services.

Consequently, we are respectfully requesting that language be included in the Budget that would provide for additional Medicaid reimbursement to medical and dental providers primarily serving the IDD population for currently uncompensated time, use of staff and services that are necessary to support individuals with IDD during clinic visits with issues that are related to the patient's physical, intellectual, or developmental disability. Such additional reimbursement must be sufficient to cover the actual cost of providing such necessary support services associated with treatment.

The vast majority of our clinic's patients are enrolled in the Medicaid system. This small investment would go a long way in addressing the health outcome disparities that the IDD population has historically experienced. Our clinic is projected to run a deficit of \$3 million this year. This is unsustainable and our clinic may be forced to close in the absence of an adequate Medicaid reimbursement method, which would further exacerbate the health inequity this population already suffers.

I would be happy to provide additional information on this issue if you wish.