COFCCA

Leadership, voice and vision for child welfare in New York State

Council of Family and Child Caring Agencies

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Human Services
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The Council of Family and Child Caring Agencies (COFCCA) is a strong, statewide network of nonprofit child and family serving organizations that collectively advances practices and policies to secure the wellbeing of children, youth, families, and communities. COFCCA is the principal representative for nearly all the not-for- profit organizations providing foster care, adoption, family preservation, and juvenile justice services in New York State. COFCCA is comprised of over 100 member organizations, ranging in size from small community-based programs to the nation's largest multi-services agencies — all of which share the mission of serving children and families. COFCCA works with its members and government to ensure quality services for children and their families.

At this moment of federal uncertainty, we need a New York State Budget that protects access to families' basic needs. We know that poverty and child welfare involvement are linked, the ability to pay for basic necessities represents a significant share of the underlying causes of family separations.[1]

COFCCA applauds Governor Kathy Hochul for her focus on affordability for New York's families, preserving access to healthcare, and addressing food insecurity and housing instability. We are particularly pleased by the vision to bring universal child care to the State. Families thrive when they can afford the cost of living and have access to safe, affordable child care. To build successful implementation within these areas we urge the State to strengthen the nonprofit child- and family-serving sector, ensuring providers have the stability they need to meet growing needs across our communities.

COFCCA recommends the following additional state actions and investments to ensure access to and enhance interventions that support families' needs, strengthen neighborhoods, and prevent entry into or escalation within the child welfare system:

<u>COFCCA Budget Request Summary</u>

The Council of Family and Child Caring Agencies (COFCCA) Supports:

- Expanding and Improving the Targeted Inflationary Increase and Wages in the Human Services Sector (HMH, Part P):

[1] https://scaany.org/separating-child-poverty-from-child-neglect/

- Increase the Governor's proposed 1.7% investment to 2.7% for nonprofit human services programs—to support the workforce and sustain critical services for hundreds of thousands of New Yorkers;
- Equitably invest across the human services workforce by including prevention and health home care management programs as proposed in S.1580 (Persaud)/A.2590 (Hevesi) or S3669 (Persaud);
- Ensure annual investments are fully realized by Voluntary Foster Care Agencies as proposed in A.718 (Hevesi);
- Establishing a Human Services Employee Wage Board as proposed in S.3953 (Ramos)/A. 5589 (Bronson) to review to investigate pay disparities and develop recommendations for equitable wages in the human services sector; and
- Establish a "Blue Ribbon Commission" to examine the crucial role of nonprofit human services workers to New York's economy and community health.

➢ Enhancing Career Pathways in Child Welfare through:
  - Continued funding for loan forgiveness: The Executive Budget proposal includes an additional $4 million for Mental Health Clinicians Serving Children (ATL- OMH); and
  - Increasing funding for the Child Welfare Worker Incentive Scholarship Program and the NYS Child Welfare Worker Loan Forgiveness Incentive Programs (ATL-HESC).

➢ Stabilizing liability Insurance for foster care providers as proposed in A.9646 (Hevesi) which would:
  - Establish a Foster Care Liability Insurance Risk Pool;
  - Provide $20 million in direct state support to address significant liability insurance cost increases; and
  - Provide for timely updating of MSAR Rates that fully capture liability costs for VFCAs.

➢ Ensuring Access to a robust continuum of care through:
  - Establishing "Intensive Services Programs" to meet the high acuity needs of young people in foster care;
  - Expanding populations served under Article 29-I Health Facilities as proposed in A.2726-A (Paulin);
  - Establishment of a Child and Family Well Being Fund ($30 million);
  - Investing $200m to implement rate enhancements and reforms across the children's continuum of care; and
  - Creating the Youth Justice Innovation Fund as proposed in A.8491 (Hevesi)/S643 (Cleare).

➢ Supporting Families and Youth as they transition out of care, by:
  - Increasing funding for the Foster Youth College Success Initiative to $10 million (ATL-SED); and
  - Ensuring continued funding for the Housing Access Voucher Program (HAVP): The Executive Budget proposal includes an additional $50 million to support the Pilot program.

COFCCA Budget Request Detail

Expanding and Improving the Targeted Inflationary Increase and Wages in the Human Services Sector

In addition to the magnitude of services that it provides, the Child Welfare sector is also a large employer in the state. According to data collected by COFCCA, more than 55,000 people are employed by our member agencies. Ensuring the viability of the sector is vitally important for the economy of the state.

We appreciate that Governor Hochul and the legislature have recognized the need for investments in the nonprofit human services sector in recent years through the provision of and Targeted Inflationary Increases. We recognize the Governor's proposal for a 1.7% investment in the Human Services sector again this year, but note that the increase falls short of the full 2.7% request from the sector to keep up with inflation. Programs must have the ability to provide increases to their staff, and to keep up with significant inflationary costs for their operations. Our member organizations report experiencing significant continuing increased health insurance costs of up to 15%-20%, food (upwards of 10% increases), liability insurance (an average 19% increase), utilities, and maintenance. Additionally, agencies are struggling with costs associated with staff recruitment efforts given high vacancy rates and unabated turnover rates in the field. Our COFCCA Workforce Compensation data shows that salaries for caseworkers and direct care staff at COFCCA member agencies rose on average 7–8% since 2022, but state investments to support those increases lagged behind inflation and market pressures, including the need to align salaries being provided for workers in other settings with similar credentials and experience.

- **COFCCA strongly supports increasing the Targeted Inflationary Increase to 2.7% in the final budget (MHM, Part P).**

We urge the state to ensure that Human Services investments are fully realized with equity for all programs supporting children and youth in New York State.

For the past several years, the Human Services investments through previous COLAs and now Targeted Inflationary Increases has been subtracted out of the calculation for foster care programs of their state-set rates, the Maximum State Aid Rates (MSAR) before adding the new investments. Given that our rates are based on costs from 2 years prior, and the investment is applied only on a 1 year basis, this represents a loss of cash flow to our agencies, hindering their ability to increase spending, which negatively impacts the opportunity for our agencies to build up their future rates to reflect the actual costs they are experiencing.

- **COFCCA strongly supports legislation--A.718 (Hevesi)—to ensure that the foster care rates continue growth year over year as we understand that is the intent of the Human Services investments—to add, not to subtract, from providers' continued ability to meet inflationary cost pressures impacting rising heat, energy, fuel, and food costs, and to continue to grow staff members' rates of pay.**

We must also address the human services workforce that has previously been left out of prior Human Services Cost of Living Adjustments. As the State continues to prioritize community based preventive services, we must include the workforce that supports children and families in their communities. The turnover rate among caseworkers in prevention programs in 2024 remains high, at 36% statewide, 44% in prevention programs outside NYC. The average starting salary for an NYS Prevention caseworker (Bachelors) is $$49,342compared to $65,001 in the public sector.

- **COFCCA strongly supports including programs that have previously been left out of Targeted Inflationary Increases, including community-based prevention services programs and Health Home Care Management Programs serving children, in TII as is proposed in S.1580 (Persaud) /A.2590 (Hevesi) and S3669 (Persaud).**

The Child Welfare workforce is comprised of professionally trained and deeply committed individuals, largely comprised of women of color. These staff support children, youth, and their families in prevention services designed to prevent entry into foster care, as well as children and youth in foster care across New York State. However, COFCCA's 2024 Child Welfare Workforce Report[2] continues to find that staff salaries are not sufficient compared to those for similar jobs in other sectors, particularly within government. When taken together, caseworkers across Child Welfare programs make 31% less than their public employee counterparts[3]. Additionally, residential direct care workers salaries annually only hover slightly above minimum wage, with many workers in these positions report needing to hold two or more jobs to support their families.

As a result, workers are turning elsewhere for higher pay and less stressful jobs. The average turnover rate in 2024 was staggering—about 48% among residential child care workers and caseworker turnover in foster care programs averaged 31% statewide. Vacancy rates also remain high at 19% for residential child care positions.

Quality in the workforce supporting children and youth in child welfare is directly tied to the quality of care and overall experience children and families have. Young people in foster care come to develop relationships and rely upon their direct care staff and their caseworkers. High worker turnover negatively impacts children and youth in foster care, and it impacts outcomes.

A stable and well-trained workforce is crucial for ensuring quality services, positive outcomes for our children and families, and reduced lengths of stay in foster care. Current salaries are not competitive for recruitment and retention of staff. We cannot continue to under-support the professionals who are doing this challenging work.

- **COFCCA supports the establishment of:**
  - **A Human Services Employee Wage Board as proposed in S.3953 (Ramos)/A. 5589 (Bronson) to review to investigate the pay disparities and develop recommendations for equitable wages in the human services sector.**
  - **A "Blue Ribbon Commission" to examine the crucial role of nonprofit human services workers to New York's economy and community health.**

Enhancing Career Pathways in Child Welfare

Our child welfare staff tell us that in addition to salary increases, they need more support in achieving their higher education goals. We consistently hear from our child welfare workers that although they find the work very challenging, they enjoy what they do and want to continue to grow with our agencies. Many staff in our programs desire to become supervisors or even aspire to be in a senior leadership position such as a program director or a CEO

[2] 2024 Child Welfare Workforce Report (Enclosed)
[3] When compared to an equivalent state position (PEF Grade 18). https://oer.ny.gov/system/files/documents/2024/01/pef-salary-schedules-2023-2026-final_0.pdf

someday; however, they need advanced education degrees to pursue those positions.

- **COFCCA requests a significant expansion of the impact of the NYS Child Welfare Worker Incentive Scholarship Program to $1 million** (ATL- HESC). We thank the legislature for including an additional $100,000 in the last 2 enacted budgets for this program. We note that the Governor's FY 2027 Executive budget proposal eliminated this critical funding—we urge the restoration and expansion of the investment this year.

We also often hear that staff begin to look for other jobs when they cannot afford to pay their student loan monthly repayments (given the growing student debt crisis in our country, staff have student loan payments ranging from several hundred dollars per month to payments even in excess of $1000 per month). We seek a long- term option for supporting New York State's child welfare workforce in their educational goals so we can begin to build a true career pathway for our state's child welfare professionals.

- **Expand the NYS Child Welfare Worker Loan Forgiveness Incentive Program by increasing funding to $1 million** (ATL- HESC).
- **COFCCA strongly supports the Executive Budget proposal to continue the $4 million Loan Forgiveness Program for Mental Health Clinicians Serving Children** (ATL- OMH). This program would specifically support licensed mental health clinicians serving children and families in Office of Mental Health and Office of Children and Family Services licensed settings. COFCCA's workforce compensation report shows that Master's-level caseworkers have declined by 58% since 2020, with agencies struggling to recruit and retain social workers.

These programs would provide an incentive to current and prospective employees to work in the critical field of child welfare, and support the education and training needed to provide quality care.

Stabilizing the Liability Insurance Market for Foster Care Providers

New York operates a state supervised, county administered, foster care system whereby most of the state's approximately 14,500 children and youth in foster care are placed with private non-profit Voluntary Foster Care Agencies (VFCAs)[4]. Counties contract with VFCAs for foster care placements. VFCAs are required per their contracts with counties to carry certain levels of commercial general liability insurance, professional liability insurance, and, depending on the county requirements—potentially excess umbrella liability coverage. Due to social inflation and increasing pressures in the insurance market, specifically related to foster care, agencies in NYS and nationwide are experiencing significant challenges in accessing and affording liability insurance coverage.

Some of the contributing factors to this challenge in securing liability insurance are "social inflation," referring to a trend of higher jury awards and higher claims payouts due to high-profile cases covered in the media. "Social inflation" is causing insurance companies in many instances to assess and drop their risk—and it is happening across the country, not just in NYS. Other contributing factors include insurers' concerns about VFCAs' unabated staff turnover, vulnerability to cyber-attacks, and a newer trend in the market called litigation financing.

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[4] https://ocfs.ny.gov/main/sppd/docs/ffpsa-reports/outcome/2025-Q3-FFPSA-Outcome-Monitoring-Report.xlsx

There are very few insurance providers in this sector already, and we have very recently begun to see the field get even smaller. This is becoming an increasingly dire issue.

The state must intervene to ensure access to this mandated coverage. Failure to act could lead to nonprofits being forced out of the field, leaving government responsible for the provision of these services. We must learn from the experience in California, where 19 foster care service agencies now [are unable to find](#) coverage since the insurer of 90% of the foster family agencies (FFAs) in the state halted renewals of coverage for all FFAs in the state. This has created a crisis in the sector in California - disruption for foster care parents and youth- and has left the counties struggling to either provide services directly or transfer youth and services other organizations who were able to obtain alternate means of insurance coverage.

Furthermore, in January 2025, the Nonprofits Insurance Alliance (the same company, NIAC, going by a different name outside of California), wrote an update to all of their insured agencies nationwide, stating that effective April 1, 2025 (though reserving the right to do so beforehand) they would not renew umbrella coverage including Improper Sexual Conduct & Physical Abuse (ISCPA), and Social Services Professional coverage for any of their insured foster family agencies nationwide.

There is very limited infrastructure and capacity in NY for counties to directly provide foster care services should VFCAs swiftly lose coverage as happened in California. In New York, VFCAs currently provide care for more than 75% of children and youth in foster care statewide, and 100% in New York City. Without state action to ensure adequate coverage options, children and youth, ultimately in the care and custody of the state, and their families will experience significant disruptions in their care. In order to avoid this same outcome in New York, COFCCA recommends the state proactively act with urgency to establish a risk pool for foster care programs to ensure continued access to insurance.

When foster care agencies are able to obtain continued insurance coverage, they are often forced to accept lower coverage levels at higher premiums, all while counties continue to maintain, and/or may continue to increase, their required coverage limits. Our COFCCA member foster care agencies reported rate hikes of between 20 to 40% in 2022-2023.[5] A recent report on the Financial Health of Child Welfare Nonprofits in New York State[6] demonstrates that the majority of COFCCA members operate on very thin margins, have little Cash on Hand (an average of 40 days of cash on hand for NYC nonprofit COFCCA agencies, and an average of 45 days of cash on hand for rest of state nonprofit COFCCA agencies), and have no significant endowments or reserves. Agencies do not have the resources to pay for these increased costs.

The current administrative rate set by the state for VFCA's (the Maximum State Aid Rate) must be modified to capture the full scope of the rapidly increasing liability insurance costs and reimburse VFCA's for related expenses in the same fiscal year as they occur. MSAR rates currently use data from two years prior which don't capture these increased costs when providers are experiencing them. Moreover, by including liability insurance costs in a capped general administrative parameter, many of our agencies are experiencing growth in costs that are excluded from rate calculations.

Lastly, the state must provide bridge funding to support VFCA's in addressing liability cost increases absorbing that have not yet been captured in their rates, until changes to those calculations moving forward are in place.

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[5] https://www.aei.org/op-eds/justice-at-any-cost/

[6] https://cofcca.wildapricot.org/resources/COFCCA_Final%20General%20Report%20Jan2025.pdf (Enclosed)

- **COFCCA urges the state to assist the foster care agencies in these insurance access/affordability issues by passing legislation (A.9646 (Hevesi)) which would:**
  - **Establish an insurance risk pool in state statute** (such as has been done for auto insurance) which would ensure foster care service agencies have access to coverage, by requiring insurance companies providing general liability insurance in New York to cover a share of foster care providers, inclusive of professional liability and abuse coverage.
  - **Provide $20 million in direct state support to address significant liability insurance cost increases** as a holdover for longer-term solutions. A similar step was taken in the California State Budget this past year to provide $31.5M in funding to be distributed directly to foster care agencies to offset costs for obtaining coverage. We recommend additional, immediate support be provided for providers who can demonstrate hardship, to help cover increased premiums foster care agencies are experiencing in their mandated liability insurance coverage.
  - **Provide for the timely updating of MSAR Rates**: Foster care agency insurance costs have increased 27% since 2023 on average, but MSAR rates use data from 2 years prior which don't capture these increased costs as providers are experiencing them. Additionally, many of our agencies are experiencing growth in costs that well exceed state provided parameter increases, meaning that the MSAR calculation could exclude much of the cost in future rate calculations. We request that that the MSAR calculation be modified to capture the rapidly increasing costs liability insurance cost increases in the same fiscal year as they occur, and that the state also work with providers to adjust parameters upward to capture the full scope of the costs.

Ensuring Access to a Robust Continuum of Care

We know that accessing appropriate and timely care for families has been difficult due to the fragmented State systems and limited availability of services in the community at any given time.

In late 2025, the Council of Family and Child Caring Agencies (COFCCA) and the New York State Coalition for Children's Behavioral Health (CCBH) partnered to produce a comprehensive statewide analysis of children and youth with complex behavioral health needs[7]. Together, we retained Health Management Associates (HMA) to examine trends, service access, and system gaps using Medicaid claims data from 2019 through 2023 for New York youth ages 0–21.

As two statewide coalitions representing nonprofit providers serving children, youth, and families across New York, we were proud to jointly issue the data to our government and stakeholder partners. While many of the findings mirror the daily experiences of providers, this data now gives us a factual foundation to drive urgent systems change.

Youth with complex needs are distributed across all ages, underscoring the need for strong, developmentally responsive supports from early childhood through young adulthood, and a strong emphasis on supporting families' needs from the beginning.

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[7] Analysis of Service Utilization for New York Youth with Complex Needs (Enclosed)

The data show regions with high emergency department (ED) utilization show lower utilization of outpatient behavioral health services, while areas with robust outpatient care utilization show lower ED use — a clear indication that community-based treatment reduces crisis-driven care. Lower-income communities show higher concentrations of youth with complex behavioral health needs, highlighting deep inequities and the critical importance of accessible and comprehensive support statewide.

These are the young people who are falling through the cracks, who are stuck in hospitals for weeks and months after they are ready for discharge, and whose caregivers cannot access the support they need to safely and effectively manage symptoms, support healthy development, and thrive in their communities.

The state must ensure a NYS Budget that invests in a robust continuum of care by providing greater investment in workforce to ensure that youth with complex needs have access to care and creates the systems flexibility needed to offer families the support they need when they need it, regardless of which state agency may or may not take responsibility for their needs.

COFCCA and CCBH have been highlighting for a number of years that New York State does not currently have the system of care required to support the acuity of young people's needs. We lack in-state capacity to support the highest level of needs for children and youth in the child welfare system, leaving us at risk of increasing out of state placements which are both inappropriate for the needs of children, placing them at a distance from their families, and incredibly costly.

There is an urgent need for creation of intensive services models for Residential Treatment Centers and to adjust MSAR rates to reflect the true cost of care. We continue to offer our support to focus on solution-based approaches to ensuring that New York has the appropriate continuum of care for supporting its young people needing clinically appropriate treatment and care. COFCCA and our member agencies appreciate ongoing discussion with OCFS to engage in creative thinking about how to address the needs of youth with complex needs, in particular through the creation "Intensive Services Programs." However, the development of these programs have long been in the pipeline and have yet to come to fruition.

- **COFCCA strongly urges the state to continue to work with providers to establish "Intensive Services Programs" that includes sufficient rates to support enhanced staffing and the high acuity needs of young people which provide appropriate mechanisms to ensure the safety of those in crisis.**

Voluntary Authorized Agencies are charged with addressing the complex needs of the families and children as they become known to them through child welfare system involvement. These organizations provide a wide variety of services, including trauma informed medical and behavioral care to children and youth in foster care in Article 29-I clinic settings, CFTSS and HCBS services to families in the community, and prevention services for families to access needed care and services that address parents' and caregivers' identified needs and assist them in getting the resources to keep their families safe, healthy, and together.

Article 29-I Health Facilities,[8] one aspect of these services, are a specialized health care model established under the federal Medicaid State Plan Amendment specific to New York State, created in the Public Health Law (hence the name) and Social Services Law, that are designed to provide comprehensive healthcare services to children in foster

[8] Note: "Facility" does not necessarily refer to a single site

care. Voluntary Foster Care Agencies (VFCA's) receive a license authorizing them to provide limited health-related services and contract with and bill Medicaid Managed Care Plans only for services for children and youth placed in their care as a result of educational need (Committee on Special Education (CSE) placement through the School District) and through LDSS or county Foster Care placement.[9] In providing services to these children and youth, staff often become aware of the clinical needs of the entire family, but are unable to enroll them in services due to this limitation.

Prevention programs serve families referred to them from the county LDSS, many of whom either have previously been placed into foster care or are at risk of placement without intervention. However, prevention programs, even in organizations with Article 29-I facilities, often must refer individuals who in need of medical, developmental, and/or behavioral health services, to community providers for treatment, where there exist significant shortages and delays in service provision.

Expansion of Article 29-I VFCA's authority to provide clinical services to families connected to the child welfare system will help enhance family supports by addressing conditions that may be affecting the safety and well-being of those in the home, preventing out-of-home placement, reducing out-of-home lengths of stay, and strengthening the overall wellness of the family unit through coordination and provision of clinical services through the Article 29-I health facility.

- **COFCCA Strongly Supports expanding the populations served under Article 29-I Health Facilities as proposed in A.2726-A (Paulin).**

Primary prevention is available to all individuals living in a given community, categorically. When a family reaches out for help through primary prevention supports—for example, peer support or concrete economic support (clothing, food, employment needs), families' needs can be met through their neighbors, not through a system. COFCCA supports parents with lived experience in the child welfare system that have led the call for the Child and Family Wellbeing Fund as part of the Children and Families Reinvestment Act. The Child and Family Wellbeing Fund would create a flexible and innovative funding program to support efforts to respond to children's and families' needs in communities, with avenues for community input and accountability.

- **COFCCA supports the creation of a Child and Family Well Being Fund ($30 million).**

We know that there is a shortage in the availability of services to support child and youth mental health, which creates wait lists for treatment. The Healthy Minds Healthy Kids Campaign (HMHK), a collaboration between 19 of New York's leading children's and behavioral health advocacy groups, commissioned a study that found what our providers have said for years: the rates in children's outpatient services are inadequate to cover costs, let alone support a sustainable system for the future.

- **COFCCA supports a $200 million investment to implement rate enhancements and reforms across the children's continuum of care – including but not limited to Article 31, Article 32 (822), CFTSS, and HCBS programs – to create a sustainable children's behavioral health system that enhances quality and access to services across the state.**

[9] https://ocfs.ny.gov/programs/managed-care/about-a29-i.php#purpose

COFCCA has signed on *The Coalition to Protect Raise the Age: Build Futures, Invest in Youth*, a statewide alliance of 220 organizations committed to preserving New York's landmark Raise the Age law, combating misinformation, and promoting investments in youth that deliver true community safety across New York State.

Evidence shows that community-based programs and services for young people who have contact with police is the surest way to promote community safety. Recently it was reported there is $980 million in unused Raise the Age Funds.[10] These funds are intended to support Raise the Age legislation by funding wraparound services for young people who are justice involved or at risk of involvement. In addition to the unused funds, New York City has yet to receive any of these dollars. As young people display more complex needs, we know that the funds would be well utilized to support current community needs across New York.

This year's state budget must include more pathways for unspent state dollars to reach counties and community-based organizations, including adopting the **Youth Justice Innovation Fund** (YJIF). We as a community of providers want to support counties in offering a continuum of services that includes prevention, early intervention, and alternatives to detention, placement and incarceration.

- **COFCCA supports creating a Youth Justice Innovation Fund as proposed in A.8491 (Hevesi)/S643 (Cleare), which will help move more state funding to community-based organizations (CBOs) serving young people and families who are justice involved or are at risk of being justice involved.**

Supporting Families and Youth as they Transition Out of Care

New York State has committed funding in the budget for several years to assist youth in foster care as they pursue higher education. We have watched with great joy each year as our young people in foster care enter college or university through the support of the Foster Youth College Success Initiative (FYCSI). Since inception,], this initiative has supported more than 4,000 young people in our state during their college journeys. These young people have attended more than 100 NYS colleges and universities and they are achieving success through post-secondary education. The FYCSI program uniquely provides necessary social, academic, and financial supports to ensure that barriers to opportunity for the foster care population are mitigated.

- **COFCCA supports increasing investment in the Foster Youth College Success Initiative to $10 million to continue to assist youth in foster care in achieving their goals.**

Homelessness and housing instability are among the reasons families are reported to the State Central Register,[11] and housing is a major concern for 41% of youth who are aging out of the child welfare system.[12]

We continue to celebrate the increase from $300 to $725 included in the 2023-24 Enacted Budget for the Child Welfare Housing Subsidy program. These subsidies assist in stabilizing housing for families and in preventing family separation and child removals, expediting reunification of children in foster care, and help youth aging out of foster care who face high risk of housing instability and homelessness.

[10] https://www.politico.com/news/2025/01/16/new-york-raise-the-age-00197473
[11] https://scaany.org/wpcontent/uploads/2023/02/Child-Family-Wellbeing-Fund-One-pager_02012023.pdf
[12] https://readymag.com/fysa/movingforward/

However, because of the upper age limit of 21, individuals “aging out” of foster care after the age of 18, are unable to receive the subsidy for the full program period, or possibly at all. Last year, the enacted Budget included funding for a pilot Housing Access Voucher Program that will help this population access critical housing assistance. We are please to see the Governor included an additional $50 million for this program this year.

- **COFCCA supports the Executive Budget proposal to provide additional funding to support the Housing Access Voucher Pilot Program (HAVP) established in last year’s budget.**

In closing, we must ensure that the final state budget includes investments in our child welfare workforce, community-based supports and services, and thoughtful policy solutions to challenges nonprofit child welfare programs currently face, , in service of providing every opportunity for children, youth and families to have access to what they need to be well and to thrive.

Thank you for the opportunity to provide testimony.