

**NYC United Ambulette Group  
1745 Merrick Ave, Suite 3  
Merrick, NY 11566**

**Written Testimony Submitted to the New York State Legislature  
Joint Budget Hearing on Health & Medicaid - February 10, 2026**

**Subject:** Recognition of Ambulette Direct Care Workers as Eligible in the Healthcare Worker Bonus (HWB) Program

**Submitted by:** NYC United Ambulette Group

Chairpersons and Honorable Members of the Legislature:

Thank you for the opportunity to submit written testimony regarding the role of Ambulette care workers; the drivers and helpers responsible for providing access to medical care and treatment for the disabled Medicaid enrollee, and their eligibility presently being disputed by OMIG under the Healthcare Worker Bonus program established under Part ZZ of Chapter 56 of the Laws of 2022.

We are most appreciative of the support received both from Health Committee Senate Chair Rivera and Assembly Health Committee Chair Paulin, both of whom spearheaded sign on letters, sent to the Executive, requesting the confirmation of essential frontline Ambulette care workers as eligible in the HWB program (attachment 1 and 2). This request has since been rejected by OMIG and the Commissioner, based on an incorrect narrowing of the Legislation.

Across New York State, Ambulette care workers transport medically fragile Medicaid enrollees to medically necessary care and treatment. These individuals are not curb-to-curb passengers; they are patients under active medical care. Ambulette care workers provide continuous hands-on assistance required for safe access to treatment, including door-through-door assistance, extending as far as carrying wheelchair disabled up and down stairwells in non-elevator equipped residences.

The purpose of this testimony is to clarify the clinical nature of ambulette service and explain why ambulette direct care personnel should be recognized — retroactively if necessary — as eligible workers under the HWB program. The industry maintains that such workers fall within existing statutory categories, including “Other Direct Care Staff,” however this interpretation is currently disputed in post-payment audit activity.

**I. Legislative Confirmation Requested**

The NYC Ambulette Group respectfully requests legislative confirmation that ambulette care workers providing hands on care and assistance to the Medicaid disabled qualify as eligible workers under the New York State Healthcare Worker Bonus program under the other healthcare support staff, or alternately listed specifically by title—Ambulette Care Worker.

The absence of explicit statutory recognition has resulted in inconsistent regulatory interpretation and post-payment audit and claw back actions occurring more than three years after providers applied for and were approved by the Department of Health to receive the bonus. The funds were

distributed to frontline workers who ensured access to care for disabled Medicaid enrollees during the pandemic period. Without the hands-on assistance provided by ambulette personnel, many vulnerable patients would have been unable to obtain necessary medical treatment.

The Legislature could clarify eligibility either by explicitly listing the title Ambulette Care Worker or by affirming inclusion under the “Other Direct Care Staff” category, which has not been specifically limited by statute, nor by the Commissioner.

## **II. Medical Necessity of Ambulette Services**

Medicaid ambulette transportation must be ordered by a licensed practitioner. The ordering practitioner documents:

- The patient’s medical condition
- Mobility limitations
- The need for assistance during transport
- Why lower levels of transportation are not clinically appropriate

Accordingly, ambulette transportation is part of a treatment plan, not a convenience service. Without it, patients cannot access care.

Dialysis patients illustrate this reality. Common conditions include:

- Blood pressure instability
- Severe post-treatment fatigue
- Limited weight-bearing ability
- Fall risk
- Cognitive impairment following treatment

Safe transport requires physical support and monitoring comparable to aide-level care.

## **III. Hands-On Patient Care Provided**

Ambulette personnel routinely perform direct personal care functions, including:

- Door-through-door escort
- Transfers from bed, chair, or wheelchair
- Ambulation support
- Two-person stair carries where required
- Wheelchair securement and safety restraints
- Patient monitoring during transport
- Fall prevention

These functions are mandatory components of a properly completed Medicaid trip when ordered. Failure to provide them would constitute improper service delivery.

#### **IV. Integration Into the Healthcare System**

Ambulette staff coordinate daily with hospitals, dialysis centers, nursing homes, and rehabilitation facilities regarding patient readiness and safety. They serve as the final link in the care continuum, ensuring patients physically reach treatment and return safely.

During the COVID-19 public health emergency, ambulette care personnel were treated as essential healthcare support workers due to their role in maintaining access to care.

#### **V. Regulatory Conflict**

Current policy creates a regulatory conflict. Department of Health transportation rules require hands-on assistance — including escort, transfers, stabilization, and fall prevention — as a condition of valid service delivery.

However, certain interpretations under the Healthcare Worker Bonus program have treated these same workers as not providing direct care. Providers are therefore required by regulation to perform direct care while later being deemed ineligible for a program designed to compensate direct care workers.

This has resulted in retroactive enforcement actions against providers who relied on Department of Health approval when distributing bonuses more than three years ago.

#### **VI. Policy Implications**

Classifying ambulette personnel solely as transportation workers does not reflect the services actually performed. Recognition as healthcare support staff would align statutory definitions with operational reality and support workforce stability and patient safety.

#### **VII. Fiscal Implications**

The bonus funds at issue were paid directly to workers. Providers no longer retain the monies. Retroactive clawbacks therefore impose unfunded liabilities for compensation already delivered in reliance on Department of Health determinations.

Industry estimates suggest enforcement actions could seek to recoup approximately \$4.5 to \$5 million from ambulette providers statewide, potentially destabilizing access-to-care providers serving high-acuity Medicaid populations.

Legislative clarification should confirm that payments made in reliance on Department of Health determinations are compliant and not subject to recoupment.

4.

Ambulette services function as clinical access services. Personnel who escort, stabilize, and physically assist disabled patients participate directly in care delivery.

We respectfully request statutory clarification recognizing Ambulette Care Workers; the drivers and helpers providing direct hands on door thru door personal care, support and assistance to the Medicaid enrollee that is wheelchair disabled or ambulatory disabled and requiring access to medical care and treatment, as eligible healthcare support workers under the HWB program and confirming prior payments as valid.

Such clarification would promote patient safety, workforce retention, and continuity of care for vulnerable residents across New York State.

Thank you for your consideration.

Submitted Respectfully,  
NYC Ambulette Group

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SENATOR  
GUSTAVO RIVERA  
33<sup>RD</sup> DISTRICT

NEW YORK  
STATE  
SENATE

ALBANY, NEW YORK 12247



Attach. 1

CHAIRMAN, MAJORITY MEMBER  
HEALTH  
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MENTAL HEALTH

September 30, 2025

The Honorable Kathy Hochul  
Governor of New York State  
NYS Capitol Building  
Albany, NY 12224

James V. McDonald, M.D.  
Commissioner  
NYS Department of Health  
Corning Tower  
Albany, NY 12237

Re: Urgent Request to Reverse OMIG's Retroactive Denial of Healthcare Worker Bonuses to Essential Ambulette and OPWDD Workers

Dear Governor Hochul and Commissioner McDonald,

We write to you to address a profound injustice perpetrated against ambulatory healthcare workers who risked their lives to ensure essential care and services were available to New Yorkers during the COVID-19 pandemic. Now, the Office of the Medicaid Inspector General (OMIG) has retroactively ruled that ambulette workers are ineligible for the Healthcare Worker Bonus payments, despite the fact that these workers met all statutory requirements and received official state approval for their bonus payments. The determination from OMIG disregards the plain language in statute and abandons the essential workers who preserved critical healthcare services throughout the COVID-19 pandemic.

As of October 2022, pursuant to Social Services Law § 367-w, New York State created the Healthcare Worker Bonus (HWB) Program to recognize the contributions of frontline healthcare workers during the COVID-19 pandemic. The program promised eligible workers up to \$3,000 and eligible titles included generalized "front line healthcare and mental hygiene practitioners, technicians, assistants and aides that provide hands on health or care services." Among the titles listed in law, the law further contains a broad eligibility clause to include "other direct care staff," and that titles or other provider types determined by the Commissioner of Health (COH) and approved by the Director of the Budget would be eligible.

Furthermore, guidance regarding the HWB program, posted on the Department of Health's (DOH) website and updated as recently as February 12th, 2025, stated that under paragraph (2)(b), "an employer is subject to the HWB program if they meet all the four following criteria:

1. They are a Medicaid enrolled provider.
2. They bill for Medicaid services (either through FFS, managed care, or a 1915(c) waiver).

3. Employ at least one eligible employee.
4. A. Are included in the list of provider and facility types in statute, or  
B. Are subject to a certificate of need (CON) process, or  
C. The provider serves at least 20% Medicaid enrollees.”<sup>1</sup>

Ambulette providers clearly satisfy these provisions, with many serving nearly 100% Medicaid enrollees. With this in mind, ambulette companies applied in good faith through the DOH portal, the state received their application, approved the payments, and ultimately distributed funds. As mandated by state law, these funds were passed through employers and paid directly to workers, fulfilling the State’s promise to provide bonuses in recognition of their essential service.

Yet, nearly two years after DOH approved these payments, OMIG has abruptly declared that ambulette workers were never eligible for bonuses. OMIG is demanding full recoupment, including penalties and interest, from ambulette companies, many of which are small businesses for whom this would be financially devastating. This is despite the fact that, throughout the COVID-19 pandemic, ambulette workers risked their lives providing transportation services for some of the most vulnerable patients from their bedside to treatment facilities, including direct patient assistance with wheelchair and stretcher transfers, hands-on helping patients navigate stairs and medical equipment, and exclusive service to wheelchair-bound and stretcher-bound patients.

We respectfully urge that all OMIG recoupment actions against ambulette companies are immediately ceased and audit findings determining ambulette workers ineligible be reversed. The DOH must issue clear guidance reaffirming that ambulette workers who provide hands-on patient care services qualified for the HWB program under Social Services Law § 367-w. It is imperative that the state must implement clear protocols to prevent the retroactive disqualification of workers who were previously approved and received the Healthcare Worker Bonus.

We respectfully request a response within 30 days outlining the specific steps your administration will take to address this injustice.

Thank you for your time and attention to this urgent matter.

Sincerely,



Gustavo Rivera  
33<sup>rd</sup> District  
New York State Senate

With support from the undersigned members of the New York State Senate:

**Senator Joseph Addabbo**  
15th Senate District

**Senator Monica Martinez**  
4th Senate District

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<sup>1</sup> [https://www.health.ny.gov/health\\_care/medicaid/providers/hwb\\_program/docs/hwb\\_program\\_faq.pdf?utm\\_](https://www.health.ny.gov/health_care/medicaid/providers/hwb_program/docs/hwb_program_faq.pdf?utm_)

Senator Jacob Ashby  
43rd Senate District

Senator Siela Bynoe  
6th Senate District

Senator Cordell Cleare  
30th Senate District

Senator Leroy Comrie  
14th Senate District

Senator Nathalia Fernandez  
34th Senate District

Senator Kristen Gonzalez  
59th Senate District

Senator Pete Harckham  
40th Senate District

Senator Michelle Hinchey  
41st Senate District

Senator Brad Hoylman-Sigal  
47th Senate District

Senator Robert Jackson  
31st Senate District

Senator Liz Krueger  
28th Senate District

Senator John C. Liu  
16th Senate District

Senator Rachel May  
48th Senate District

Senator Shelley Mayer  
37th Senate District

Senator Anthony H. Palumbo  
1st Senate District

Senator Roxanne Persaud  
19th Senate District

Senator Jessica Ramos  
13th Senate District

Senator Robert Rolison  
39th Senate District

Senator Chris Ryan  
50th Senate District

Senator Julia Salazar  
18th Senate District

Senator Jose Serrano  
29th Senate District

Senator Sam Sutton  
22nd Senate District

Senator Lea Webb  
52nd Senate District



AMY R. PAULEN  
Assemblywoman 88<sup>th</sup> District  
Westchester County

THE ASSEMBLY  
STATE OF NEW YORK  
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CHAIR  
Committee on Health

COMMITTEES  
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TASK FORCES  
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The Honorable Kathy Hochul  
Governor of New York State  
NYS State Capitol Building  
Albany, NY 12224

James V. McDonald, M.D.  
Commissioner  
New York State Department of Health  
Corning Tower  
Albany, NY 12237

September 8, 2025

**RE: Urgent Request to Reverse OMIG's Retroactive Denial of Healthcare Worker Bonuses to Essential Ambulette Workers**

Dear Governor Hochul and Commissioner McDonald:

We write as a bipartisan coalition of New York State Assembly members to address a grave injustice perpetrated against essential healthcare workers who risked their lives during the COVID-19 pandemic. **The Office of the Medicaid Inspector General (OMIG) has retroactively determined that ambulette workers are ineligible for Healthcare Worker Bonus payments under Social Services Law § 367-w, despite these workers meeting all statutory requirements and receiving official state approval for their bonus payments.**

This determination contradicts the plain language of the statute, violates basic principles of due process, and betrays the essential workers who maintained critical healthcare access throughout the COVID-19 pandemic.

In October 2022, pursuant to Social Services Law § 367-w, New York State created the Healthcare Worker Bonus (HWB) Program to recognize frontline healthcare workers who risked their lives to ensure New Yorkers had access to healthcare throughout the pandemic. The program promised up to \$3,000 for workers who provided "hands-on health care services" and eligible employees can include "front line health care and mental hygiene practitioners, technicians, assistants, support staff, and aides." Further, the law includes a catch-all provision for "all other health care support workers." <sup>1</sup>

Ambulette companies, reading this expansive language, applied in good faith through the official Department of Health portal. The state reviewed their applications, approved the payments, and distributed the funds. Workers received their bonuses in recognition of their essential service.

**However, nearly two years after approving these payments, OMIG has unilaterally determined that ambulette workers were never eligible for bonuses.** Despite official state approval of these payments through the DOH Portal, no exclusion for transportation workers in statute, no prior guidance indicating ambulette workers were ineligible, and clear statutory language covering workers who provide "hands-on health or care services," **OMIG now demands full recoupment with penalties and interest.**

The decision to recoup bonuses from ambulette companies is not only financially devastating to these small businesses but directly contradicts the spirit and intent of the 2022 law. The law explicitly states these funds were intended to "retain those who have been working so tirelessly these past two years."

Throughout the pandemic, ambulette workers provided door-through-door service from patient's bedside to treatment facilities, direct patient assistance with wheelchair and stretcher transfers, hands-on care helping patients navigate stairs and medical equipment, and exclusive service to wheelchair-bound and stretcher patients—the most vulnerable populations.

Further, ambulette providers were recognized as essential health care workers in several instances through the pandemic. Executive Order 202.6 classified medical transportation

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<sup>1</sup> <https://www.governor.ny.gov/news/governor-hochul-launches-health-care-worker-bonus-program>

as essential healthcare infrastructure, NYC Health + Hospitals applied healthcare worker safety protocols to transportation workers, and the federal CARES Act explicitly included medical transportation as healthcare services eligible for Provider Relief Funds.

During the pandemic, ambulette workers transported dialysis patients with 25% COVID mortality rates three times weekly for life-sustaining treatment, served nursing home residents and immunocompromised patients at extraordinary personal risk, and maintained critical healthcare access when 54% of NYC residents delayed healthcare due to pandemic fears.

These essential workers now face the trauma of having their pandemic recognition stripped away, while small ambulette companies face financial ruin from unexpected recoupment demands.

**We respectfully urge the state to immediately cease all OMIG recoupment actions against ambulette companies and reverse audit findings determining ambulette workers as ineligible.** The Department of Health must issue clear guidance confirming that ambulette workers providing door-through-door patient care services qualify as "health care support workers" under SSL § 367-w. Lastly, the state must establish clear protocols preventing retroactive disqualification of workers who received official state approval for bonus payments.

The Healthcare Worker Bonus Program was designed to honor all essential workers who maintained healthcare access during an unprecedented crisis. **New York's ambulette workers earned recognition through their service, sacrifice, and unwavering commitment to patient care during the COVID-19 pandemic. They followed the rules, applied in good faith, and received official approval. They should not be punished for the state's own determinations.**

We respectfully request a response within 30 days outlining the specific steps your administration will take to address this injustice.

Thank you for your immediate attention to this urgent matter.

Sincerely,  
Amy Paulin



Chair, Assembly Committee on Health  
88th Assembly District

George Alvarez  
Member of Assembly  
78<sup>th</sup> District

Paula Elaine Kay  
Member of Assembly  
100<sup>th</sup> District

Karines Reyes  
Member of Assembly  
87<sup>th</sup> District

Didi Barrett  
Member of Assembly  
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Nily Rozic  
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25<sup>th</sup> District

Chris Burdick  
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Jen Lunsford  
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103<sup>rd</sup> District

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David G. McDonough  
Member of Assembly  
14<sup>th</sup> District

Andrew Hevesi  
Member of Assembly  
28<sup>th</sup> District

Steven Raga  
Member of Assembly  
30<sup>th</sup> District

Cc:

Frank T. Walsh, Jr., *Acting Medicaid Inspector General*