



SENIOR HOUSING

SENIOR HOUSING | ASSISTED LIVING | ADULT CARE FACILITIES | HOME CARE | RETIREMENT COMMUNITIES
ADULT DAY HEALTH CARE | PACE/MLTC | NURSING HOMES | CCRG

Ensure All Seniors Have Access to Safe, Decent, and Affordable Housing with Services

Fund the Affordable Independent Senior Housing Assistance Program: For many years, operators of senior housing have been able to access federal dollars for resident assistants through the U.S. Department of Housing and Urban Development (HUD). Research has shown that resident assistance programs in senior housing promote emotional well-being and stronger social supports, higher resident awareness of services, and better linkages between residents and needed services. Unfortunately, the HUD funding has been reduced significantly in recent years. Without State investment, this successful model may become extinct. Under the Affordable Independent Senior Housing Assistance Program, resident assistants would provide so-called “light-touch” services that may include: (1) establishing and maintaining networking relationships with community-based services and organizations; (2) providing residents with information and referral lists for community services and assisting them with follow-ups; (3) arranging for educational and socialization programs for residents; (4) helping residents arrange for housekeeping, shopping, transportation, Meals on Wheels, cooking, and laundry services; (5) establishing resident safety programs; and (6) advocating for residents.

A strategic investment in resident assistance would allow residents to remain in their homes and age-in-place, connecting them to outside health, wellness, and other supports, and delaying or preventing reliance on high-cost Medicaid services. A New York-based study of Selfhelp residents, conducted by Dr. Michael Gusmano of Rutgers University, found that the average Medicaid payment per person, per hospitalization was \$3,937 less for residents with access to services, and Selfhelp residents were 68 percent less likely to be hospitalized. Furthermore, a 2016 study of residents in affordable housing in Oregon showed that Medicaid costs declined by 16 percent just one year after seniors moved into affordable housing communities with resident assistance programs.

Request: Appropriate \$10 million over five years for the Affordable Independent Senior Housing Assistance Program to establish new resident assistance programs in existing and new affordable senior housing.

Invest in Affordable and Middle-Market Senior Housing: To prepare for the needs of New York’s aging population, the State must make a substantial capital investment in affordable and middle-market senior housing. Older New Yorkers are the fastest growing demographic in our state and will comprise an estimated 4.3 million households by 2030. Between 2014 and 2019, the population of middle-income seniors is projected to nearly double, and middle-income seniors will account for 43 percent of the total senior population by 2029. Furthermore, projections indicate that approximately 60 percent of middle-income seniors in 2029 will have mobility limitations, and one in five of these seniors is likely to have three or more chronic conditions and one or more limitations with the activities of daily living. A dedicated source of funding for the development of low- and middle-income housing with services is necessary to avoid a growing crisis for New York’s seniors.

Request: Appropriate \$140 million for affordable housing in the State’s next five-year housing capital plan beginning in FY21, develop a new source of funding for middle-income senior housing, and dedicate 200 project-based Section 8 vouchers annually to support the development of units for very low-income seniors.

Ensure That Not-For-Profit Aging Services and Long Term Care Providers Are Exempt From the Prevailing

Wage Requirement: Many not-for-profit long term care and aging services providers have been awarded state grants or have utilized state or local government financing programs and/or real property tax abatements to expand or upgrade the services they provide to elderly New Yorkers, including nursing homes, assisted living, housing, and senior communities. With no additional funding provided for in the Governor's prevailing wage proposal, the cost of this 15-20 percent "construction tax" would ultimately need to be passed on to seniors and their families.

Private sector projects funded under state grant programs such as the Statewide Health Care Facility Transformation Program, which are aimed at expanding services and enhancing quality of care for all New Yorkers regardless of payment source, would have more limited reach, as the costs of individual projects would significantly increase. This would adversely affect access to health services for New Yorkers of all ages.

Economic development and state finances would also be negatively impacted. Collectively, New York's 12 Continuing Care Retirement Communities (CCRCs) – campus-based residential programs for seniors – generate \$500 million in economic activity to the state each year and directly/indirectly support over 2,000 jobs. Residents invest their resources in the CCRC for their residential and health-related needs, which obviates the need to rely on the State/local-funded Medicaid program to cover such costs. Based on New York's senior population, we should have six to seven times the number of CCRCs we have now. High development costs are to blame, and seniors are leaving New York to access CCRC services in other states.

Request: Ensure that not-for-profit aging services and long term care providers such as nursing homes, affordable housing, CCRCs, adult care facilities/assisted living, retirement housing, PACE centers, adult day health care programs, and hospice residences are exempt from prevailing wage requirements.

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