

Selfhelp Community Services, Inc.

520 Eighth Avenue New York, New York 10018 212.971.7600 www.selfhelp.net

Testimony from Selfhelp Community Services, Inc. Joint Legislative Budget Hearings Fiscal Year 2020-2021 Executive Budget Proposal Health and Human Services

Submitted by Katie Foley, Director, Public Affairs, Selfhelp Community Services
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Thank you for the opportunity to provide testimony on the impact of health and human service programs in New York State, particularly those that support older adults in their communities. Our testimony will focus on programs that help older New Yorkers remain in their homes and communities as they age, including the benefit of investments in Naturally Occurring Retirement Communities (NORCs) and Neighborhood NORCs¹[1] and service coordinators in affordable senior housing.

Selfhelp was founded in 1936 to help those fleeing Nazi Germany maintain their independence and dignity as they struggled to forge new lives in America. Today, Selfhelp has grown into one of the largest and most respected not-for-profit human service agencies in the New York metropolitan area, with 46 programs throughout Manhattan, Brooklyn, Queens, the Bronx, Nassau, and Suffolk Counties. We provides a broad set of services to more than 20,000 elderly, frail, and vulnerable New Yorkers each year, while remaining the largest provider of comprehensive services to Holocaust survivors in North America. Selfhelp offers a complete network of community-based home care, social service, and senior housing with the overarching goal of helping clients to live with dignity and independence and avoid institutional care.

Our services are rooted in the idea that all individuals deserve to age with independence and dignity. Our services include: specialized programs for Holocaust Survivors; eleven affordable senior housing complexes; four Naturally Occurring Retirement Community (NORC) programs; four intensive case management programs; five senior centers; home health care and home health aide training; client centered technology programs including the Virtual Senior Center; two court-appointed guardianship programs; the Selfhelp Alzheimer's Resource Program (SHARP); and the provider for New York Connects in Queens.

¹ N/NORC indicates both NORC and Neighborhood NORC programs.





Naturally Occurring Retirement Communities (NORCs)

We would like to thank the legislature for supporting N/NORCs, and especially for the program enhancements that the legislature secured in FY 2019 and FY 2020. N/NORCs were founded with the ultimate goal of transforming residential complexes and neighborhoods to meet the needs of a growing cohort of older residents and enable them to remain living independently in their homes; thrive in their communities, and delay hospitalization or nursing home placement. The density of older adults and their proximity to each other further fosters creative approaches to providing health and social services. N/NORC programs provide case management services; health and nursing services; recreational, social and cultural activities and ancillary services tailored to meet the needs of each community. Programs actively encourage healthy aging by providing access to health care, promoting health and wellness activities, addressing disease prevention and responding to chronic health conditions.

Selfhelp provides social services to more than 1,300 residents at four N/NORCs throughout Queens, New York. The services provided by N/NORCs are crucial to the health and well-being of New York's aging communities, and we thank the State for continually funding these programs, and we support continued investments. Older adults across New York rely on N/NORC services to remain healthy and stably housed; without these services, their options for receiving appropriate community-based care would be decreased.

NORC Health Care Management

A key component of the N/NORC program model is health care management and assistance, and most programs employ nurses to fulfill this requirement. Nurses provide services to N/NORC residents that might not otherwise exist in the community, such as medication education, diabetes testing, flu shots, mobility and balance screenings, and helping clients get in touch with doctors. Many residents rely on these services as a main source of health care and value the consistent, quality care they provide.

While the state faces a daunting \$6 billion budget gap, much of it spurred by Medicaid, N/NORC programs continue to serve residents on relatively small budgets while helping defer more substantial costs to the State. For example, the average annual cost of a nursing home stay for one individual in New York State can be as high as \$142,000 per year;² this amounts to nearly the value of an entire N/NORC program contract, generally serving hundreds of older adults and helping them remain in their homes. If the N/NORC were not there, that person might require nursing home placement or increased visits to the emergency room, adding even more costs. Nursing homes can often be prohibitively expensive, as few individuals can afford to pay out of pocket for care. As a result, nursing home residents become reliant on State and Federal support and subsidies such as Medicaid. Investing in N/NORCs can help limit these increased costs to the Medicaid system.

N/NORCs were previously able to secure nursing hours pro-bono by partnering with hospitals, retired nurses, or supervised student nurses. However, in the wake of recent Medicaid

² NYS Department of Financial Services: https://www.dfs.ny.gov/consumer/ltc/ltc_about_cost.htm

Redesign and billing changes, in addition to an aging population with increased needs, these arrangements are becoming unstable and many nursing services providers have cut their probono hours. With many of these partnerships greatly diminished or fully terminated, N/NORCs must find funding to pay for hours that were previously free, essentially spending more to maintain the same level of service. The largest provider of N/NORC nursing completely eliminated their pro-bono hours in July 2019. An additional \$1 million would sufficiently cover these losses across all SOFA-funded N/NORC programs. It is critical that this money not impact unit of service requirements.

The Executive Budget Proposal includes \$8.06 million for N/NORC programs. This funding is vital to ensure that State funded N/NORCs can continue to provide services. In FY 2019-2020, the Legislature added \$325,000 to address the nursing challenge, and these funds were very useful in supporting programs. However, this was not included in the Executive Budget proposal this year. We ask that the Legislature add \$1 million to the FY 2020-2021 Executive Budget proposal of \$8.06 million for N/NORCs, for a total of \$9.06 million. Older adults across New York State rely on N/NORC services to remain healthy and stably housed, while defraying millions in Medicaid costs to the State.

Senior Affordable Housing

Since 1963, Selfhelp has been building affordable housing. Today, Selfhelp Community Services is a major provider of affordable housing for seniors in New York City and on Long Island. Our housing portfolio includes eleven affordable apartment developments in Queens, the Bronx, Brooklyn, and Long Island, which house over 1,400 low- and moderate-income senior residents in attractive, functional apartments with access to social services as needed.

Selfhelp's unique real estate model brings together safe and affordable apartments with our legacy of quality social services. At each building, we offer service coordination through SHASAM (Selfhelp's Active Services for Aging Model), which makes available social work services, education, and recreation, as well as access to skilled nursing and home care, if and when requested by the resident. The goal of SHASAM is to provide the appropriate level of assistance to allow older adults to remain in their apartments and not move to more costly settings such as assisted living or nursing homes.

Affordable Senior Housing as a Tool for Healthcare

Selfhelp believes that the best outcomes for older adults are achieved when social services support health. We know that service coordinators within affordable senior housing can reduce healthcare costs and keep seniors healthier at home. By bringing health and social services together in policy making and funding decisions, we can improve the outcomes for older adults throughout New York State.

Importantly, recent research on Selfhelp's service coordination model shows that low-cost interventions have a significant impact on health. The SHASAM model of services would result in significant savings to the State's Medicaid program by preventing or lowering costs of

emergency room visits and keeping low-income seniors out of costlier levels of care, such as assisted living or nursing homes. A New York-based study, conducted by Dr. Michael Gusmano of Rutgers University, compared Selfhelp residents with access to resident assistants to a comparison group of seniors in the same zip codes without this support. The published research shows that residents of Selfhelp's housing are healthier than their neighbors who do not live in high-quality housing.

Research show that residents in Selfhelp's affordable housing had:

- 68% lower odds of Selfhelp residents being hospitalized
- \$1,778 average Medicaid payment per person, per hospitalization for Selfhelp residents, versus
 - \$5,715 for the comparison group
- 53% lower odds of a Selfhelp resident visiting an emergency room compared to a non-Selfhelp resident

The full report is available through the Journal for Health Affairs (the article is available upon request), and a white paper published by Selfhelp is available at www.selfhelp.net.

We continue to urge the State to pass legislation and dedicate funding to create a senior housing resident coordinator program. We appreciate Assemblyman Cymbrowitz's leadership on this issue. In coordination with LeadingAge NY, Enterprise Community Partners, LiveOn NY, and other housing providers and advocates, **Selfhelp supports a \$10 million allocation over five years to establish funding for social workers in new and existing affordable senior housing.** Service coordination includes an array of services that assist residents to remain independent by emphasizing wellness and healthy aging. This \$10 million investment through the Affordable Independent Senior Housing Assistance Program would be used in conjunction with New York's historic commitment of \$125 million in senior housing, and would create a very cost-effective model for seniors to age in their own homes, avoid more costly institutional care, and result in savings for Medicaid.

Conclusion

Thank you for the opportunity to testify today. On behalf of the 20,000 clients we serve, I am grateful for the Assembly's support for affordable housing. For further questions, I can be reached at kfoley@selfhelp.net or 212-971-7605.