October 19, 2015 (updated)

Hon. Andrew Cuomo
Governor
Exec Chamber
State Capitol
Albany, NY 12224

RE: Request to enact the CARE Act, S676-B (updated)

Dear Governor Cuomo:

The undersigned 15 public interest organizations urge you to sign the CARE Act, S676-B, an Act to amend the Public health law, in relation to identification of caregivers.

Every day, family members and friends find themselves in the position of helping a loved one make the transition from hospital to home. It is a tremendous responsibility, and has grown to be more so over time, as hospitals have been sending patients home sooner than in the past.

It is easy to assume that a person who brings the patient in or comes to bring the patient home, or the person holding the “health proxy,” is the family caregiver, but this is not always the case.

If hospitals don’t make the right connection – by having discussions with the person who will actually be carrying out home care assistance tasks – they may not have complete information about the real resources available to help the patient at home. Also, they may not communicate the necessary instructions for home care to the right person. And if the caregiver’s contact information is not in the patient’s discharge plan, communication errors of omission affecting follow-up care may occur.

* A bad discharge can lead to a preventable hospital readmission. * The Centers for Medicare & Medicaid Services (CMS) estimates that $17 billion in Medicare funds are spent each year on
unnecessary hospital readmissions. In 2013, 85 percent of the hospitals in New York were penalized for having excessively high readmission rates.

We need to close these knowledge gaps, and make sure that care communication occurs. The CARE Act would require hospitals to notify the designated caregiver when their loved one is being discharged home or transferred to another facility; discuss the patient’s plan of care with the designated caregiver before discharge; and offer to provide instructions to the designated caregiver in relevant aftercare tasks before the patient is discharged.

This is a commonsense solution to an all too common problem, and we urge its adoption.

With best regards,

From the following 15 undersigned organizations:

Bronx Independent Living Services
Brooklyn Center for Independence of the Disabled
Center for Independence of the Disabled, New York
Center for Medical Consumers
Coalition of Institutionalized Aged and Disabled
Disabilities Network of New York City
Disabled In Action of Metro NY
Gray Panthers, New York City Network
Harlem Independent Living Center
New York Lawyers for the Public Interest
New York Public Interest Research Group
New York Statewide Senior Action Council
New Yorkers for Patient & Family Empowerment
Peggy Lillis Foundation
PULSE of New York