

Attachments

1. Verification of Need Documents

- a. **“Unnecessary Bed Days”** shows the increase in patients medically-ready and waiting for discharge, predominantly due to the inability of SNFs to accept patients. The peak around 12/20-1/21 was due to a large number of patients who were medically-ready for discharge, but still testing positive for COVID. This was largely alleviated by RRH opening “Empire Manor,” a SNF for COVID positive patients, which admitted 170 hospitalized COVID patients between 12/28/20 and 3/1/21.
 - b. **“Unnecessary Bed Days by Disposition”** shows the location to which the patient is being transferred to once the hospital is able to discharge the patient. These are patients who are medically-ready for discharge but are not able to be discharged. The number one reason is lack of staffed SNF beds.
 - c. **“Monroe County Total SNF Beds vs Licensed but Not Staffed SNF Beds”** shows the number of SNF beds that are not available for use due to staffing shortages and reimbursement issues.
2. **“Transformational Complex Care Program Criteria”** shows the proposed Tier system that will be used to enable the SNFs to be financially able to invest the amount of staff time and other resources necessary to open beds and accept more patients.
 3. **“Clinical Support to RN Pathway”** shows the infrastructure being built and aligned through the TC3 initiative to support and develop the labor force to meet the needs of Monroe County residents and transform the healthcare system.
 4. **SNF and HHCA Survey Summary**
 5. **Letters of Support**

Common Ground Health
Rochester Works
Finger Lakes Medical Directors Association (FLMDA)
Monroe County Medical Society (MCMS)
Monroe-Livingston EMS Council (MLREMS)
Action for a Better Community
Catholic Charities Family and Community Services
Lifespan
Rochester Monroe Anti-Poverty Initiative (RMAPI)
Urban League
Rochester Educational Opportunity Center (REOC)
Alliance for Senior Care IPA, LLC
HCR Homecare
Bryant and Stratton
Hurlburt Care Communities
Genesee Valley Health Facilities Association
Kirkhaven
WE Care Centers
Rochester Regional Health
University of Rochester Medical Center

6. Letters of Commitment

Hospital Executive Council

Monroe 2-Orleans Board of Cooperative Educational Services (BOCES)

AVS Consulting

Wellness Associates of Greater Rochester

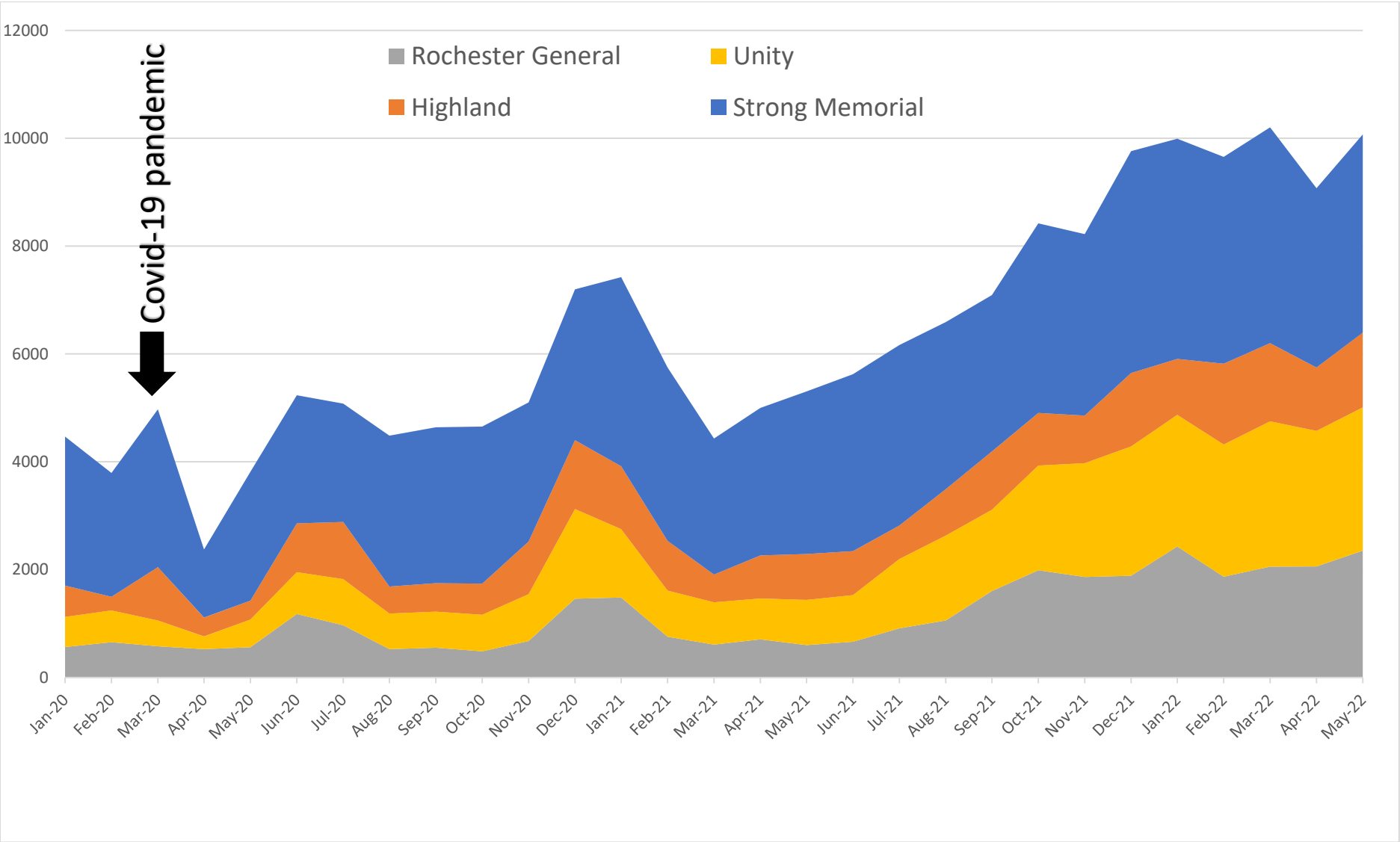
Refugees Helping Refugees

Coordinated Care Services (CCSI)

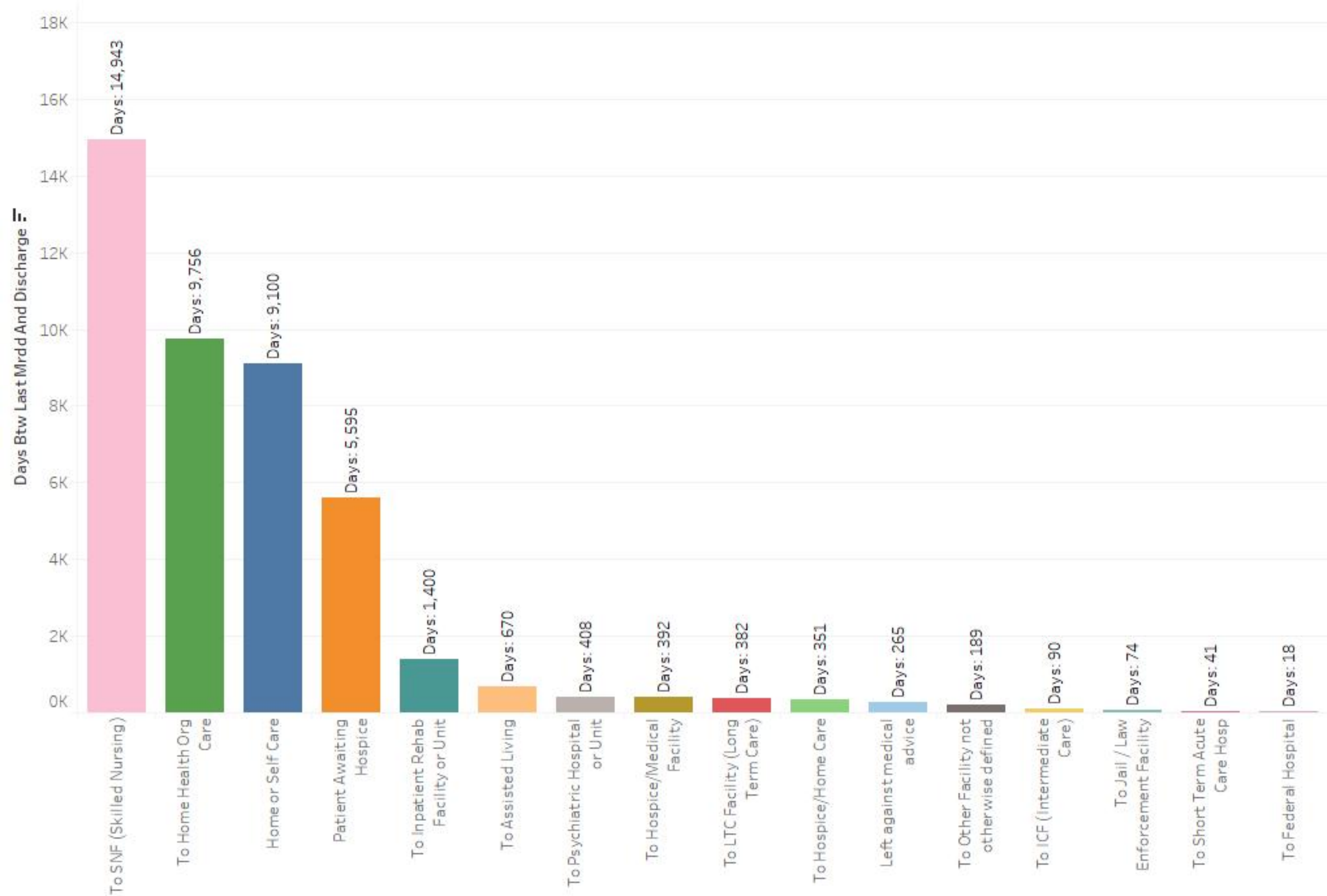
Monroe Ambulance

American Medical Response (AMR)

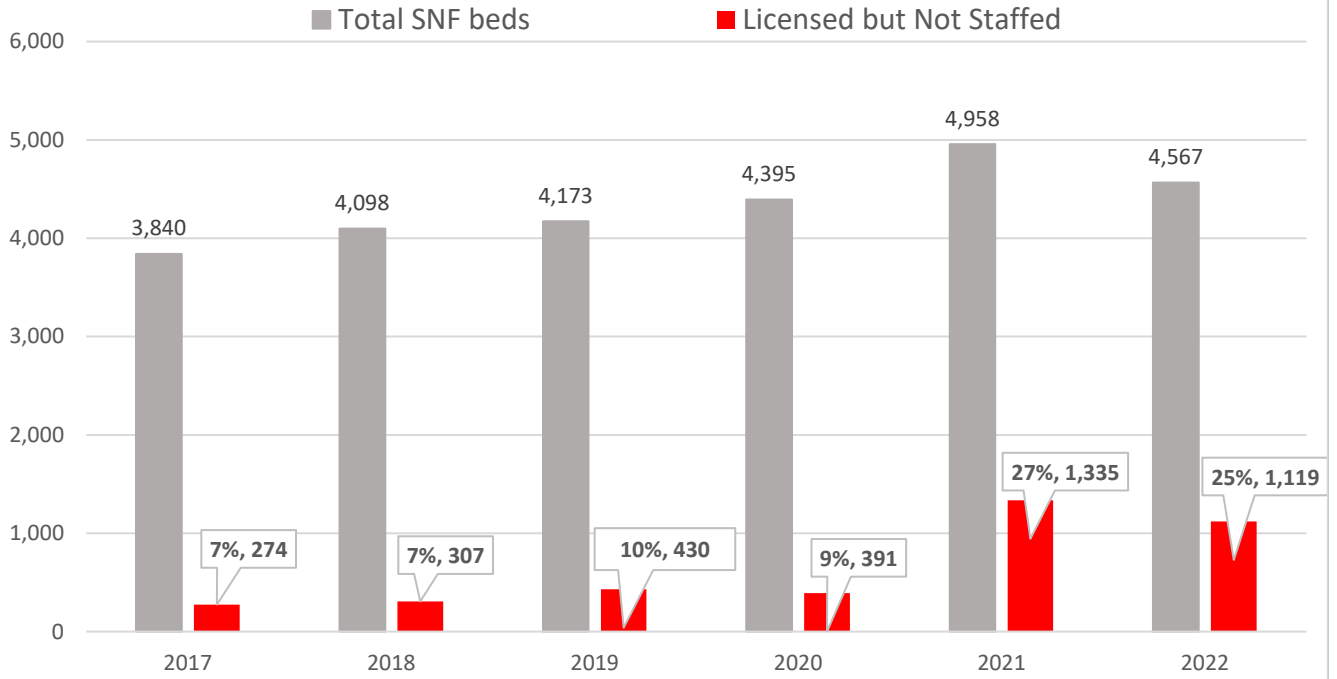
Unnecessary Bed Days in Acute Care Hospitals in Monroe County January 2020-May 2022



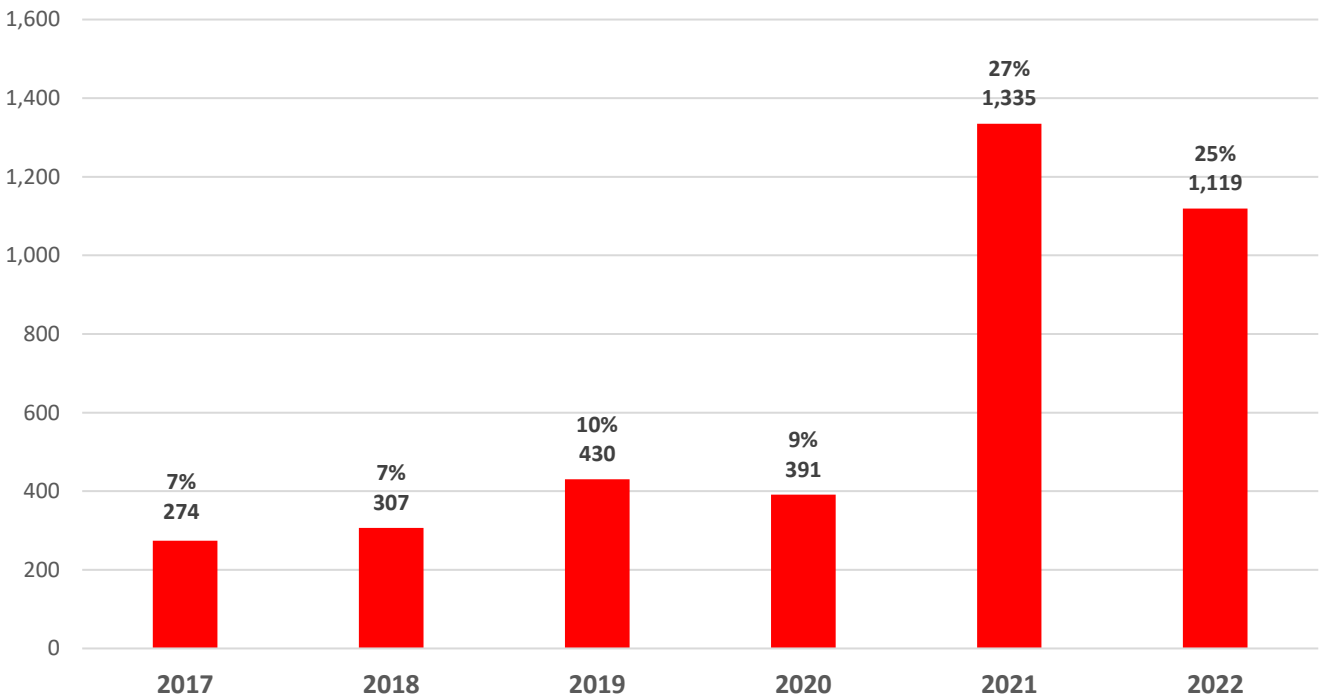
Unnecessary Bed Days by Discharge Disposition



Monroe County Total SNF Beds vs Licensed but Not Staffed SNF Beds



Monroe County Licensed but Not Staffed SNF Beds



Transformational Complex Care Program Criteria

As outlined in the grant application, the Transformational Complex Care Program will provide block grant support to nursing homes to aide with the excessive costs of complex nursing home patients who are more expensive to care for and currently not being accepted by SNFs.

FLPPS will manage funds and provide payments to SNFs for complex patients needing SNF placement based on varying degrees of clinical complexity as defined by a three-tier rating system.

FLPPS will facilitate the SNF admissions as follows:

1. A hospital makes a referral to a SNF
2. The referral will be sent to FLPPS to analyze - a review of the case is done and a tier determination is made.
3. FLPPS provides funding to the SNF once a threshold of placement is met - a threshold of 3 cases will be used to release funding.

The three-tier rating system is as follows:

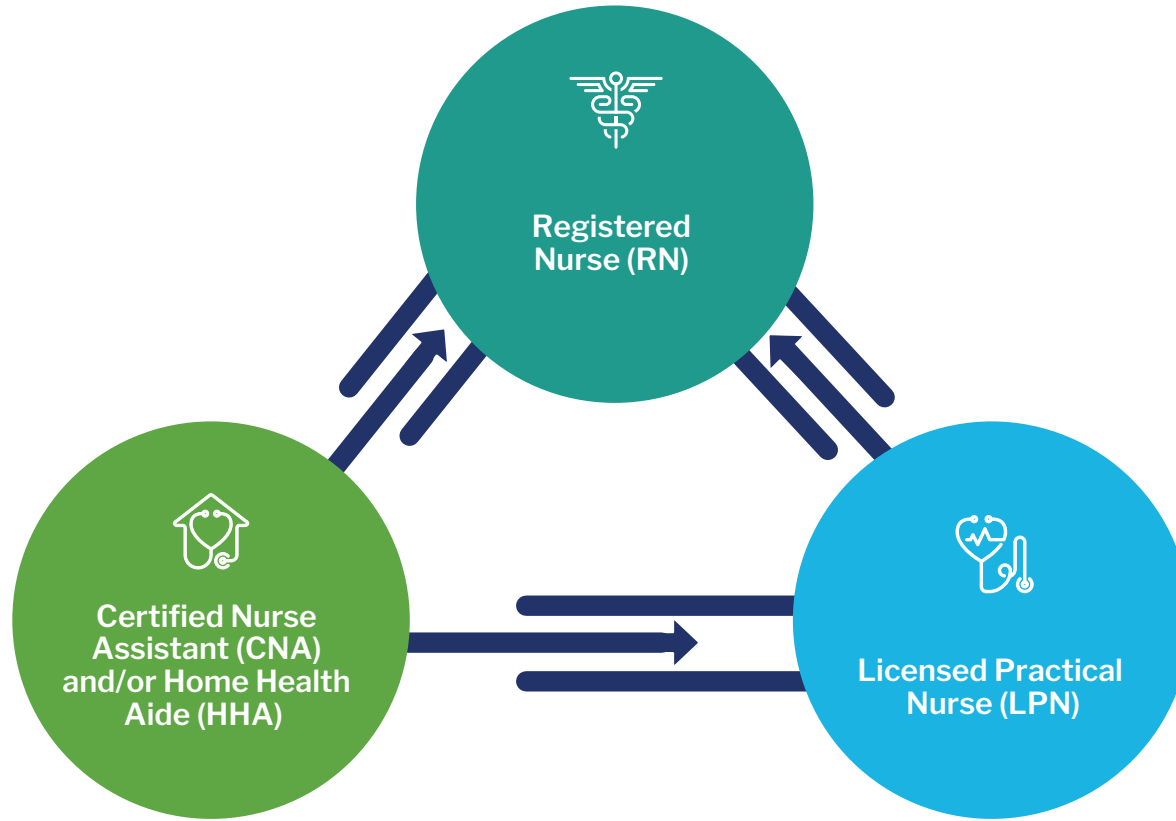
Tier 1 – Patients with inadequate insurance. A patient that is not clinically complex with insurance that does not cover the cost of care.

Tier 2 – Patients with complex needs. A clinically complex patient that may require IV, Wound Therapy, Transportation, and/or Dialysis

Tier 3 – Patient with complex needs and inadequate insurance. A clinically complex patient with insurance that does not cover the cost of care.

The budget provides the funding amount that is associated with each tier.

CLINICAL SUPPORT TO RN PATHWAY



RECRUITERS

- Healthcare Systems
- Home Care Agencies
- Skilled Nursing Facilities
- Community Colleges
- Colleges
- BOCES
- REOC
- Action for Better Community
- Exercise Express*
- Urban League of Rochester
- Catholic Charities Family & Community Services
- Refugees Helping Refugees

TRAINERS

- Healthcare Systems
- Home Care Agencies
- Skilled Nursing Facilities
- Community Colleges
- Colleges
- BOCES
- REOC
- Action for Better Community
- AVS Consulting Strategies*
- Wellness Associates of Greater Rochester*

EMPLOYERS

- Healthcare Systems
- Home Care Agencies
- Skilled Nursing Facilities

*Signifies MWBE Certified

Long Term Care Workforce Development Survey Results

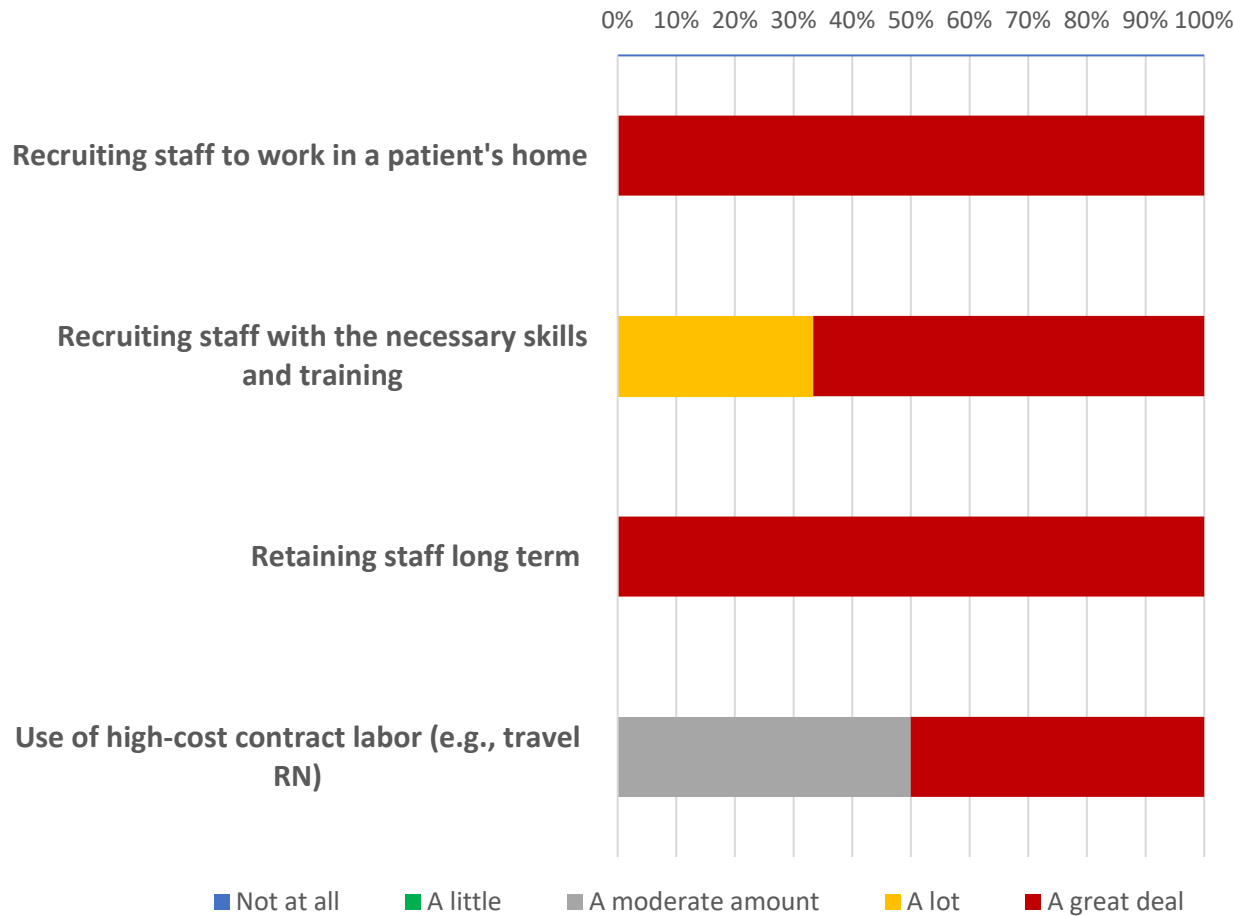
Survey Overview

FLPPS administered a survey in June 2022 to Home Health Care Agencies and Skilled Nursing Facilities in our region to identify specific workforce needs impacting their organizations.

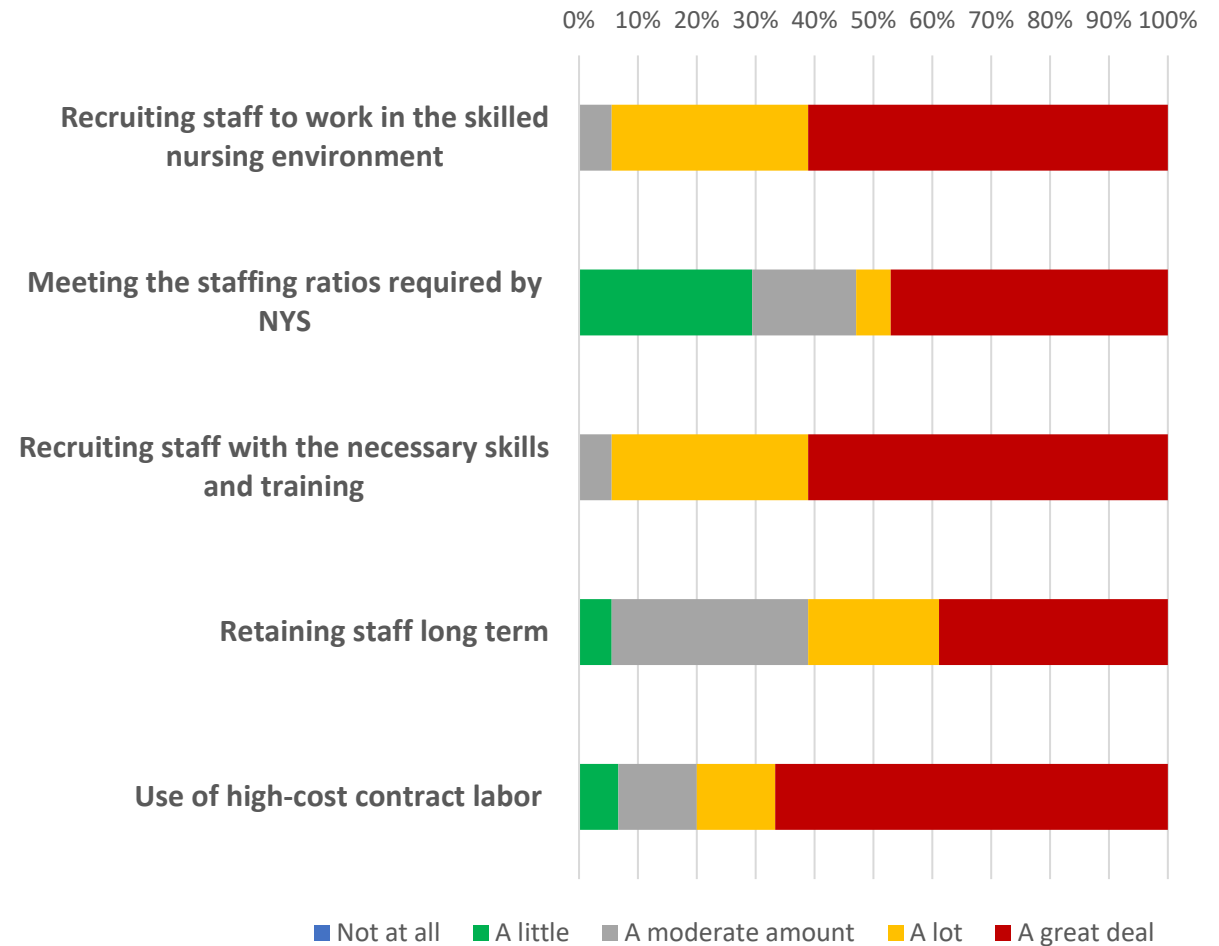
The survey also included both quantitative responses and open-ended questions that allowed FLPPS to gather qualitative feedback.

Factors Contributing to Staffing Concerns

Home Health Care Agencies (n=3)

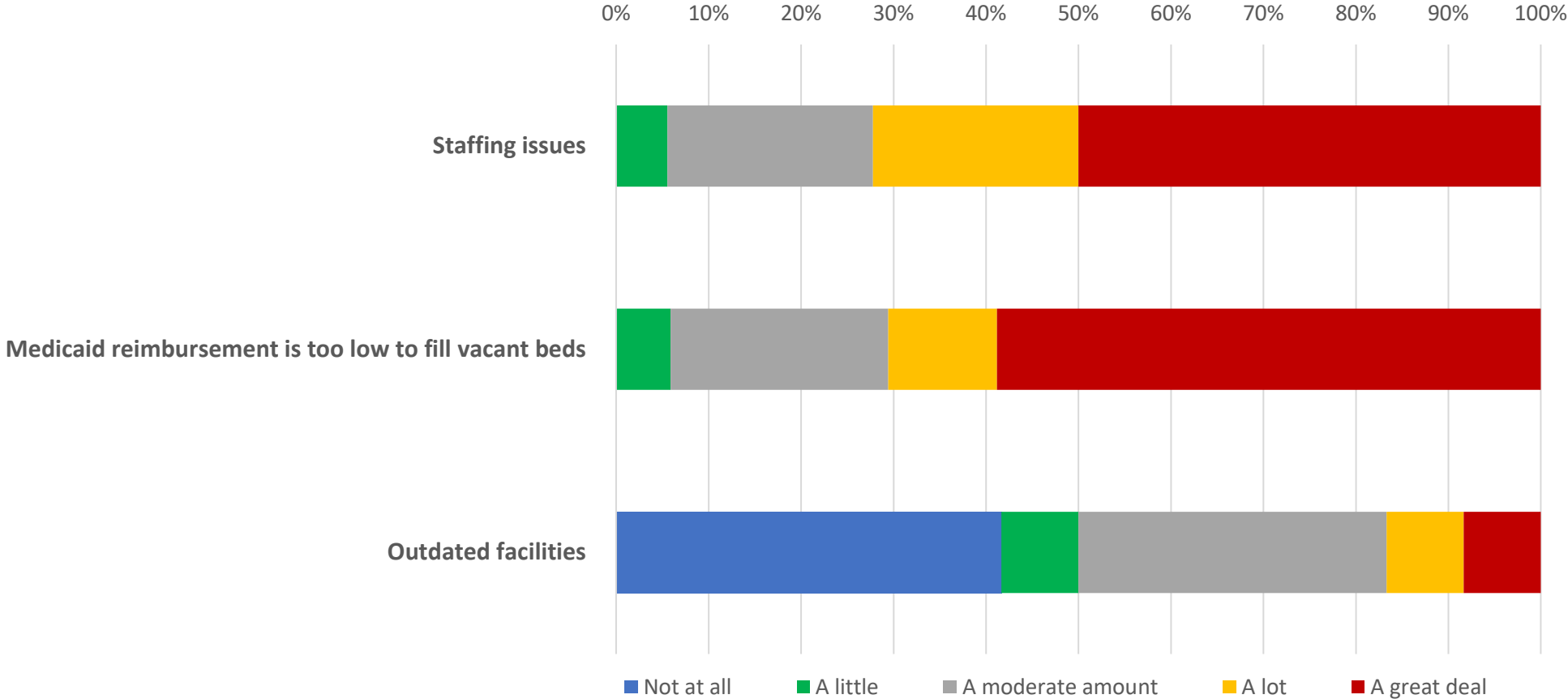


Skilled Nursing Facilities (n=18)



Factors Contributing to Vacant Beds

Skilled Nursing Facilities (n=18)



Current Staff Vacancies

Home Health Care Agencies

Position	Total Vacancies
RN (n=3)	114
LPN (n=3)	17
HHCA (n=3)	159

Skilled Nursing Facilities

Position	Total Vacancies
RN (n=15)	75
LPN (n=15)	298
CNA (n=15)	554

July 20, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear County Executive Bello:

I am pleased to submit my letter of support for the Finger Lakes Performing Partner System community-wide Transformational Community Care Coordination (TC3) project. Common Ground Health is proud to be an active partner of the county and long-term care community to address the healthcare workforce crisis and long-term care facility's needs.

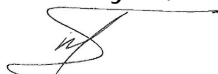
As you know, Common Ground Health and FLPPS co-convene the Regional Healthcare Workforce Consortium. Prior to the pandemic, we designed a healthcare workforce recruitment, retention and training program that have demonstrated successful program outcomes and impact. TC3 builds upon that proven strategy by strengthening and expanding programs to build a well- trained pool of long term care health care workers.

Together, educators, long-term care organizations and hospitals created the TC3 Partnership and designed a three-pronged approach:

1. Enhanced payments for long-term care facilities to safely admit complex patients from the hospital and reduce delayed stays in the hospitals,
2. Recruitment, training and retaining strategies for the long-term care healthcare workforce that includes childcare, transportation, pay as you train wages, sign- on and retention bonuses for CNAs, LPNs and RNs, and assistance in developing career pathways for candidates. Funds will also be used for similar supports for home health aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions.
3. Transportation to the SNFs for those patients who need it, so there is no delay in the hospital.

We are confident that a well-trained pool of healthcare workforce candidates, enhanced payments for medically complex patients admitted to long-term care will decompress the hospital and provide a community-wide system of care that provides the right care at the right time.

Thank you,



Wade S. Norwood, CEO
Common Ground Health

Rochester Works!

July 15, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

RE: FPPLS Application for Monroe County ARPA Funding

Dear County Executive Bello:

I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

RochesterWorks serves as the county's workforce development board. We are charged with helping to ensure that our county's workforce meets the demands of our local economy, and in doing so, we work to provide economic opportunity for those seeking to participate in our local workforce.

We at Rochester Works are very supportive of FLPPS, Common Ground Health and other partners working together to help people become trained and employed. We are especially supportive of the Career Ladder/Pathways component of the project, through which people can start in an entry level position and work their way up through education and experience to better-paying jobs. Programs that provide basic employment-readiness skills and enable underserved populations to take advantage of the opportunities and supports offered through this project are critical in our community. This project will help people to be successful in their move toward self-sufficiency.

I am confident that this application will effectively work to train and support an additional supply of direct care workers as part of a transformation of the health care system for persons with long term care needs. With an adequate supply of trained staff, the entire system will function with sustainable equilibrium.

Sincerely,



DAVID SEELEY
Executive Director,
RochesterWorks, Inc



FLMDA

FINGER LAKES MEDICAL DIRECTORS ASSOCIATION

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

July 13, 2022

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

The biggest crisis facing Monroe County (and in the nation) in the near term is within our health care systems. COVID 19 placed a tremendous strain on the healthcare system. Skilled Nursing Facilities, which were struggling prior to the pandemic and never designed for isolation and quarantine, lost staff, and had increasing difficulty hiring and retaining new employees. Additionally, since Medicaid reimbursement rates cover less than 70% of expenses, these nursing homes had no choice but to not fill beds that they were unable to staff due to this discrepancy in reimbursement. Coupled with the fact that NY State Department of Health mandated specific staff-to-client ratios, nursing homes were forced to have vacant beds, while backlogs of patients developed in the hospitals.

Since the beginning of COVID, an increasing number of patients have been medically ready for release from the hospital but cannot be released because there is nowhere to send them. This has resulted in a high number of patients "boarding" in the hospital while awaiting placement in a Skilled Nursing Facility (SNF), or a discharge to home with the support of a Home Health Aide. This backlog has profound effects on the healthcare system, in addition to patients and families.

When beds are full of patients who do not need to be there, new patients cannot be admitted. This means there are no beds for Emergency Department (ED) patients to be admitted to and no beds for patients who need (non-emergency) surgeries. If patients have filled up the EDs because there are no beds in the hospital, new patients cannot get into the ED because there is no room. It has become very difficult to meet the needs of trauma patients, gunshot patients, and others in dire need of ED services



FLMDA

FINGER LAKES MEDICAL DIRECTORS ASSOCIATION

when the entire system is backed up. If the EDs are full of patients who no longer need to be there, the ED doctor and staff are not able to perform the duties they are trained to do. Additionally, the surgeons who do non-emergency surgeries (hip replacements, back surgeries) cannot do them because there are no beds available for their patients, resulting in surgeons questioning if this is where they want to work leading many to potentially relocate to an area with no backlog (Syracuse, Long Island, NY City for example have no such backlogs).

All of these problems can be addressed by opening up available SNF beds. The problem is staffing, complex cases that require more staff time with no additional reimbursement, and sometimes, transportation. The TC3 Partnership has created a plan that includes three components to transform the system into one that functions effectively. These components include: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign on and retention bonuses for Certified Nurse Assistants (CNAs), Licensed Practical Nurses (LPNs), and Registered Nurses (RNs), as well as assistance in developing a career ladder for staff. Funds will also be used for similar supports for Home Health Aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,

Darakhshan F. Shamsie, M.D.
President, Finger Lakes Medical Directors Association



July 13, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear County Executive Bello:

I am writing to support the application of the Finger Lakes Performing Provider System, Inc. (FLPPS), Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

The biggest crisis facing Monroe County (and in the nation) in the near term is within our health care systems. COVID 19 placed a tremendous strain on the healthcare system. Skilled Nursing Facilities (SNFs), which were struggling prior to the pandemic and were never designed for isolation and quarantine, lost staff and had increasing difficulty hiring and retaining new employees. Additionally, since Medicaid reimbursement rates cover less than 70% of expenses, these nursing homes had no choice but to not fill beds that they were unable to staff due to this discrepancy in reimbursement. Coupled with the fact that the New York State Department of Health mandated specific staff-to-client ratios, nursing homes were forced to have vacant beds, while backlogs of patients developed in the hospitals.

Since the beginning of COVID, an increasing number of patients have been medically ready for release from the hospital but cannot be released because there is nowhere to send them. This has resulted in a high number of patients “boarding” in the hospital while awaiting placement in a Skilled Nursing Facility (SNF), or a discharge to home with the support of a Home Health Aide. This backlog has profound effects on the healthcare system, in addition to patients and families.

When beds are full of patients who do not need to be there, new patients cannot be admitted. This means there are no beds for Emergency Department (ED) patients to be admitted to and no beds for patients who need (non-emergency) surgeries. If patients have filled up the EDs because there are no beds in the hospital, new patients cannot get into the ED because there is no room. It has become very difficult to meet the needs of trauma patients, gunshot patients, and others in dire need of ED services when the entire system is backed up. If the EDs are full of patients who no longer need to be there, the ED doctor and staff are not able to perform the duties they are trained to do.

Additionally, the surgeons who do non-emergency surgeries (hip replacements, back surgeries) cannot do them because there are no beds available for their patients, resulting in surgeons questioning if this is where they want to work leading many to potentially relocate to an area with no backlog (Syracuse, Long Island, NY City for example, have no such backlogs).

All of these problems can be addressed by opening up available SNF beds. The problem is staffing, complex cases that require more staff time with no additional reimbursement, and sometimes, transportation. The TC3 Partnership has created a plan that includes three components to transform the system into one that functions effectively.

These components include:

1. Enhanced payment for complex patients who are more expensive to care for.
2. A pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign on and retention bonuses for Certified Nurse Assistants (CNAs), Licensed Practical Nurses (LPNs), and Registered Nurses (RNs), as well as assistance in developing a career ladder for staff. Funds will also be used for similar supports for Home Health Aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions.
3. Transportation to the SNFs for those patients who need it so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,

Lucia Castillejo

Lucia Castillejo, MS
Chief Executive Officer, Monroe County Medical Society

**Monroe County Medical Society | 200 Canal View Blvd | Suite 202 | Rochester, NY
14623 www.mcms.org | info@mcms.org**



July 19, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear County Executive Bello:

I am writing to support the application of Finger Lakes Performing Provider System, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

Emergency Medical Services (EMS) is a system of coordinated response and emergency medical care, involving multiple people and agencies. EMS is an intricate system and is integrated with other services and systems intended to maintain and enhance the community's health and safety. Hospitals in Monroe County are experiencing significant overcrowding and severe back-ups are occurring. Patients who are safe to discharge but are not able to be transitioned to home or skilled nursing facilities leave no room for new hospital admissions. Patients in the Emergency Departments (EDs) who require hospitalization are held in the EDs while waiting for a hospital bed, limiting available capacity for trauma patients and others needing critical emergency services in the EDs. We need to address this crisis.

Finger Lakes Performing Provider System, Common Ground Health and numerous other partners in the TC3 Partnership have come together to create a strategic and comprehensive approach to address this problem that includes three components to transform the system into one that functions effectively. These components include: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign on and retention bonuses for CNAs, LPNs, and RNs, as well as assistance in developing a career ladder for staff. Funding has also been requested for similar supports for Home Health Aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

web www.mlrems.org
phone (585) 463-2900
fax (585) 473-3516

office
44 Celebration Drive, Suite 2100
Rochester, NY 14620

mailing
601 Elmwood Avenue, Box 655-P
Rochester, NY 14642



In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments, the healthcare system can reach sustainable equilibrium.

Sincerely,

Mark Philippy, BA, EMT-P
Council Chair

Jeremy T. Cushman, MD, MS, EMT-P, FACEP, FAEMS
Regional Medical Director

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44 Celebration Drive, Suite 2100
Rochester, NY 14620

mailing
601 Elmwood Avenue, Box 655-P
Rochester, NY 14642



Jerome H. Underwood
President & CEO

Brad Rye
Board Chair

July 15, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear County Executive Bello:

I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

Action for a Better Community, Inc, (ABC) is one of nearly 1,000 nationally recognized Community Action Agencies (CAA), established under the Economic Opportunity Act of 1964 to fight America's war on poverty. Providing services in Monroe and Ontario counties, ABC annually serves over 6,000 individuals and 3,000 families with an array of programs and services in the areas of employment, early childhood education, youth services, adult education, health services, community development and energy conservation. ABC's mission is to promote and provide opportunities for low-income individuals and families to become self-sufficient.

We at Action for Better Community are very supportive of FLPPS, Common Ground Health and other partners working together to help people become trained and employed. We are especially supportive of the Career Ladder/Pathways component of the project, through which people can start in an entry level position and work their way up through education and experience to better-paying jobs. Programs that provide basic employment-readiness skills and enable underserved populations to take advantage of the opportunities and supports offered through this project are critical in our community. This proposed project will compliment ABC's support for the Good Jobs Finger Lakes, Good Jobs Challenge grant.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments, the healthcare system can reach sustainable equilibrium.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Underwood", is written over a white background.

Jerome H. Underwood

Administrative Offices

400 West Avenue, 3rd Floor
Rochester, NY 14611

P: (585) 325-5116
F: (585) 325-9108

E-mail: CAA@ABCinfo.org
Web site: www.abcinfo.org

Administrative Offices
79 N. Clinton Avenue, Rochester, NY 14604-1458

p: 585.546.7220 | w: FCScharities.org



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President and CEO

Karen Dehais, Diocesan
Director, Catholic Charities

July 13, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

Catholic Charities Family and Community Services (CCFCS) has a Career Pathways program that helps refugees to obtain certification/training in various careers and trades. They already have some funds (up to \$2,500) to pay for tuition for eligible refugees and have assisted thousands of refugees to obtain education and training and secure employment. This has included employment in the health care industry. While the number of refugees in the Refugee Resettlement program was reduced from over 1,000 per year to about 100-200 per year during the Trump administration, and then COVID, the program is now starting to quickly rebuild pathways and partnerships. The numbers of refugees we are working with have risen substantially, and Monroe County is among the top five counties in the country welcoming Ukrainians. CCFCS is also working with an increasing number of Afghan refugees. Both groups have urgent needs for re-settlement, including employment. Most of the Afghan men are highly skilled and may have English-language skills, though the Afghan women are less likely to have a skilled employment history. So far, the Ukrainians who have come are a very mixed population in terms of employment background. Additionally, other populations, especially Burmese and Congolese, are settling in the City of Rochester.

Our Refugee Employment program is excited to collaborate with FLPPS, Common Ground Health, and other partners to help the refugees we work with become trained and employed. We are especially interested in the Career Ladder/Pathways component of the project. Employers who have hired the refugees we support have found them to be reliable, capable, and ambitious

workers. These refugees have passed a rigorous screening process that enables them to be in the United States and are eager to get to work to support their families and build a new life. We expect that many refugees will take advantage of the excellent training and support to be offered through this project.

In conclusion, we urge full funding of this application to train and support an additional supply of direct care workers as part of a transformation of the health care system for persons with long term care needs. With an adequate supply of trained staff, the entire system will function with sustainable equilibrium.

Sincerely,



Lori VanAuken
President & CEO
Catholic Charities Family and Community Services



July 12, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear County Executive Bello:

I am writing to strong support the FLPPS application for the Home Health Aide (HHA) Component of the Transformational Community Care Coordination (TC3) project.

As a major provider of services to older adults and their caregivers throughout Monroe County and beyond, we at Lifespan see the need for increased staffing to support the needs of older adults. While this was an issue before the pandemic, COVID-19 and the related effects have crippled the direct healthcare labor force as the labor market tightened and severe labor shortages began. People who apply to be HHAs, CNAs and LPNs often come from the same labor pool as those who work in the fast-food, retail and hospitality industries. As the labor pool tightened, these industries began raising wages, passing the cost increases on to their customers. It is much more difficult to increase prices in the health care industry than in the fast-food industry, thus wages have not been able to keep pace with wage increases in other sectors. Additionally, being a Health Home Aide (HHA), a Certified Nurse Assistant (CNA), a Licensed Practical Nurse (LPN) or a Registered Nurse (RN) is hard work, and these are not glamorous jobs. For these reasons, it is difficult to fill these positions, and to retain these workers once trained. This critical shortage of direct care workers has created a severe backlog of "boarders" in both these hospitals and nursing homes since patients cannot be discharged when there are not enough staff to take care of them, with the ultimate effect being the entire healthcare system at risk of failing.

FLPPS, Common Ground Health and numerous other partners in the TC3 Partnership have come together to create a strategic and comprehensive approach to address this problem that includes three components to transform the system into one that functions effectively. These components include: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign on and retention bonuses for CNAs, LPNs, and RNs, as well as assistance in developing a career ladder for staff. Funding has also been requested for similar supports for Home Health Aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments, the healthcare system can reach sustainable equilibrium.

Sincerely,

A handwritten signature in blue ink that reads "Ann Marie Cook".

Ann Marie Cook,
President/CEO



July 15, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear County Executive Bello:

On behalf of the Rochester-Monroe Anti-Poverty Initiative (RMAPI), I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

RMAPI is a multi-sector community collaborative with a goal to improve upward mobility for all members of our community. Promoting sustainable employment will be critical in reaching this goal, as there is a direct correlation between low wages and poverty. Creating pathways to sustainable employment can have a significant impact in the lives of families in our community and increase overall quality of life for everyone.

We at RMAPI are excited to collaborate with FLPPS, Common Ground Health and other partners to help people become trained and employed. We are especially interested in the Career Ladder/Pathways component of the project, through which people can start in an entry level position and work their way up through education and experience to better-paying jobs. Programs that provide basic employment-readiness skills and enable underserved populations to take advantage of the opportunities and supports offered through this project are critical in our community. This project will help people to be successful in their move toward self-sufficiency and reach closer to RMAPI's goal of upward mobility for everyone in our community.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments, the healthcare system can reach sustainable equilibrium.

Sincerely,

Aqua Y. Porter
Executive Director
RMAPI



Urban League of
Rochester, N.Y., Inc.

*Empowering Communities.
Changing Lives.*

265 North Clinton Avenue
Rochester, N.Y. 14605-1857

P (585) 325-6530
F (585) 325-4864
E-m www.ulr.org

July 13, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

The mission of the Urban League of Rochester, NY, is to enable African Americans, Latinxs, the poor, and other disadvantaged groups to secure economic self-reliance, parity and power, and civil rights. Within this mission are two Urban League programs that will be an excellent tie-in with the proposed project: Project Steps to Success and Workforce Development. These programs work with some of the most at-risk populations—youth, individuals with past justice system involvement, and young fathers to address poverty head-on. Through focused job readiness training and hands-on education, Urban League is working to decrease the concentration of poverty in Rochester and reduce recidivism rates.

Urban League is excited to work with FLPPS, Common Ground Health and other partners to help the people we work with to become trained and employed. We are especially interested in the Career Ladder/Pathways component of the project, through which people can start in an entry level position and work their way up through education and experience to better-paying jobs. Urban League will work hand-in-hand with this project as our programs provide some basic employment-readiness skills and enable the population we work with to take advantage of the opportunities and supports offered through this project. We expect that at least 40 persons from Urban League programs will take advantage of the excellent training and supports to be offered through this project each year for 4 years. The project is a logical extension of our existing efforts that will help the populations we serve become successful in their move toward self-sufficiency.

In conclusion, we urge full funding of this application to train and support an additional supply of direct care workers as part of a transformation of the health care system for persons with long term care needs. With an adequate supply of trained staff, the entire system will function with sustainable equilibrium.

Sincerely,

Jonathan Compton
Director of Workforce Development, Urban League of Rochester

July 20, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

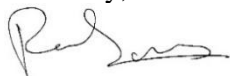
This letter is to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

SUNY Rochester Educational Opportunity Center (REOC) is one of ten Educational Opportunity Centers located throughout New York State and governed by the University Center for Academic and Workforce Development. REOC is sponsored by the State University of New York's Brockport campus, and delivers comprehensive, community-based academic and workforce development programs and support services to eligible adult learners. Our certificate/NYS licensure programs include training in the healthcare sector.

REOC's education and training programs are created and structured for recognized in-demand occupations. Many of REOC students fall within the low-income guidelines and struggle with transportation, childcare, tuition, books, and fees. To address these roadblocks, and to develop and maintain quality programming, we continuously work with community and business leaders who assist and guide us to ensure that our educational programs meet on-going and emerging employment and sustainability needs. There is a recognized demand for quality, trained workers in the health care field, especially programs focusing on direct-care roles that include professions such as Certified Nursing Assistants, Home Health Aides and Licensed Practical Nurses, which REOC currently provides.

Should FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project be awarded this funding, REOC will partner with them to train and support additional direct care workers as part of a transformation of the health care system for persons with long term care needs. With an adequate supply of trained staff, the entire system will function with sustainable equilibrium.

Sincerely,



Roosevelt Mareus, PhD
Dean/Executive Director, Rochester Educational Opportunity Center



Episcopal SeniorLife Communities | Friendly Senior Living | Jewish Senior Life | St. Ann's Community | St. John's

July 12, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

One of the biggest crises in Monroe County (and in the nation) that has been severely impacted by COVID 19 is the status of nursing homes (Skilled Nursing Facilities (SNFs)). In addition to the fact that Medicaid reimbursement rates cover less than 70% of expenses, it is getting harder and harder to recruit, train and retain staff, especially Certified Nursing Assistants (CNAs), as well as Licensed Practical Nurses (LPNs) and Registered Nurses (RNs) due to the extremely tight labor market and the relatively low wages the industry is able to pay for these critical, direct care positions. This problem has been intensified by the NY State Department of Health mandating specific staff-to-client ratios but failing to provide adequate reimbursement to support those ratios. The only way to keep the doors open to support the patients who are in our facilities is to not fill beds that are not going to receive adequate reimbursement, and that there are not enough staff to cover. While we understand that this has been causing a backlog in the hospitals, not filling these beds has been the only way SNFs have been able to adequately serve our patients.

FLPPS has surveyed the Monroe County nursing homes, and the TC3 Partnership has created a plan based on that survey that includes three components: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, support (childcare, transportation, wages during the training period), sign on, and retention bonuses for CNAs, LPNs and RNs, as well as assistance in developing a career ladder for staff. Funds will also be used for similar support for home health aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.



Episcopal SeniorLife Communities · Friendly Senior Living · Jewish Senior Life · St. Ann's Community · St. John's

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,

Glen Cooper
President & CEO of Friendly Senior Living, and Alliance for Senior Care
Chairman

Michael McRae
President & CEO, St. Ann's Community

Michael King
President & CEO, Jewish Senior Life

Signature
Charles Runyon
President & CEO, St. John's Home

Signature
Loren Ranaletta
President & CEO, Church Home of the Protestant Episcopal Church



800-270-4904 (p) | 888-705-4843 (f) | HCRhealth.com

July 19, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project, which includes a significant workforce development component to address healthcare workforce shortages related to CNAs, HHAs, LPNs, and RNs.

According to the 2020 census, 18.3% of Monroe County's population is over age 65, a higher percentage than both NY State as a whole and the United States. In general, the higher the percentage of elderly, the more need there is for Home Health Aides (HHAs). Prior to the pandemic, it was difficult to recruit, train and retain HHAs. Since COVID 19 started, the problem has been much worse as the labor market tightened and severe labor shortages began. People who apply to be HHAs come from the same labor pool as those who work in the fast food, retail, and hospitality industries. As the labor pool tightened, these industries began raising wages, passing the cost increases on to their customers. It is much more difficult to increase prices in the health care industry than in the fast-food industry, thus wages have not been able to keep pace with wage increases in other sectors. Additionally, being an HHA is hard work, and not a glamorous job. For these reasons, it is difficult to fill HHA positions, and to retain these workers once trained. Yet, the Occupational Outlook Handbook shows the highest projected demand for any job is for Home Health/Personal Care Aides. The New York State Department of Labor Short Term Employment Projections 2021-2023 show a 7.2% increase in positions for Home Health Aides/Personal Care Aides from 2021-2023.

If there are too few HHAs, nursing homes and hospitals cannot send people home safely, and discharges therefore cannot be made in a timely fashion. This fills up hospitals and nursing homes with patients who could be sent home if there was a HHA available to support their needs. Another factor that impacts overcrowding is the unnecessary acute exacerbations of chronic disease, which, due to home care staffing shortages are not being appropriately managed at home without the reinforcement and education from home care professionals and paraprofessionals. The lack of home care is also a factor in rehospitalizations. Obviously, more home care workers are critical for the continuum of care to work.

Proudly Serving Upstate New York

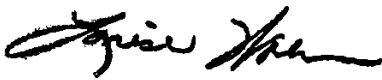
Finger Lakes | Central New York | Catskills | North Country

Corporate: 85 Metro Park | Rochester, NY 14623

It is our understanding that the TC3 initiative will include a pool of funds that will pay for training, support (childcare, transportation, wages during the training period), and sign on and retention bonuses for HHAs. Importantly, there will also be assistance in developing a career ladder for staff, so that potential recruits can see a path to future career development, enhancing the competitiveness of the HHA position compared with fast food and other sector jobs.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff, the entire system will function with sustainable equilibrium.

Sincerely,

A handwritten signature in black ink, appearing to read "Louise Woerner". The signature is fluid and cursive, with a long horizontal stroke at the end.

Louise Woerner
Founder & CEO, HCR Homecare

July 27, 2022

Karen Bonomo
Executive Director LHCSA
HCR Home Care
85 Metro Park
Rochester, NY 14623

RE: Bring Monroe Back – Workforce Development Proposal

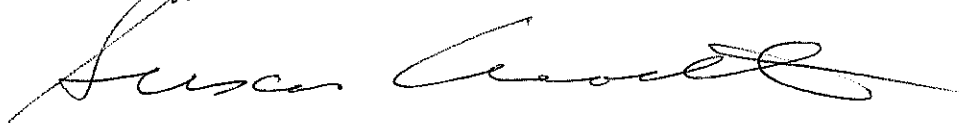
Dear Ms. Bonomo:

HCR Home Care's proposal to increase the number of trained professionals in Monroe County is supported by Bryant & Stratton College. They strongly support this grant application and its focus on addressing the health care staffing shortage and providing quality and culturally competent care to the Monroe County population.

In addition, Bryant & Stratton College is offering an opportunity to our current employees to advance their careers through their degree programs. The opportunity to attend an LPN class for our home health aides and support our registered nurses with an opportunity for their Bachelor of Science Degree in Nursing. This effort will further enhance the skills of the workforce and enable HCR Home Care to provide even more services to the Monroe County population

Bryant & Stratton College fully supports funding of this proposal for developing and furthering our efforts to increase the workforce to meet the health care demands of our most vulnerable population.

Sincerely,



Sue Cumoletti
Syracuse Market Campus Director



HURLBUT™

CARE COMMUNITIES

Let our family care for yours

7/18/2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

One of the biggest crises in Monroe County (and in the nation) that has been severely impacted by COVID 19 is the status of nursing homes (Skilled Nursing Facilities (SNFs)). In addition to the fact that Medicaid reimbursement rates cover less than 70% of expenses, it is getting harder and harder to recruit, train and retain staff, especially Certified Nursing Assistants (CNAs), as well as Licensed Practical Nurses (LPNs) and Registered Nurses (RNs) due to the extremely tight labor market and the relatively low wages the industry is able to pay for these critical, direct care positions. This problem has been intensified by the NY State Department of Health mandating specific staff-to-client ratios but failing to provide adequate reimbursement to support those ratios. The only way to keep the doors open to support the patients who are in our facilities is to not fill beds that are not going to receive adequate reimbursement, and that there are not enough staff to cover. While we understand that this has been causing a backlog in the hospitals, not filling these beds has been the only way SNFs have been able to adequately serve our patients.

FLPPS has surveyed the Monroe County nursing homes, and the TC3 Partnership has created a plan based on that survey that includes three components: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign on and retention bonuses for CNAs, LPNs and RNs, as well as assistance in developing a career ladder for staff. Funds will also be used for similar supports for home health aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,

Robert W. Hurlbut
President & CEO, Hurlbut Care Communities

Hurlbut Health Consulting™

Genesee Health  Facilities Association

40 Barrett Drive Webster, NY 14580
P. 585-872-1690 F. 585-216-1942 www.ghfa.org

July 14, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

One of the biggest crises in Monroe County (and in the nation) that has been severely impacted by COVID 19 is the status of nursing homes (Skilled Nursing Facilities (SNFs)). In addition to the fact that Medicaid reimbursement rates cover less than 70% of expenses, it is getting harder and harder to recruit, train and retain staff, especially Certified Nursing Assistants (CNAs), as well as Licensed Practical Nurses (LPNs) and Registered Nurses (RNs) due to the extremely tight labor market and the relatively low wages the industry is able to pay for these critical, direct care positions. This problem has been intensified by the NY State Department of Health mandating specific staff-to-client ratios but failing to provide adequate reimbursement to support those ratios. The only way to keep the doors open to support the patients who are in our facilities is to not fill beds that are not going to receive adequate reimbursement, and that there are not enough staff to cover. While we understand that this has been causing a backlog in the hospitals, not filling these beds has been the only way SNFs have been able to adequately serve our patients.

FLPPS has surveyed the Monroe County nursing homes, and the TC3 Partnership has created a plan based on that survey that includes three components: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, support (childcare, transportation, wages during the training period), sign on and retention bonuses for CNAs, LPNs and RNs, as well as assistance in developing a career ladder for staff. Funds will also be used for similar support for home health aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long-term care needs. With an adequate supply of trained staff and enhanced payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,



Keith Chamberly, Executive Director
Genesee Health Facilities Association



A SeniorsFirst Community

254 Alexander Street
Rochester, NY 14607-2591
585-461-1991
Fax: 585-461-9833
www.kirkhaven.com

July 13, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing in support of the Transformational Community Care Coordination (TC3) project submitted by FLPPS, Common Ground Health and their partners.

Skilled Nursing Facilities (SNFs) in Monroe County and throughout the nation are facing a crisis that has been exacerbated by COVID 19. There are two key factors that have led to this crisis. First, Medicaid reimbursement rates cover less than 70% of the expenses of skilled nursing care, and the extremely tight labor market combined with the relatively low wages for many critical, direct care positions makes it harder and harder to recruit, train and retain staff, especially Certified Nursing Assistants (CNAs), Licensed Practical Nurses (LPNs) and Registered Nurses (RNs). The staffing problem has been intensified by the NY State Department of Health mandating minimum staffing levels but failing to provide adequate reimbursement to support the requirement. Without a volume of qualified staff and sufficient reimbursement to cover the cost of care, nursing homes are forced to limit admissions and keep beds empty. While we recognize that this causes a backlog in hospitals, we simply cannot fill our empty beds with patients we cannot safely care for.

FLPPS has surveyed the Monroe County nursing homes, and the TC3 Partnership has created a plan based on that survey that includes three components that will help address these challenges. The plan proposes to:

1. Provide enhanced payment for complex patients who are more expensive to care for.
2. Establish a pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign-on and retention bonuses for CNAs, LPNs, and RNs, as well as assistance in developing a career ladder for staff. Funds will also be used for similar supports for home health aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions.
3. Provide transportation for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

We urge full funding of this application to transform the health care system for persons with long-term care needs. With an adequate supply of trained staff, sufficient reimbursement to cover costs, and enhanced payments for high-need, medically complex patients, Kirkhaven will be able to provide those specialty services that are high demand in Monroe County and ease the burden on our hospital systems.

Sincerely,

Anne Gallese
President and CEO



July 18, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

One of the biggest crises in Monroe County (and in the nation) that has been severely impacted by COVID 19 is the status of nursing homes (Skilled Nursing Facilities (SNFs)). In addition to the fact that Medicaid reimbursement rates cover less than 70% of expenses, it is getting harder and harder to recruit, train and retain staff, especially Certified Nursing Assistants (CNAs), as well as Licensed Practical Nurses (LPNs) and Registered Nurses (RNs) due to the extremely tight labor market and the relatively low wages the industry is able to pay for these critical, direct care positions. This problem has been intensified by the NY State Department of Health mandating specific staff-to-client ratios but failing to provide adequate reimbursement to support those ratios. The only way to keep the doors open to support the patients who are in our facilities is to not fill beds that are not going to receive adequate reimbursement, and that there are not enough staff to cover. While we understand that this has been causing a backlog in the hospitals, not filling these beds has been the only way SNFs have been able to adequately serve our patients.

FLPPS has surveyed the Monroe County nursing homes, and the TC3 Partnership has created a plan based on that survey that includes three components: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign on and retention bonuses for CNAs, LPNs and RNs, as well as assistance in developing a career ladder for staff. Funds will also be used for similar supports for home health aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced



payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,

A handwritten signature in black ink, appearing to read "AG", is positioned above the typed name.

Aryeh Grinspan
President & CEO, WE Care Centers

ROCHESTER REGIONAL HEALTH

July 21, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

On behalf of Rochester Regional Health (RRH), we are writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

As you have been intimately aware of and involved in over these last two years, the biggest crisis facing Monroe County (and in the nation) in the near term is within our health care systems and its workforce. COVID-19 placed a tremendous strain on the healthcare system. Skilled Nursing Facilities (SNF), which were struggling prior to the pandemic and never designed for isolation and quarantine, lost staff, and had increasing difficulty hiring and retaining new employees. Additionally, since Medicaid reimbursement rates cover less than 70% of expenses, these nursing homes had no choice but to not fill beds that they were unable to staff due to this discrepancy in reimbursement. Coupled with the fact that NY State Department of Health mandated specific staff-to-client ratios, nursing homes were forced to have vacant beds, while backlogs of patients developed in the hospitals.

Even before the COVID pandemic, there was a population of patients who are medically ready for discharge from the hospital but cannot be released because appropriate post-acute care is unavailable or does not exist. In May 2022, Rochester General Hospital (RGH) and Unity Hospital accrued 5010 "Wasted Bed Days" – or 161 beds per day. This is a problem that has escalated. In 2021, RGH and Unity reported 30,344 Wasted Bed Days, but have already accrued 27,846 in the first six months of 2022. This backlog has profound financial and medical effects on the healthcare system, as well as familial effects.

When beds are full of patients who do not need to be there, new patients cannot be admitted. This means there are no beds for Emergency Department (ED) patients to be admitted to and no beds for patients who need non-emergency surgeries. If patients have filled up the EDs because there are no beds in the hospital, new patients cannot get into the ED because there is no room. It has become very difficult to meet the needs of trauma patients, gunshot patients and victims impacted by violence, and others in dire need of ED services when the entire system is backed up. If the EDs are full of patients who no longer need to be there, the ED doctor and staff are not able to perform the duties they are trained to do.

Additionally, the surgeons who do non-emergency surgeries (hip replacements, back surgeries) cannot do them because there are no beds available for their patients, resulting in surgeons questioning if this is where they want to work, leading many to potentially relocate to an area with no backlog. Some patients are having to manage pain longer than would otherwise be necessary, increasing the risk for addiction. Hospitals are staffed for acute levels of care, and it is inefficient to provide alternate levels of care. Hospitals are also not paid for acute levels of care when patients are only hospitalized due to lack of placement alternatives, resulting in financial hardship. Caregivers miss more work, spending time with their loved ones who remain hospitalized than they would if they were promptly settled into a routine at a SNF.

With no SNF beds available, patients who would otherwise go to a SNF are seeking admission to the hospital. Additionally, with SNFs full, patients have limited discharge options. When a bed opens up, that is the bed that they can be discharged to.

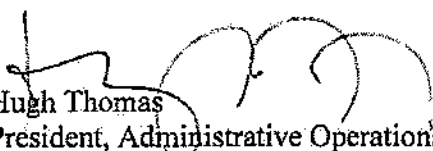
All of these problems can be addressed by opening up available SNF beds. The problem is staffing, complex cases that require more staff time with no additional reimbursement, and sometimes, transportation. The TC3 Partnership has created a plan that includes three components to transform the system into one that functions effectively. These components include: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds that will pay for training, supports (childcare, transportation, wages during the training period), sign on and retention bonuses for CNAs, LPNs, and RNs, as well as assistance in developing a career ladder for staff. Funds will also be used for similar supports for Home Health Aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,



Dr. Richard "Chip" Davis
Chief Executive Officer



Hugh Thomas
President, Administrative Operations

Cc: Amy Craib
Doug Stewart
Jill Graziano

July 11, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project.

The biggest crisis facing Monroe County (and in the nation) in the near term is within our health care systems. COVID 19 placed a tremendous strain on the healthcare system. Skilled Nursing Facilities, which were struggling prior to the pandemic and never designed for isolation and quarantine, lost staff, and had increasing difficulty hiring and retaining new employees. Additionally, since Medicaid reimbursement rates cover less than 70% of expenses, these nursing homes had no choice but to not fill beds that they were unable to staff due to this discrepancy in reimbursement. Coupled with the fact that NY State Department of Health mandated specific staff-to-client ratios, nursing homes were forced to have vacant beds, while backlogs of patients developed in the hospitals.

Even before the COVID pandemic, there was a population of patients who are medically ready for discharge from the hospital but cannot be released because appropriate post-acute care is unavailable or does not exist. In May 2022, Strong Memorial Hospital and Highland Hospital accrued 5064 “Wasted Bed Days” – or 163 beds per day. This is a problem that is escalating. We have already accrued 29,399 in the first six months of 2022. This backlog has profound financial and medical effects on the healthcare system, as well as familial effects.

When beds are full of patients who do not need to be there, new patients cannot be admitted. This means there are no beds for Emergency Department (ED) patients to be admitted to and no beds for patients who need (non-emergency) surgeries. If patients have filled up the EDs because there are no beds in the hospital, new patients cannot get into the ED because there is no room. It has become very difficult to meet the needs of trauma patients, gunshot patients, and others in dire need of ED services when the entire system is backed up. If the EDs are full of patients who no longer need to be there, the ED doctor and staff are not able to perform the duties they are

trained to do. Additionally, the surgeons who do non-emergency surgeries (hip replacements, back surgeries) cannot do them because there are no beds available for their patients, resulting in surgeons questioning if this is where they want to work, leading many to potentially relocate to an area with no backlog. Additionally, some patients are having to manage pain through opioids longer than would otherwise be necessary, increasing the risk for addiction. Hospitals are staffed for acute levels of care, and it is inefficient to provide alternate levels of care. Hospitals are also not paid for acute levels of care when patients are only hospitalized due to lack of placement alternatives, resulting in financial hardship. Caregivers miss more work, spending time with their loved ones who remain hospitalized than they would if they were promptly settled into a routine at a Skilled Nursing Facility (SNF). With no SNF beds available, patients who would otherwise go to a SNF are seeking admission to the hospital. Additionally, with SNFs full, patients have limited discharge options. When a bed opens, that is the bed that they can be discharged into.

All of these problems can be addressed by opening up available SNF beds. The problem is staffing, complex cases that require more staff time with no additional reimbursement, and sometimes, transportation. The TC3 Partnership has created a plan that includes three components to transform the system into one that functions effectively. These components include: 1. Enhanced payment for complex patients who are more expensive to care for. 2. A pool of funds will pay for training, support (childcare, transportation, wages during the training period), sign on and retention bonuses for CNAs, LPNs and RNs, as well as assistance in developing a career ladder for staff. Funds will also be used for similar support for Home Health Aides, which will enable us to discharge patients to home when appropriate, freeing up beds for other admissions. 3. Transportation to the SNFs for those patients who need it, so that they do not needlessly stay hospitalized while waiting for transportation to a SNF.

In conclusion, we urge full funding of this application to transform the health care system for persons with long term care needs. With an adequate supply of trained staff and enhanced payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,



Mark B. Taubman, MD
CEO, University of Rochester Medical Center
Dean, School of Medicine and Dentistry
Sr. Vice President for Health Affairs



Steven I. Goldstein
President & CEO, Strong Memorial Hospital
and Highland Hospital
Sr. Vice President, University of Rochester
Medical Center
President, Long Term Care Division

HOSPITAL EXECUTIVE COUNCIL

P.O. BOX 35089 - UNIVERSITY STATION
SYRACUSE, NEW YORK 13235
(315) 464-4368
FAX (315) 471-0632

RONALD LAGOE
EXECUTIVE DIRECTOR

July 13, 2022

The Honorable Adam J. Bello
Office of the County Executive, Monroe County
110 County Office Building
39 W. Main Street
Rochester, NY 14614

Dear Mr. Bello:

I am writing to support the application of FLPPS, Common Ground Health, and their partners for the Transformational Community Care Coordination (TC3) project and to address how a similar approach has worked for the Syracuse region.

During the 1980's and 1990's, the Syracuse hospitals worked to improve the efficiency and outcomes of care through length of stay reduction. The Hospital Executive Council developed a program to identify patients that were Difficult to Place in nursing homes and distributed information concerning this subject. The Council also developed the Subacute and Complex Care Programs to reduce extended stays for patients in hospitals.

As a result of this work, lengths of stay in the Syracuse hospitals have declined substantially and the efficiency of the health care system has increased.

We urge full funding of the Monroe County application to transform the health care system for persons with long term care needs. We are willing to contract with FLPPS and work with its partners to help implement the changes necessary to bring back a fully functioning health care system that meets the needs of its population. With additional payments for high-need, medically complex patients, the SNF industry will open additional beds to put the healthcare system into sustainable equilibrium.

Sincerely,

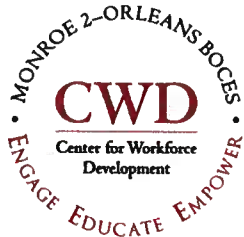


Ronald Lagoe, PhD
Executive Director,
Hospital Executive Council



Monroe 2-Orleans
Board of Cooperative Educational Services

Jo Anne L. Antonacci, District Superintendent



July 20, 2022

Ms. Carol Tegas, Chief Executive Officer
Finger Lakes Performing Provider System (FLPPS)
1 S Washington St Suite 200
Rochester, NY 14614

Shawna Gareau-Kurtz
Director
Tel: (585) 349-9100
Fax: (585) 349-9101
sgareau@monroe2boces.org

Dear Ms. Tegas:

I am writing to confirm our commitment to participating in the Transformational Community Care Coordination (TC3) project.

At Monroe 2-Orleans BOCES, industry aligned technical, academic and career readiness is offered to both adults and high school students. At WEMOCO, over 1,000 students from 12 area high schools receive technical training annually in various career training programs, including healthcare. At BOCES2 Center for Workforce Development (CWD), education and training is provided for adult learners, including the current provision of a Nurse Assistant (NA) program.

Through our Advisory Committees and job placement information, we are very much aware that there is a critical shortage of direct care healthcare workers in the region and have already been working to try to fill this need.

As fully outlined in our proposal, to meet the growing needs in the community, CWD proposes to:

1. In collaboration with WEMOCO, promote careers in healthcare by offering a 1-3-week Summer Introduction Experience into healthcare careers and the nursing profession for early high school students, and promote the Summer Experience during middle schools' Careers Exploration. (Total cost over four years = \$80,000)
2. Offer a Home Health Aide (HHA) training program, while working to develop a dual training program in HHA/NA (Total cost for development and providing the dual training over four years is \$121,650.)
3. Continue to provide our NA training program for 4 years (tuition covered by employers, aid, etc.) and provide a NA refresher training program. (Additional equipment / supplies / material expense over four years = \$153,000.)
4. Provide a Practical Nurse (PN) Entrance Exam Preparation Course for students who need support in preparing to apply for acceptance into a PN training program (Total cost over four years = \$53,000.)
5. Develop a part-time evening and weekend PN program to accommodate career training and advancement for those who currently work. (Total development, materials/equipment cost, and ramping up the program over four years = \$1,001,525.)
6. Provide embedded staff support in the form of a Work-based Activity Coordinator to coordinate work experiences and clinical training rotations, and an Integrated Instructor for English Language Learners who face challenges, especially with written materials and licensing exams. (Total cost over four years = \$782,600, this

includes \$66,050 in administrative support and \$87,500 in potential space leasing expense.)

The total cost for the development, training, and additional materials over four years is \$2,191,775 and includes costs of \$536,575 in year one.

We look forward to our partnership in meeting the need for skilled and prepared direct service healthcare workers in Monroe County.

Sincerely,

A handwritten signature in blue ink that reads "Shawna Gareau-Kurtz". The signature is fluid and cursive, with the first name "Shawna" being the most prominent.

Shawna Gareau-Kurtz, Director

Center for Workforce Development, Monroe 2-Orleans BOCES



July 21, 2022

Ms. Carol Tegas, Chief Executive Officer
Finger Lakes Performing Provider System (FLPPS)
1 S Washington St Suite 200
Rochester, NY 14614

Dear Ms. Tegas:

I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

As a Minority Business Enterprise (MBE) in Monroe County, AVS Consulting Strategies is a business dedicated to helping people achieve their career goals. This includes providing workshops and teaching skills such as time management, resume writing, cover letter preparation, interviewing and professionalism coaching. As outlined in our proposal, each workshop can accommodate between 20 and 50 individuals, with a cost of \$4,000 per workshop.

Per our discussions, I understand that you anticipate a need for 24 workshops for a total annual cost of \$96,000.

In conclusion, I applaud your foresight in recognizing that many entry-level employees have had no exposure to the development of the skills taught in these workshops and will benefit greatly from the materials and information presented. This training will allow the employees to succeed and enable them to meet the needs of the patients who will ultimately be served through this program. AVS Consulting Strategies will be pleased to help develop these skills in this workforce development project and intends to work on this project throughout its expected multi-year duration.

Sincerely,

A handwritten signature in cursive script that reads 'Annemarie Sheppard'.

Annemarie Sheppard
Executive Director, AVS Consulting Strategies



July 15, 2022

Ms. Carol Tegas, Chief Executive Officer
Finger Lakes Performing Provider System (FLPPS)
1 S Washington St Suite 200
Rochester, NY 14614

Dear Ms. Tegas:

I am writing to support the application of FLPPS, Common Ground Health and their partners for the Transformational Community Care Coordination (TC3) project.

As a Women Business Enterprise (WBE) in Monroe County, Wellness Associates of Greater Rochester, LLC provides programming to address mental health and wellness from a prevention and early intervention perspective. One of the services we provide is Mental Health First Aid Training. This training helps participants, especially those who are in roles where they may encounter persons having a mental health (or substance abuse) crisis, understand what to do and say when encountering a person in these situations. The course is designed to help participants identify, understand, and address potential issues. For example, HHAs are in regular, independent contact with persons who are elderly and/or disabled and often live alone, it is likely that they will encounter individuals at risk for depression and other mental health problems. This training will help them to know what to do when they encounter these situations.

As outlined in our proposal, the training will consist of 18 sessions. The cost to train 420 individuals in year one will be \$70,000.

In conclusion, we applaud your foresight in recognizing the needs of the patients who will ultimately be served through this program. Wellness Associates will be pleased to help develop these skills in this workforce development project and intends to work on this project throughout its expected multi-year duration.

Sincerely,

Megan Clifford LCSW-R

Megan Clifford, LCSW-R
Founder, Lead Trainer, Wellness Associates of Greater Rochester



7/22/2022

Ms. Carol Tegas, Executive Director
Finger Lakes Performing Provider System (FLPPS)
1 S Washington St Suite 200
Rochester, NY 14614

Dear Ms. Tegas:

I am writing to confirm our commitment to participating in the Transformational Community Care Coordination (TC3) project.

Refugees Helping Refugees (RHR) is very much aware that there is a critical shortage of direct care healthcare workers in the region and would like to assist in filling this need.

RHR serves refugees and immigrants from diverse backgrounds in Rochester and Monroe County. Our mission, as a refugee-led organization, is to foster growth, self-determination, and self-reliance for refugees in our community. We provide education, training, career support, case management, and other services that enable refugees to build on their own strengths so that they might advance and thrive in society. Our programs and services include English classes, civics courses, health education, career training, and comprehensive case management. We also provide support for the underserved youth refugee population as they navigate the education and healthcare systems.

In partnership with FLPPS and other TC3 partners, RHR will assist in the implementation of a workforce development program. There will be two key components of this work: 1. To provide a barrier free pathway into a career in healthcare by focusing on recruiting entry level candidates for healthcare positions with the opportunity for meaningful employment and career advancement, and 2. To provide English literacy training and computer skills to recruited candidates and translating training materials as needed.

As noted in our proposal, RHR will provide these services to 100 recruits in Year 1 at a total cost of \$100,000. This includes \$73,255 for staffing, including a Senior Multi-Lingual Counselor/Advocate, a Youth Services Navigator, and an Outreach Worker. In addition to staffing, \$20,545 is budgeted for Administrative Support, \$2,600 is budgeted for transportation costs, and \$3,600 is budgeted for rent expense.

We look forward to our partnership in meeting the need for skilled and prepared direct service healthcare workers in Monroe County, and intend to work on this project throughout its expected multi-year duration.

Sincerely,

A handwritten signature in blue ink that reads "Dina Dinnon".



Dina Johnson
Executive Director, Refugees Helping Refugees



July 27, 2022

Carol Tegas, Executive Director
Finger Lakes Performing Provider System
1 S. Washington Street, Suite 200
Rochester, NY 14614

Dear Carol:

I am writing to confirm our commitment to participating in the Transformational Community Care Coordination (TC3) project.

Coordinated Care Solutions, Inc. (CCSI) is an agency that provides consulting and technical assistance in the areas of Cultural Competency, Diversity, Equity & Inclusion (DEI), Motivational Interviewing, and Trauma Responsive Practices. Our training programs are specifically tailored to meet the needs of local behavioral health, social and human service departments, state agencies and community-based organizations in Monroe County and across New York State.

As outlined in our proposal, we will offer an assessment of current onboarding materials and training through a DEI/Trauma Informed lens for up to five Skilled Nursing Facilities and develop up to six on demand training modules in year 1 for a total cost of \$24,300. CCSI will also provide monthly DEI trainings and quarterly leadership trainings for a total annual cost of \$25,000 in years 1-4. Total services for the years 1-4 are \$124,300.

We look forward to our partnership in meeting the need for skilled and prepared direct service healthcare workers in Monroe County and intend to work on this project throughout its expected multi-year duration.

Sincerely,

A handwritten signature in black ink, appearing to read "Anne Wilder", followed by a horizontal line extending to the right.

Anne Wilder
President, Coordinated Care Solutions, Inc.



AMBULANCE / TRANSPORTATION

Monroe Medi-Trans, Inc. / Monroe Ambulance

1669 Lyell Avenue
Rochester, New York 14606
www.monroeambulance.com

Emergency: (585) 232-9000
Transportation: (585) 454-6211
Admin Fax: (585) 454-5182

Quality. Compassion. Integrity.

July 22, 2022

Ms. Carol Tegas, Executive Director
Finger Lakes Performing Provider System (FLPPS)
1 S Washington St Suite 200
Rochester, NY 14614

Dear Ms. Tegas:

I am writing to confirm our commitment to participating in the Transformational Community Care Coordination (TC3) project.

As you are aware, Monroe Ambulance is the major transportation provider for Rochester Regional Health, transporting thousands of patients per year from the hospitals to Skilled Nursing Facilities (SNFs) or for those who need it, to their homes. Monroe Ambulance provides BLS and ALS transport, as well as specialty transportation services for patients with unique medical needs, such as bariatric or ventilator-dependent patients.

While Monroe Ambulance does its best to transport patients in a timely manner, we understand that delays in transportation create disruptions and backups in patient flow and prevent timely transition to an alternate level of care. For this reason, Monroe Ambulance agrees to provide a dedicated ambulance nine (9) hours per day, Monday through Friday (excluding major holidays) to serve RRH's hospitals. In the first year, one ambulance will serve both Rochester General & Unity hospitals. As the availability of enhanced transportation services gets fully integrated into hospital and SNF workstreams, we are prepared to provide two ambulances, one for each hospital in years 2-4 of the TC3 initiative.

The total cost for the provision of this service is \$175 per hour. We understand that for budgetary purposes, 50% of this expense is expected to be reimbursed by the patient or third-party payors, and that grant funds in the amount of \$193,725 in year one has been budgeted to subsidize the unreimbursed cost of this service. We look forward to our partnership in helping to restore the healthcare system in Monroe County to sustainable equilibrium.

Sincerely,

Thomas C. Coyle, President/CEO

Thomas Coyle
President

Timothy Coyle
Executive Vice President

Monroe is dedicated to medical services, transportation and education. We Maintain a commitment to excellence in the delivery of responsible, professional, caring and affordable service.



July 25, 2021

Ms. Carol Tegas, Executive Director
Finger Lakes Performing Provider System (FLPPS)
1 S Washington St Suite 200
Rochester, NY 14614

Dear Ms. Tegas:

I am writing to confirm our commitment to participating in the Transformational Community Care Coordination (TC3) project.

As you are aware, American Medical Response (AMR) is the major transportation provider for the University of Rochester Medical Center (URMC), transporting thousands of patients per year from the hospital to Skilled Nursing Facilities (SNFs) or for those who need it, to their homes. AMR provides BLS and ALS transport, as well as specialty transportation services for patients with unique medical needs, such as bariatric, ventilator-dependent, and other patients with unique medical needs.

While AMR does its best to transport patients in a timely manner, we understand that delays in transportation create disruptions and backups in patient flow and prevent timely transition to an alternate level of care. For this reason, AMR agrees to provide a dedicated ambulance nine (9) hours per day, Monday through Friday (excluding major holidays), to serve URMC's hospitals. In the first year, one ambulance will serve both Strong Memorial and Highland hospitals. As the availability of enhanced transportation services gets fully integrated into hospital and SNF workstreams, we are prepared to provide two ambulances, one for each URMC hospital in years 2-4 of the TC3 initiative.

The total cost for the provision of this service is \$175 per hour. We understand that for budgetary purposes, 50% of this expense is expected to be reimbursed by the patient or third-party payors and that grant funds in the amount of \$193,725 in year one have been budgeted to subsidize the unreimbursed cost of this service. We look forward to our partnership in helping to restore the healthcare system in Monroe County to a sustainable equilibrium.

Sincerely,

A handwritten signature in black ink, appearing to read 'T. Frost'.

Timothy Frost
Regional Director, American Medical Response