



Visiting Nurse Service of New York  
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**Testimony of the Visiting Nurse Service of New York (VNSNY)**  
**Joint Legislative Budget Hearings**  
**Fiscal Year 2020-2021 Executive Budget Proposal**  
**Health and Human Services**  
**February 3, 2020**

Thank you for the opportunity to provide testimony on the impact of health and human service programs in New York State (NYS), particularly those that support older adults in their communities. My name is Rhonda Soberman, and I am the Manager for Program Development for the Visiting Nurse Service of New York (VNSNY). The focus of my work for almost 25 years has been working with organizations like Naturally Occurring Retirement Communities (NORCs) and Neighborhood Naturally Occurring Retirement Communities (NNORCs) to promote successful aging in place for older adults. As one of the largest not-for-profit home and community-based health care organizations in the United States, VNSNY provides care to more than 44,000 patients and health plan members every day. For more than 125 years, VNSNY has been providing healthcare services to some of New York's most vulnerable and marginalized populations. My comments today will focus on the important supportive services that N/NORCs provide to older New Yorkers, and specifically the need for more funding for health and nursing services in N/NORCs.<sup>1</sup>

First, I would like to thank the NYS Assembly and NYS Senate for supporting N/NORCs, and especially for the program enhancements that the Legislature secured in Fiscal Year (FY) 2019 and FY2020. N/NORCs were founded with the 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 avoid or delay hospitalization or nursing home placement. A dense population of older adults and their proximity to each other further fosters creative approaches to providing health and social services. N/NORCs engage with a range of older adult, from very healthy to extremely frail, in an effort to support healthy aging and provide proactive intervention to promote community living at the highest functional level.

The N/NORC program model looks at both the social and health care needs of the community they serve. A key component of this program model is health care management and assistance. Most programs employ nurses to fulfill this requirement, as many residents rely on these services as links to better understanding their health care needs. These important services identify residents with health instability and link them to appropriate care, educate residents on how to maintain good health, administer consultations and wellness-focused interventions, and provide frail individuals with a strategy to secure needed care – with the goal of allowing them to age in the comfort of their home. *These nursing services are NYS mandated, unreimbursed interventions that make a dramatic difference in directing residents to the most appropriate level of care.* Residents value the consistent, quality care and health advocacy that the N/NORC nurse provides.

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<sup>1</sup> N/NORC indicates both NORC and Neighborhood NORC programs.

VNSNY N/NORC nurses regularly identify individuals who are not aware that their current state of health is deteriorating. VNSNY nurses have provided blood pressure clinics and in-home health assessments, where they have identified individuals with cardiac instability, uncontrolled hypertension and other critical heart issues. Following these consultations, our nurses have been able to link clients to primary medical care and medication management to address these critical health issues.

N/NORCs were previously able to secure some nursing hours in-kind by partnering with organizations like VNSNY. However, with Medicaid and managed care rates putting pressure on reimbursement, these arrangements are becoming unstable and many nursing services providers have cut their pro-bono hours.

For more than 20 years, VNSNY supported the N/NORC model by providing in-kind nursing services to more than 25 NORC programs in NYC. This became increasingly financially untenable, and *last year, VNSNY had to stop providing pro-bono hours altogether.*

While the NYC Council provided some relief its current budget, this is not ongoing funding, and only supports a small amount of nurse staffing, and does not address the needs of N/NORCs outside NYC.

*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 cover these nursing services. In FY2019-2020, the State 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 FY2020-2021 Executive Budget proposal for N/NORCs - a total of \$9.06 million.*** This will provide stable funding for N/NORC programs that have struggled with the loss in pro-bono nursing services over the last several years. We urge you to support these important programs whose vast reach will help to address the needs of this growing aging population.

Thank you for your consideration. For further questions, I can be reached at [Rhonda.Soberman@vnsny.org](mailto:Rhonda.Soberman@vnsny.org) or (212) 609-6312.