

MSSNY’s Committee on Long Term Care Meeting
Thursday May 16, 2023
7:30 AM Via Zoom
MINUTES

Present

Jay Slotkin, MD Chair
Steven Kaner, MD, Vice Chair
Todd Demmy, MD
Elaine Healy, MD
Timothy Holahan, DO
Thomas Madejski, MD
Gregory Pinto, MD, Commissioner

Invited Guests

Jerome Cohen, MD MSSNY President
David Jakubowicz, MD MSSNY
President Elect

Absent

Al Cardillo, PhD, President, HCA-NY
Helen Mirza, MD
Daniel Nicoll, MD

MSSNY Staff

Morris Auster, Senior VP and Chief
Legislative Counsel
Nicholas Hospodar, Legislative
Associate
Brian Land, Administrative Asst.
Patricia Clancy, Senior VP/Managing
Director, Public Health

- 1 **1. Welcome; review of committee list; recommendation for new**
2 **appointments**
- 3 **2. Adoption of February 15, 2024 minutes - approved**
- 4 **3. New York State 2024-25 Budget Discussion:** Moe Auster, Esq., Sr. Vice
5 President; – Morris Auster highlighted that there was \$150 million new
6 investments in funding for per diem costs in nursing homes, along with \$150
7 million investments in patient centered medical home programs, with the
8 purpose of increasing rates for primary care physicians in the Medicaid program.
9 Mr. Auster remarked that there was also a transition to a single fiscal
10 intermediary overseeing the consumer directed personal care program. He also
11 noted several other important items, such as allocation of \$15 million from the
12 patient centered medical home program, to repayment of NY doctor’s student
13 loans. Zina Cary also worked on a program that continues telehealth insurance
14 payment parity requirements for an additional two years. Mr. Auster also noted
15 that MSSNY’s Committee for Physician’s Health program was restored. Mr.
16 Auster also remarked that the proposal which would have required physicians to
17 pay for 50% of the medical malpractice program was rejected. Also rejected
18 was the provision that prohibited physicians from bringing disputes with
19 Medicaid managed care plans to New York state’s dispute resolution mechanism.
20 Also noted was a provision that would have required physicians to get prior
21 authorization from the state for prescribing a medication that is off formulary
22 and would impose new prior authorization requirements. There was another

23 provision that would have enabled physician assistants to practice independently
24 in Article 28 settings and outside of Article 28 settings, if they have 8000 hours
25 of clinical practice. Mr. Auster noted that the previous item is its own separate
26 proposal, that MSSNY is continuing to fight. Mr. Auster continued to highlight a
27 series of initiatives to address medical debt and important provisions that will
28 require all healthcare practitioners, hospitals, chiropractors, physicians and
29 nurse practitioners to get a separate patient consent for billing that is unique
30 from the consent or treatment consent requirement. Also, there are new
31 requirements when patients use a credit card, that will give them a specific
32 statement of their rights. It was noted that the wrongful death issue was
33 removed from the budget.

34 **5. A.7467/S.466** Addressing the Use Of Psychotropic Medications In Nursing
35 Homes And Adult Care Facilities – Mr. Auster noted that the current status of the
36 bill is that it is currently on the assembly floor. Also noted was that the bill is
37 strongly opposed by various nursing home associations.

38 **6. Medical Director Registrar Update** – Dr. Jay Slotkin noted that the
39 medical director registrar has been incorporated into CMS. It is currently on the
40 federal regulations law and now every nursing home of the Medicare contract
41 must list their key personnel in it. Dr. Timothy Holahan remarked that the
42 National Medicare Association has been fighting for transparency for 15 years,
43 regarding facilities and healthcare systems to know who the medical director is.
44 He noted that most medical directors will fall under the category of managing
45 employee. He highlighted a document that has the purpose of legitimizing the
46 medical director as part of the leadership team. Dr. Kaner spoke of FTAC 501,
47 and their scrutiny of medical directors' involvement with clinical care and
48 coordination.

49 **7. Transitional Care Update** – Dr. Slotkin spoke of the various issues
50 surrounding transitional care and floated the idea of a subcommittee looking
51 solely at issues of transitional care. He further elaborated on the complications
52 faced during transition of care, particularly hospitalist involvement. He
53 mentioned how difficult the situation has become in assisted living facilities and
54 with hospice patients. Dr. Cohen disagrees with the need for a transition of care
55 subcommittee as all committees are currently stretched thin. Dr. Holahan
56 recommends a resolution to be presented at the HOD. Dr. Slotkin recommends
57 adding hospitalists to the committee, as well as younger physicians who
58 understand the complications of transition of care. Dr. Todd Demmy
59 recommends dovetailing frailty testing into preoperative evaluation, which could
60 trigger procedural planning for transition of care. He further recommended
61 collaborating with physician leaders to gather suggestions of how to best plan
62 for transition of care. Dr. Cohen spoke of the process needed to form a
63 resolution. Dr. Slotkin spoke of Garrett Coleman and the University of
64 Pennsylvania's transition of care institute and asked Don Demmy if he would be
65 willing to put the ideas discussed on paper to present to the committee.

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8. Adjournment – next meeting October 17, 2024

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