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2025-2026 NEW YORK STATE BUDGET PRIORITIES AT A GLANCE

INCREASE INVESTMENTS IN HOME CARE

Investments in home care over the past decade have lagged investments in more expensive institutional settings. Home care delivers cost-effective care that New Yorkers want and need to age in their communities. According to the Association on Aging, home care is between 30% and 65% more cost-effective than skilled nursing. Yet past state budgets have increased hospital and nursing home reimbursements while neglecting home care.

Consolidation of the state's fiscal intermediaries (FI) under a single statewide FI will result in a significant number of people currently getting service under that state's Consumer Directed Personal Assistance Program (CDPAP) returning to traditional, agency-based care. Agencies cannot meet increased demand without meaningful investments.

In order to deliver on the promise of empowering elders and those with disabilities to live at home with choice and dignity, the state budget must:

- Make a significant investment in home care including increasing Medicaid reimbursements to meet the cost of delivering care including compliance with federal, state, and local mandates.
 - A1112 (Paulin). This will improve reimbursement rates for home care services by setting
 a regional minimum base rate and defining rate components to cover care, operations,
 and administrative costs. It also mandates annual rate adjustments based on a
 transparent trend factor and requires the Department of Health to implement
 accountability measures and publish related data.
- Those home care agencies that are not reimbursed through the Medicaid program also need relief from the increased wage costs. A **tax credit** for these businesses must be included in the state budget, easing the costs of providing care, much like the 340b prescription drug program does for hospitals and pharmacies in underserved areas.
- Include S707 (May) / A700 (Gonzales-Rojas) in the state budget. The state must increase
 transparency in the administration of Managed Long Term Care (MLTC) plans by making key
 data publicly available. It requires MLTC plans to report details on service usage, spending,
 appeals, complaints, and timely access to authorized services. The bill addresses gaps in
 tracking how well plans shift care from nursing homes to community-based services and
 holds plans accountable for delays in providing care. Data will be published online in an
 interactive format to support better oversight and consumer choice.

The New York State Association of Health Care Providers, Inc. (HCP) is a statewide trade association representing the full spectrum of home and community-based care providers through information, advocacy, and education. Through a strong network of regional chapters and an active state office in Albany, HCP is a primary authority of the home health care industry.