



TALKING POINTS

- More than 280,000 consumers and 450,000 personal assistants (PAs) must transition to PPL by April 1, 2025, when all other FIs are legally required to close. Consumers not transferred by April 1, or whose PAs are not fully onboarded, will lose access to vital CDPAP services.
- To prevent this crisis, the Legislature needs to act, and to act immediately – waiting til the budget will be too late. The best option is to pass the The CDPAP Accountability Act (S1189, Rivera/A2375, Stirpe) which would provide a common-sense alternative that addresses core programmatic concerns. Alternatively, the Legislature could pass legislation to delay the implementation. However, any delay must provide the Legislature with data on the transition’s progress and allow the Legislature to continue to hold PPL and DOH accountable by ensuring they are in session when the transition is set to occur.
- Consumers who have called PPL to start the onboarding process report waiting on hold for over an hour, being hung up on, not receiving language accommodation, being connected to a translator who speaks the wrong language, and being given inconsistent or incorrect information about their PAs pay and benefits, among other complaints.
- PPL is shifting responsibility for onboarding PAs from FIs to consumers. This includes processing and reviewing I-9 documents, tax documents, and worker agreements; providing them to their PAs; then collecting the completed documents and uploading them to PPL. If the consumer cannot do so, PPL feels they are deemed incapable of self-direction.
- The protected health information of hundreds of thousands of Medicaid consumers and their workers has been shared, without their knowledge or consent, to PPL and its facilitators. A judge in Nassau County granted a temporary restraining order last month to an FI finding the state likely violated HIPAA and other health privacy laws in implementing this transition.
- This transition was supposed to save \$500 million. Instead, more than \$65 million for associated transition costs have been included in the state budget. PPL is demanding advanced payment from managed care plans reimbursed by the state. And when asked if the state would go forward with the single FI even if it increases costs, the DOH Commissioner said yes.
- More than 170 languages are spoken every day in New York. There are many specific cultural competencies that FIs navigate in their own communities. A single out-of-state corporation has proven unable to replicate this.
- Monopolies have never led to better outcomes for consumers or payers. In fact, we are already seeing the repercussions, as PPL is demanding higher payments from managed care plans than those plans had been providing existing FIs, driving up costs even further.
- The CDPAP Accountability Act would license FIs and ensure transparency and accountability. It allows FIs that have been serving their communities, in some cases for decades, to apply to the state and demonstrate that they have and will continue to meet specific standards, improving program integrity without compromising services.