



**Testimony for the  
2026 JOINT LEGISLATIVE BUDGET HEARING  
Topic: Health/Medicaid  
February 10, 2026**

**Senate Committee on Finance, Chair Liz Krueger  
Assembly Committee on Ways & Means, Chair J. Gary Pretlow  
Senate Committee on Health, Chair Gustavo Rivera  
Assembly Committee on Health, Chair Amy Paulin  
Senate Committee on Aging, Chair Cordell Cleare  
Assembly Committee on Aging, Chair Rebecca Seawright**

**Submitted by Kimberly George, President and CEO, Project Guardianship**

According to the U.S. Centers for Disease Control and Prevention, nearly 80 percent of adults aged 65 and older live with at least one chronic health condition, and more than two-thirds live with two or more, such as heart disease, diabetes, or cognitive impairment. As the population ages, the growing prevalence of complex, co-occurring health conditions among older adults underscores the urgent need for policies that prioritize their needs—particularly for those with cognitive and psychiatric disabilities who require comprehensive, person-centered guardianship services to maintain health, safety, and dignity.

New York State, which has the fourth-largest population of older adults in the nation at 4.6 million, will be disproportionately impacted by these trends. Older adults account for 25 percent of the population in 33 counties and 30 percent in 18 counties across the state. According to the U.S. Department of Health and Human Services, someone turning 65 today has a 70 percent chance of needing some form of long-term care during their lifetime, including adult guardianship.

Yet for individuals who require a guardian due to diminished or limited cognitive capacity and who lack family support or financial resources to retain a private guardian, there is no effective public system in place to meet their needs.

The consequences of this gap are not theoretical. They are visible every day in our courts, hospitals, shelters, and transit systems. One such example is Mr. B, a New Yorker whose life unraveled after an eviction left him without stable housing. He ultimately took up residence in the New York City subway system, where his physical and mental health deteriorated. Transit officers encountered Mr. B in acute distress, exhibiting anxiety, confusion, and erratic behavior. Shortly thereafter, a court determined that he required a legal guardian but had no family or friends willing or able to serve in that role. Project Guardianship was appointed as his guardian.

With the support of a multidisciplinary nonprofit guardianship team—including a case manager, attorneys, housing and benefits specialists, and financial professionals—Mr. B began to stabilize. He



was initially placed in supervised transitional housing in his home borough of Staten Island and began treatment for schizophrenia, combining medication with therapy. Equally critical to his recovery was the team’s work to secure and coordinate essential public benefits, including Medicaid, Supplemental Nutrition Assistance Program (SNAP), and Supplemental Security Income (SSI). Access to these benefits ensured continuity of medical care, mental health treatment, and basic stability—cornerstones of his progress.

In less than a year, Mr. B’s daily living skills improved, his confidence and sense of dignity grew, and he was able to move into a supportive, semi-independent apartment with a roommate. He now manages his symptoms, participates in group therapy, maintains social connections, and is on a positive path forward because he had access to a qualified, person-centered guardian when he needed one most.

Mr. B’s experience illustrates both the life-changing impact of nonprofit guardianship services and the risk of failing to fund them adequately.

Project Guardianship is deeply disappointed that the Executive Budget for State Fiscal Year 2027 does not include funding for these essential services. As advocates for the rights and well-being of vulnerable individuals in need of surrogate decision-making, we recognize the critical importance of a well-funded and effective guardianship system to ensure that all New Yorkers—particularly older adults and individuals with disabilities—receive the care and protection they deserve. While we appreciate the Governor’s recognition of the state’s growing aging population and the need for innovative solutions, the omission of funding for guardianship services directly undermines the ability of nonprofits and community-based organizations to meet the increasing demand for qualified, person-centered care. Without proper financial support, vulnerable individuals face long delays and an increased risk of being appointed unqualified guardians, jeopardizing their health, safety, and dignity.

Article 81 of New York’s Mental Hygiene Law provides that, after ruling out all lesser restrictive alternatives, the court shall appoint a guardian to protect and promote the interests of individuals whose limitations impair their ability to make decisions. However, there is no public fund to compensate guardians, and courts are unable to fulfill this mandate due to a severe shortage of available guardians. Instead, the system relies on family caregivers or the personal wealth of those in need—neither of which reflects the reality of today’s older adults, who are increasingly aging alone and with limited financial resources.

The Legislature has taken steps to address the crisis by including a \$1M appropriation in the past three adopted budgets. The funding has supported a statewide guardianship hotline and direct services in a few regions of the state. However, we estimate that there is at least a 1,500-person gap statewide, including some regions with little to no services, including the Capital District.

We also applaud and recognize the introduction of the New York State Good Guardianship Act—Senate Bill S8654, sponsored by Senator Cordell Cleare, and Assembly Bill A09295, sponsored by Assemblymember Charles Lavine. This legislation would establish a statewide initiative of nonprofit



guardians, modernize and standardize guardianship practices, set clear expectations for guardian conduct, emphasize person- and family-centered decision-making, require training and accountability, and build the infrastructure needed to serve individuals like Mr. B across the state.

However, the promise of the New York State Good Guardianship Act cannot be realized without stable and recurring funding. Policy reforms without funding leave courts, guardians, and the vulnerable individuals the law is designed to protect without the resources necessary to make those reforms meaningful.

In the absence of a publicly funded system, nonprofits have stepped in to fill the gap—raising funds from public and private sources to serve as guardians for those with no other options. In doing so, they have demonstrated their ability to deliver high-quality, cost-effective guardianship services. Nonprofit guardians reduce costs by preventing unnecessary institutionalization, help individuals age with dignity and independence, and help clients enroll in benefits that stabilize their lives and strengthen local economies. A ten-year study of Project Guardianship’s services found that nonprofit guardians save an average of \$67,000 per client per year, primarily through Medicaid savings.

Despite these proven outcomes, the lack of a permanent and adequate funding source to fulfill the mandate of Article 81—and to implement the reforms envisioned in the New York State Good Guardianship Act—has prevented nonprofits from meeting demand at scale. The ongoing threat of funding cuts further destabilizes services and places vulnerable individuals at continued risk.

New York needs a publicly funded guardianship program that operationalizes the New York State Good Guardianship Act.

### **Call to Action**

An annual \$15 million Executive Budget investment in a Statewide Initiative of Nonprofit Guardians (SING) would:

- Ensure that every New Yorker who needs a legal guardian has access to a high-quality, person-centered guardian, regardless of financial or social circumstance.
- Build the capacity of local aging services organizations across the state, particularly in counties facing the greatest shortages.
- Establish a robust statewide database to track guardianship demographics and outcomes.
- Generate an estimated net savings of \$80 million annually in Medicaid costs by shortening hospital and nursing home stays and supporting individuals in living and aging in their homes and communities.
- Provide the stable funding necessary to implement the New York State Good Guardianship Act (S8654/A09295), ensuring that its standards for training, accountability, and person-centered practice become reality rather than aspiration.



# PROJECT GUARDIANSHIP

Changing the way we care for people.

Unlike other proposed solutions to New York's guardianship crisis, SING is rooted in decades of practical experience and a deep understanding of what it truly means to serve as the guardian of another person. It represents a realistic, effective approach to fulfilling the intent of Article 81 and ensuring that reforms translate into meaningful outcomes for individuals like Mr. B throughout New York State. This plan was also notably adopted in the State Master Plan on Aging as a high priority and high feasibility recommendation.

Project Guardianship applauds Chairs Krueger, Pretlow, Rivera, Paulin, Cleare, and Seawright Krueger, and Pretlow and their respective committee members for their commitment to meeting the needs of New York's older adults and people with disabilities. Thank you.