



Joint Legislative Budget Hearing: Health

Testimony of Communications Workers of America, District 1

Tuesday February 10th, 2026

Thank you to Senate Finance Committee Chair Liz Krueger and Assembly Ways and Means Committee Chair J. Gary Pretlow for consideration of our testimony regarding adequate funding for New York’s healthcare system and workforce. Communications Workers of America District 1 represents approximately 15,000 healthcare workers across New York State and is the largest healthcare union in Western New York.

Especially given the dire impacts of the federal cuts on the state’s healthcare system and hospitals, we urge the legislature to include additional funding in the one-house budgets for the state’s healthcare workforce and additional patient coverage, as well as progressive revenue raisers.

Impacts of the “One Big Beautiful Bill”

Under the federal “One Big Beautiful Bill Act” (OBBA), nearly one million New Yorkers could lose insurance coverage without state intervention. Not only will this have dire impacts on Medicaid recipients and those on the Essential Plan themselves, but on the entire healthcare system. Hospitals rely on Medicaid funding to keep their doors open, and these cuts will likely lead to rural hospital closures. Healthcare workers will lose their jobs, and strains on the system will raise costs on those with employer-sponsored insurance as well.

We support the inclusion of revenue raisers in order to expand coverage to additional New Yorkers as well as provide additional support to safety net and other financially distressed providers, including:

- **Increased taxes on the wealthy**
- **Increased taxes on corporations**
- **A revised CMS-compliant MCO tax**
- **Enacting the Reinvest in NY Healthcare Act (S3814 – Rivera/A5743 – Dilan)**

Prioritizing Safe Staffing

The staffing crisis is not driven by a workforce shortage - is it driven by a shortage of good healthcare jobs. Short staffing is the number one reported reason why healthcare workers report in record numbers wanting to leave the field within the year, which is why we’re actually seeing



healthcare workers leave the field in droves, and why across the Country healthcare worker unions have been going on strike in record numbers, including our own members at Catholic Health in Buffalo in 2021 and currently NYSNA members across hospitals in New York City.

The FY26 budget should include additional funding for nursing education programs, loan forgiveness and tuition assistance to encourage an adequate supply of new healthcare workers entering the field. In addition, more funding should be allocated to the Department of Health to expand enforcement capacity of the 2021 Clinical Staffing Committee law to improve staffing levels, increase recruitment and retention, and ensure better working conditions for New York’s healthcare workers.

Artificial Intelligence in Hospitals

The budget includes a plan to expand the use of AI hospitals by developing a consortium of healthcare leaders as well as an AI governance model within the Department of Health. We understand that this technology is developing rapidly and that there is excitement about the opportunity the technology presents. However, we have major concerns about AI’s impact on patient safety and the role of healthcare workers. Our members have raised concerns around diagnosis decision making and insurance coverage automation, and jobs are already starting to be replaced. While AI promises progress and productivity, it is crucial to remember that it cannot replace humans who have experience doing their jobs, who are able to use discretion in their work, and are able to make ethical decisions when lives are at stake.

CWA encourages the legislature to ensure the final budget should ensure that before AI tools are further rolled out in hospitals, worker voices must be represented at every stage of the development and implementation process. Workers must have advanced notice and full information of how these tools will be used and the opportunity to provide input based on their lived experience on the job. There must be limits on abusive practices enabled by technology, including data privacy and discipline, as well as requirements for ongoing human review and oversight. There should also be meaningful plans for any impact this technology has on the workforce, including retraining, as well as productivity benefits for workers who will inevitably be required to produce more work.

Scope of practice proposals - HMH Part N - OPPOSE

The scope of practice expansion proposals in the FY26 budget are framed as a way to expand patient care due to “workforce shortages”, but as healthcare staff who perform these tasks daily,



we have major concerns about these tasks being performed safely. To address patient wait times, the state should improve staffing levels rather than adjusting existing scopes of practice.

CWA opposes HMH Part N of the Executive Budget.

Community Based / Hospital at Home - HMH Part K - OPPOSE

This bill would extend authorization for existing community-based paramedicine programs, allow the Department of Health to approve new or modified initiatives statewide, and authorize EMS practitioners to administer certain vaccinations prescribed by licensed physicians and nurse practitioners. It would also amend Public Health Law to permit general hospitals to provide care in patients' homes, codifying the federal Acute Hospital Care at Home program in State law.

Shifting care into the home presents serious patient safety concerns. CWA opposes this provision of the executive budget.

Cut to VAPAP Funding - OPPOSE

VAPAP dollars stabilize hospital finances so they can maintain adequate staffing, invest in patient safety and infrastructure, and continue essential services that communities rely on but that are often underfunded. CWA opposes the \$500M reduction in funding for the VAPAP program and requests that the legislature restore this vital funding.

In addition to the above concerns, CWA would like to express strong support for the following provisions of the Executive Budget

- The Nurse Practitioner Modernization Act - HMH Part B
- Sensitive Locations Protection Act - PPGG Part L
- Strengthening Oversight on Healthcare Transactions - HMH Part H
- Temporary Staffing Agencies - HMH Part J

Thank you for your consideration of this testimony and efforts to stabilize our healthcare system, support the workforce and ensure high-quality patient care.