



**For Immediate Release:**  
March 6, 2018

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### **STATE BUDGET PRIORITIES REQUIRE ATTENTION FOR ELDERLY AND THE DISABLED**

As the state budget discussions move into an important stage, and the likely discussion of one-house budget priorities this week, LeadingAge New York and its members are encouraging legislators to broaden their focus beyond high-cost Medicaid beneficiaries and begin to invest in lower cost support services that will prolong independence and delay entry onto the Medicaid rolls and unnecessary placement in nursing homes.

The State and federal governments have repeatedly expressed the belief that Medicaid savings in long-term care is available through the diversion and transition of beneficiaries from nursing homes to lower-cost settings in the community. However, appropriate housing and supportive services must be available in their communities to accomplish this goal. The lack of affordable, safe, and accessible housing or 24-hour supervision is often cited as an insurmountable barrier to transitioning from a nursing home or remaining in the community.

The group is therefore focusing on a few key investments that are important to New York's senior community and which would reduce the costs of long term care for seniors and the Medicaid program: 1) Funding to support an Independent Senior Housing Assistance Program; 2) An increase in the reimbursement rate for low-income seniors residing in adult care facilities; and 3) Increased investment in Naturally Occurring Retirement Communities.

LeadingAge New York is a member of a coalition seeking:

- **Fund a Senior Housing Resident Advisor Program:** Investing in affordable housing with support services will provide low-income seniors with access to safe places to live and basic supports in the community, allowing them to age-in-place and delaying or preventing the need for high-cost Medicaid services. Following up on last year's historic \$125 million for senior housing capital, advocates are asking the Legislature to appropriate \$10 million for the Resident Service Advisor Program, to help senior housing providers offer an array of services that assist residents to remain independent by emphasizing wellness and healthy aging. Advocates are seeking \$2 million per year for five years;
- **Increase the Supplemental Security Income (SSI) Rate for ACF Residents:** The SSI rate pays just under \$41 per day for ACFs to provide residents with housing, meals, personal care, assistance with medication administration, case management, housekeeping, activities, and more. Based on an analysis of 2015 data, this funding falls about \$42 short of the average daily cost of providing ACF services. We know this gap has only grown as the minimum wage mandate has been phased in and other costs continue to rise. The State has not increased its share of the SSI

rate in 11 years, and many ACFs serving low-income seniors are in financial distress. If they close or have to turn away SSI/Medicaid-eligible seniors, many of these individuals will be placed in nursing homes at higher cost to the State. Advocates are seeking an additional \$20 million per year for five years.

- **Invest in NORCs/NNORCs:** Naturally Occurring Retirement Communities (NORCs) and Neighborhood NORCs (NNORCs) are multi-age housing developments or neighborhoods not originally built for seniors but now home to a significant number of older persons. This growing support and services program maximizes and supports the successful aging-in-place of older residents. It offers preventive health and wellness activities, identifies major health risks among the seniors they serve, and develops programs to improve their NORC community's health status. The NORC framework addresses key social determinants that support quality health outcomes and result in long-term cost savings for the State. Advocates are seeking \$3 million to restore funding and sustain the program.

James W. Clyne, Jr. president and chief-executive officer of LeadingAge New York said: "The State must broaden its focus beyond high-cost Medicaid beneficiaries and begin to develop strategies that will prolong independence and encourage the use of private funds to delay entry onto the Medicaid rolls. Supporting programs that extend someone's ability to remain in their home is both popular and makes budget sense. We recognize the fiscal challenges that the State is confronting; however, in the face of a growing population of older New Yorkers and workforce shortages, additional investment in these services and supports is imperative."

Gloria Harrington, Executive Director of Quail Summit, in Canandaigua said: "Unfortunately, there is no safety net for seniors who pay privately for assisted living services. The sad reality is that it costs more for me to board my dog than the state is willing to pay to support low-income seniors in assisted living. This is must change and I am in Albany today to tell this story."

Matthew Albright, chief-executive officer of Family Services Communities in Rochester said: "I'm excited to be meeting with my representatives and speaking to them about how important senior care is, particularly given the upcoming senior boom facing New York State."

Claire Guerette, Executive Director of St. Margaret's House in Manhattan said: "It's very encouraging to see that the Legislators are taking our concerns about the future of aging services seriously and that they are supporting our efforts in creating programs that will help our seniors better age in place."

LeadingAge New York highlighted three additional priorities previously to legislators, these included:

**Directing more than \$150 million in transformational grants for Long Term Care providers** to enhance and improve upon its existing infrastructure. And, it is seeking to include specific protections in law to ensure that the funding is available to all LT-PAC providers including hospice programs.

**Ensuring work force recruitment and retention funds are distributed across all LTPAC sectors.**

Shortages in qualified staff have resulted in long waits for community-based services, increases in emergency room (ER) visits and hospitalizations, and reliance on overtime and staffing agencies. The growing population of seniors requires additional funding to meet the growing demand for a LTCPAC work force

**Restore \$407 Million in Funding for LTPAC Providers.** The proposed budget cuts Managed Long Term Care plans by \$325 million and nursing homes by \$42.6 million. With our over 65 population growing exponentially and gaps in services already evident across the state, this disinvestment in long term care services and supports will only exacerbate the problem.

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