

Testimony of Community Connections at Findley Lake

Joint Legislative Budget Hearings

Fiscal Year 2024-2025 Executive Budget Proposal Health and Human Services

Submitted by Marlene Garone
January 31, 2024

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. My name is Marlene Garone and I am the Program Director for the Community Connections at Findley Lake N/NORC. My comments today will focus on the important supportive service programs that Naturally Occurring Retirement Communities (NORCs) and Neighborhood NORCs¹ provide for older New Yorkers. **Specifically, I support adding \$2.5 million in new funding for the N/NORC program, including \$1 million to support health and nursing services in N/NORCs and \$1.5 million to grow the N/NORC program to new sites across the State.**

First, I would like to thank the Legislature for ongoing support for N/NORCs. Because of your enthusiasm for this program, we have been able to bring resources and attention to the needs of a large and rapidly growing older adult population.

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.

The Community Connections at Findley Lake N/NORC is in its 5th year of operation serving the rural communities in the very western corners of New York State. As low income, rural and aging communities, the needs of the towns and villages we serve are varied and many. Our residents are independent and committed to remaining in their neighborhoods. However, our communities have very little access to the resources they need to remain independent and safe in their own homes. There is no local health care delivery system except for a volunteer fire and ambulance companies. Most of the neighborhoods we serve have no local healthcare provider offices and the few that do are only staffed on a part-time basis. The closest hospital with an emergency department is over 20 miles away. Transportation is a major challenge, especially in the winter months in the snow belt area of the Great Lakes, with an average snow fall of 210 inches per year. If aging members of the community do not drive, they require transportation to shopping, health appointments, obtaining medications and other needed services. Community

¹ N/NORC indicates both NORC and Neighborhood NORC programs

members, especially the elderly, are reluctant to ask for help unless there is a trusted, support service run by individuals who live and are well known in the community. Community Connections is the community-based organization that has been providing essential needed services to our aging residents as a N/NORC. Since our approval as a N/NORC 2019 we have seen a 283% increase in services described below to the rural residents we serve.

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.

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 year²; 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 changes to the health care field, in addition to an aging population with increased needs, these arrangements are now unstable, and many nursing services providers have cut their pro-bono 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.

A survey of N/NORCs statewide found that on average programs have experienced a 50% reduction in pro-bono nursing hours from 2015-2018. In addition, the largest provider of N/NORC nursing completely eliminated their pro-bono hours in 2019. An additional \$1 million would sufficiently cover these losses across all SOFA-funded N/NORC programs.

Below is an example of the essential work Community Connections at Findley Lake N/NORC nurses and other staff play in the lives of rural New York residents. Our rural N/NORC had no access to pro-bono nursing hours and the nursing services we are able to provide are made available because of the N/NORC funding.

One of our N/NORC residents was a 79-year-old long-time resident of the town of Mina, retired from a local manufacturing company and a proud veteran of the Vietnam war. He was also a farmer raising goats, cows and other small animals. He lived alone and his closest relatives, 2 sisters, live in other states. He had multiple chronic medical conditions including diabetes and hypertension as well as many of the cardiac and renal secondary complications of these two diagnoses. Although Community Connections had some contact with him beginning in 2016,

² https://www.dfs.ny.gov/consumer/ltc/ltc_about_cost.htm

his need for additional support became evident in January of 2020. Our nursing staff provided multiple case management services for years including coordination of regular evaluation and management of his medical conditions through the VA system, assistance with applying for additional veteran benefits, ongoing healthcare management for follow-up of his medical visits with monitoring health indicators. Many other services have been provided over these past years that would not have been available to this resident without the resources of Community Connections and the N/NORC Program. Community Connections' nurses and other staff visited his home several times weekly and continued to coordinate all medical, social and emotional support as well as home companion services that allowed him to remain in his own home and farm to be able to take care of his animals. Community Connections staff helped him through multiple acute medical events, hospitalizations and skilled rehab stays. Even with these acute medical setbacks, he was able to return home to his farm several times because of the continued surveillance by the N/NORC staff to assist him with shopping, meal preparation, companionship, etc. In November of 2023, this N/NORC resident died. Although he was not able to be home during his last hours, one of our staff remained with him while he was in hospice until his family could arrive to be with him in his final hours. The care and services provided by our staff are a prime example of the value of how the N/NORC programs are providing the essential services not always available in rural communities in New York State. This N/NORC resident relied on Community Connections for many services that allowed him to remain in his own home, near his animals, which was his greatest joy. Our N/NORC serves a very important role in helping rural residents remain in their own home as long as they are able. We have many testimonials from clients and their families and caregivers supporting the importance of the services we provide.

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.

For the last five budget cycles the Legislature has provided additional funding specifically to support nursing services in N/NORCs. This supplemental nursing funding was first added by the Legislature at \$325,000 in FY 2019-2020, and was increased to \$1,000,000 in FY 2021-2022 where it remains today and representing close to the full need. Each N/NORC receives \$23,256 from this funding, and crucially it is not subject to unit of service increases. Unfortunately, the Governor once again did not include this \$1 million nursing enhancement in the Executive Budget. **We strongly urge the Legislature to restore this \$1 million for N/NORC nursing this year.** This will provide stable funding for N/NORC programs like ours that have struggled with the loss in pro-bono nursing services over the last several years.

In addition, there is high demand for the State to increase the number of N/NORCs to help older adults continue living in their homes and communities. The N/NORC program last underwent an expansion in 2019, adding 14 new programs into NYSOFA's portfolio of 43 total N/NORCs. At that time there were more applicants to the program than the State could afford to fund. With a modest \$1.5 million investment, NYSOFA will be able to create between six to eight new N/NORC programs across the State, which will serve hundreds if not thousands of older adults. Notably, in 2023 the Governor signed S.3392 (May)/A.5915 (Kim), which updates the NORC statute to increase flexibility on building height restrictions that limited eligibility for the program in the past. This update is especially relevant for upstate cities, where certain buildings have

expressed interest in becoming NORCs or Neighborhood NORCs in the past but were ineligible.
We urge the Legislature to fund this expansion with an additional \$1.5 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. Thank you for your consideration.

For further questions, I can be reached at 716-769-2473.