

COMMITTEE ON AGING

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CITY COUNCIL  
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON AGING

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Tuesday, March 14, 2023

Start: 10:15 A. M.

Recess: 1:02 P. M.

HELD AT: Council Chambers - City Hall

B E F O R E: Hon. Crystal Hudson  
Chair of the Committee on Aging

COUNCIL MEMBERS:

Eric Dinowitz  
Linda Lee  
Christopher Marte  
Darlene Mealy  
Kristin Richardson Jordan  
Lynn C. Schulman

## COMMITTEE ON AGING

## A P P E A R A N C E S (CONTINUED)

Lorraine Cortés-Vázquez  
Commissioner for the New York City Department  
for the Aging

Jose Mercado  
Chief Financial Officer for the New York City  
Department for the Aging

Lisa Armogan  
Vice President at New York Foundation for Senior  
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James O'Neal  
Volunteer State President of AARP New York

Tara Klein  
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Juan Carlos Salinas  
Director of Education at Jamaica Center for Arts  
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Farhana Hussain  
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Ravi Reddi,  
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Jeanette Estima  
Director of Policy and Advocacy at Citymeals on  
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Brianna Paden-Williams  
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## COMMITTEE ON AGING

## A P P E A R A N C E S (CONTINUED)

MJ Okma

Senior Manager of Advocacy and Government  
Relations at SAGE

Peter Kempner

Legal Director and Senior Law Project Director  
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Paul Nagle

Executive Director for Stonewall Community  
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Adiba Chowdhury

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Josh Bentley,

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Kimberly George

President and Chief Executive Officer Of Project  
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Eleni DeSiervo

Senior Director, Government Relations  
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Elizabeth Bird

Director of Public Policy at Educational  
Alliance

SERGEANT AT ARMS: This is a microphone test for the Committee on Aging. Today's date is March 14, 2023; Location, in the Chambers, recorded by Edery Gonzalez Rodriguez.

SERGEANT AT ARMS: Once, again, good morning, and welcome to The Committee on Aging. At this time, we ask that everyone please place all electronic devices to vibrate or silent mode.

Thank you for your cooperation. Chair, we are ready to begin.

CHAIRPERSON HUDSON: Before we begin, the committee may not get all of the questions asked today, or we may not receive responses to every question, so we will send a follow-up letter for any unanswered questions.

[GAVELING IN] [GAVEL SOUND]

Good morning, everyone, and welcome to today's hybrid budget hearing. My name is Crystal Hudson, and I serve as Chair of the Committee on Aging.

Today's committee hearing is on the Fiscal 2024 Preliminary Budget for The Department of the Aging or NYC Aging, and the 2023 Preliminary Mayor's Management Report or PMMR.

Thank you to Commissioner Cortés-Vázquez for joining us. We are also joined by Council Member Lee, Council Member Dinowitz, Council Member Schulman, and Council Member Marte.

Following testimony and questions with NYC Aging, we will hear testimony from the public at approximately 12:00 P. M. Thank you to all of the advocates and community members who have joined us today.

I will keep my comments here brief and request that the Commissioner keep her oral testimony to about ten minutes, so that we can move onto questions from council members.

Older adults and the Older Adult Service Network have faced unprecedented challenges in the past few years due to COVID-19 and the following excessive rate of inflation. As the economic uncertainty fades in, I look forward to working collaboratively with providers and the administration to help New York's 1.7 million older adults get through this difficult period.

NYC Aging has a critical role to play in assessing and meeting the needs of older adults and collaborating with the Service Network and the

Council to harness best practices and scale innovative approaches.

Serving almost a fifth of the City's population, the departments' budget continues to account for less than one-half of 1% of the City's overall budget.

By 2040, the City's older adult population is projected to increase to 1.86 million, which represents a 48.5% increase from 2000. Yet, this population is served by the agency with the smallest operating budget of any City agency. Instead of tracking with this projected population growth, NYC Aging's Fiscal 2024 Preliminary Budget is around \$467 million, down \$68 million from the Fiscal 2023 current budget.

The \$53 million Recovery Meals Program, which provides home delivered meals to older adults, previously served by the citywide Get Food Program, expired last year.

We heard earlier that the transition of Get Food participants to NYC Aging's home delivered meals program has been slow in progress and may require extra efforts in Fiscal 2024. I look forward to hearing updates on it and how the budget will change to accommodate those in need.

While I am happy to see that data trends in the PMMR show that the department has improved indicators in nearly every program area post-pandemic, I am disappointed the preliminary budget includes no new needs for new investments like technology, meals, or older adult centers to address the increasing needs of services for older adults.

NYC Aging's Fiscal 2024 Preliminary Budget includes a PEG to remove eight vacant positions. These are concerning cuts at a time when NYC Aging needs greater resources to conduct its work amid economic downturn and rising aging population.

The long contracting process and lack of additional funding for rising prices threatens contractors' ability to provide required services. These contracted providers are NYC Aging's important partners to deliver essential services to older New Yorkers. And NYC Aging will also release requests for proposals for geriatric mental health and transportation programs in this fiscal year.

I look forward to hearing how the department will advocate and solve the concerns for human service providers who are going through such an economically difficult time.

NYC Aging's capital commitment plan, the smallest in the City, totals \$80 million over five years. The Council funds a quarter of these projects. With over 360 total older adult centers and naturally occurring retirement communities now in the network, this funding seems too small to properly address all needs.

I believe the capital program should be enhanced to help refurbish centers and connect older adults to much needed technology.

It is the Council's responsibility to ensure that the City's budget is fair, transparent, and accountable to New Yorkers. This includes equity in funding and assistance. And as Chair of the Committee of Aging, I will continue to push for accountability and accuracy and ensure that the budget reflects the needs and interests of the City.

I look forward to an active engagement with the administration over the next few months to ensure that the Fiscal 2024 Adopted Budget meets the goals the Council has set out. This hearing is a vital part of this process, and I expect that NYC Aging will be responsive to the questions and concerns of council members.



We cannot analyze the City's budget at such a detailed level without your cooperation.

I'd like to thank both my staff and the staff of the Finance and Legislative Divisions for their help in preparing for this hearing: Austrid Chan, Financial Analyst; Aliya Ali, Unit Head; Christopher Pepe, Senior Legislative Counsel; Chloe Rivera, Senior Legislative Policy Analyst; and my Chief of Staff, Casie Addison; and Senior Director of Policy and Budget Initiatives, Andrew Wright. Thank you

And, now, I am going to pass it to the committee counsel.

COMMITTEE COUNSEL: Good morning, everyone, please raise your right hand.

Do you swear to tell the truth, the whole truth, and nothing but the truth, before this committee, and to respond honestly to council member questions?

[ADMINISTRATION AFFIRMS]

Okay, you may proceed, thank you.

COMMISSIONER CORTÉS-VÁZQUEZ: Good morning, Chair Hudson, Chair Brannan, who is not here yet, and members of the Aging and Finance Committees.

I am Lorraine Cortés-Vázquez, Commissioner for the New York City Department for the Aging. I have been joined this morning by Jose Mercado our Chief Financial Officer.

I thank you for this opportunity to discuss NYC's Preliminary Budget for Fiscal Year 2024, and haven an open and transparent conversation with you.

In addition to working to eliminate agism and ensuring the dignity and quality of life of older New Yorkers, providing high quality services and recourses are among our top priorities. To support this important work, the 2024 Preliminary Budget projects \$467.7 million in funding, which does not include the \$43 million in discretionary funds -- of which \$313 million are City funds, and it includes an allocation of \$238 million to support older adult centers; \$60.1 million for home delivered meals; \$43.6 million for case management -- or CMA -- \$35 million to support home care for homebound older adults who are not Medicaid eligible; and \$15 million for NORC programs, which are naturally occurring retirement communities; and \$8.1 million for care giver services.

Through the support and advocacy of important stakeholders, we have also advanced many of our efforts to help older New Yorkers as we learn to live with COVID-19 and return to some sense of life post-pandemic -- I am not sure I am willing to say 'normal' life. The years has challenged us to do more with existing recourses. But, I continue to be proud of the work that NYC Aging has done, including our partnership with the network of providers, who are dedicated every day to serving older New Yorkers.

Some recent successes include:

The launch of New York City Cabinet for Older New Yorkers, we are fortunate that Mayor Adams is committed to age inclusive city and supports to continue development of interagency collaborations, which promote government efficiency and help further serve the needs of older New Yorkers.

We are proud of the work and the projects that 20 City agencies have completed through three main subcommittees of the Cabinet: Health, Intergenerational, and Housing.

In 2022, New York City launched the Join Us Campaign, a multimedia public service announcement encouraging older adults to return to their local

1 centers. And I am glad that many of you Tweeted  
2 about that campaign once you saw it. We are happy to  
3 share that over 37,992 visits to our webpage were  
4 possible during this campaign, compared to the 1,900  
5 that we have had previously in the same period in  
6 2021. This represents a 1,859 increase in web  
7 traffic at NYC. You build it and they will come.  
8

9 While some older adults are still hesitant to  
10 return to congregate settings for meals or  
11 programming at older adult clubs, we are seeing a  
12 steady increase for in-person participation. We are  
13 hopeful that this will continue, grow, and match pre-  
14 pandemic levels. As always, meal service is the core  
15 focus of the work done at NYC Aging and with our  
16 providers offered at the older adult clubs.

17 Finally, in 2022, we launched Silver Stars, a  
18 program for retired sitting municipal employees who  
19 can return to work at City agencies and support  
20 business needs while still receiving income from  
21 their pension. We have seen nearly 100 positions  
22 developed and placed across 16 agencies or elected  
23 officials offices. I want to thank those  
24 participating agencies including the Office of the  
25 New York City Comptroller, for their commitment for

We are also incredibly grateful for the support of the City Council, which in FY 2023 awarded NYC Aging with over \$43.2 million in discretionary funds, allowing us to make even greater investments in often underserved and unserved communities. Furthermore, we've baselined \$5.1 million dollars of these investments, and I urge you to continue to allocate that fund that we have taken from discretionary to tax levy to put it back into NYC Aging. We are grateful for what you did last year, the \$3 million for home delivered meals, as we hope that partnership continues.

Our Home Delivered Meals (HDM) program is another vital component in NYC Aging's network of services. Not only do home delivered meals provide sustenance to homebound older adults across the five boroughs, the interaction with the delivery person --which for many of our clients may be the only direct human interaction for the day -- support our ongoing effort

to combat social isolation. This program continues to follow the strict guidance set by the state and is open to those who meet those criteria.

NYC Aging funded programs address the most critical overarching goals of addressing food insecurity among older adults. This includes improving meal options for recipients, embracing the diversity of our city by increasing the availability of culturally aligned meals, and promoting uniformly high-quality and nutritious meals. In FY22, over 4,287,000 meals were delivered by our providers. As of November 2022, the 14 providers in the Home Delivered Meals program served 26,670 clients.

We are thrilled to have announced the increase in reimbursement rates for home delivered meals. This funding brought the reimbursement rate for meals to \$10.68, retroactive to January 1, 2022, and raised the rates to \$11.78 per meal at the beginning of Fiscal Year 2023. This investment, totaling \$2.3 million in FY22, and \$9.4 million in FY23. Additionally, we are working with our providers to complete the purchase of Hot Shot Vans -- thank you - which the Council funded last year at just over \$3 million. To date, 10 of those vans have been

delivered, and we are working with the vendor and our programs to complete the remainder of those purchase and delivery of vehicles before June 30th.

In 2021, we completed the Older Adult Clubs (OAC) and Naturally Occurring RFPs, which has added 31 new sites, which far exceeds the commitment of 25 new sites mentioned in the Community Care Plan.

Our OAC network includes 311 centers, and our NORC network has 36 NYC Aging funded sites, and an additional 17 sites were funded through Council discretionary dollars.

Recently, NYC Aging participated in the ribbon cutting of a long-awaited center run by ELMCOR in LeFrak City, the Phoenix 3 OAC, and we broke ground in Brooklyn for an anticipated new OAC at the Bay Ridge Center. We also welcomed the new Chinatown Older Adult Center, which was tragically destroyed by a fire three years ago [INAUDIBLE], but has now reopened. The continued construction of new centers bolsters New York City's commitment to older adults and increases their ability to access vital City services.

The other thing that we are well aware of is that the pandemic outsized impact on the mental health of

1  
2 older adults because of the lingering effects that  
3 the social isolation—necessary to combat the virus.  
4 This had a devastating effect on the older population  
5 as has been well reported.

6       The NYC Aging Geriatric Mental Health  
7 Initiative (DGMH) provides a variety of mental health  
8 services and interventions to older adults at OACs  
9 across the city. DGMH brings mental health services  
10 into the community where older adults already gather.  
11 Licensed clinical mental health professionals  
12 employed, supervised, and hired by licensed  
13 behavioral health providers are embedded in older  
14 adult clubs to offer clinical interventions and  
15 related services to older adults -- who otherwise  
16 would likely not have had access to or ability to  
17 utilize these treatment modalities.

18       Although DGMH services are provided through OACs,  
19 older adults do not need to be a member of an OAC to  
20 access critical mental health services. We are very  
21 fortunate that this program has expanded to 88 sites  
22 in the City. We know that access to mental health  
23 services has a positive impact, not only on the  
24 individual, but on the individual's family and the  
25 community.



There is currently an open RFP for a new contract period to begin on July 1, 2023. The RFP recently closed on March 9, and we look forward to soon making awards for providers across six catchment areas serving the five boroughs. And you know that our commitment is to equity and to address the TRIE neighborhoods which have long been underserved.

The pandemic has been challenging for everyone, and the strain on caregivers has been significant -- you know that, and I know that, Chair Hudson, as caregivers -- NYC Aging's caregiver support programs offers support groups, counseling, trainings, outreach, and information services to unpaid caregivers -- and at points it provides respite care.

Many older adults are caretakers for their aging parents. Many are caregivers who also have full time jobs. The program aims to educate, provide, and connect to the wide range of supports caregivers might need.

The caregiver program offers options for respite care through home care or participation in social adult day care.

In 2017, we estimated that there are 1.3 million New Yorkers who function as caregivers. Without

respite care, many of these caretakers would not have the financial means or ability to leave the care receiver in someone else's care while they take a needed break from their caregiving responsibilities.

We know that the cost of maintaining an older adult in institutionalized care is far higher when compared to the cost of community care options such as supporting caregivers. Not only is it more beneficial to the long-term health and well-being of an older adult to remain at home and age in place, but it makes financial sense as well.

It costs, on average, \$160,980 to house an older adult in institutionalized care; whereas the average cost of community care services is roughly between \$32,000 to \$50,000 per person per year.

In FY24, funding for the caregiver program is currently projected to be \$8.1 million. Caregiver supports positively impact the health and wellbeing of older adults while aligning with the cultural background of the individual. Giving the As the aging diversify in the aging population, caregiving is the norm and will continue to be the norm -- rather than institutional care. As the aging population continues to diversify and age in place, we must invest

investments in caregiver supports, as it is beneficial for all.

In conclusion, I am proud of the work that NYC Aging provides. And I am extremely proud of the accomplishments of the providers given the resources that we provide.

The last few years has highlighted the resiliency of older adults, as well as the system gaps that should be strengthened in order to fully allow people to live in their communities as long as they desire. I look forward to continuing to explore ways to match services to the increased demands. We are excited to continue to innovate services and respond to the changing needs of our city and to reflect the diversity of our city.

As always, I am grateful, and we all at NYC Aging are grateful to the Chairs and the committees for your advocacy and continued partnership to support our older New Yorkers -- that is the bond that we have together and I thank you for that.

CHAIRPERSON HUDSON: Thank you so much, Commissioner.

1  
2 I am going to just kick it off with some  
3 questions, and then I will turn it over to my  
4 colleagues.

5 The first question I wanted to ask was, uhm, you  
6 mentioned this is in your testimony, and talking  
7 about ,you know, not going back to normal. Right?  
8 Or, like, there needs to be a new normal. What  
9 worked before doesn't work for us anymore. And, so,  
10 I am wondering if you have given any consideration to  
11 with regards to the Join Us Campaign and pushing  
12 folks and encouraging people to get back into  
13 congregate settings -- which is great, but not  
14 everybody wants to be in congregate settings. And I  
15 think moving forward, you know, we need to be  
16 thinking about new ways of engaging people in OACs  
17 that doesn't necessarily mandate that they come in  
18 person or stay in person.

19 And, so, I am just wondering if you have given  
20 any consideration to ,you know, hybrid engagement  
21 with regards to contracts, RFPs that might go out,  
22 and how those contracts are sort of...

23 COMMISSIONER CORTÉS-VÁZQUEZ: So, we currently  
24 have a hybrid model, in the sense that programs are  
25 both virtual as well as in house. That being said,

the Older American Act is very specific about the role that congregate sites have -- and the responsibilities that congregate sites have. And that includes meals, education, recreation, and physical activity. So, those tenets are set by the Older Americans Act -- that being said, you know, the next RFP comes out in a year, and we could work to look at... do some advocacy at the federal level to see if we can get some easement on Title III-C, and simultaneously work on different models that seem to be working. But, I don't want to lose sight that we don't know what the new normal is, but we know what social isolation causes for older adults. So, whatever models we come up with, they have to be models that engage older adults, one on one, not only through Zoom. The social isolation for you and I has been devastating, but for an older adult, it has health impacts -- and severe mental health impacts. So, we need to... Whatever models we come up with, we need to make sure that we address that. Which is why did the Join Us Campaign. It is why we have now said to centers that they must operate five days a week. It is why we are saying, virtual is great, I think it's our new normal, it gives people independence and

flexibility, but it cannot be a substitute for congregating activities.

CHAIRPERSON HUDSON: Thank you.

COMMISSIONER CORTÉS-VÁZQUEZ: You're welcome.

CHAIRPERSON HUDSON: Uhm, and I do, I know you mentioned Tweets, but I do love the Join Us Campaign for the record.

[LAUGHTER]

Uh, what is... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: Did you... I'm sorry... I was going to say, did you love the Tweet that was done at the Oscars? Where she said never let it... (CROSS-TALK)

CHAIRPERSON HUDSON: Oh, yeah, I saw... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: I Tweet that one around, because we have to combat agism in every way that we possibly can... (CROSS-TALK)

CHAIRPERSON HUDSON: Okay, absolutely, will do.

NYC Aging's Fiscal 2024 preliminary plan includes no new needs. What is NYC Aging's vision for older adults as they recover from the pandemic and suffer from inflation, and how is that expressed in this budget?

COMMISSIONER CORTÉS-VÁZQUEZ: As you know, we are in a fiscal situation that we really don't know what the fiscal outcome is going to be. And, so, we are working within the resources that we do have. There is a challenge as you mentioned -- inflation. Inflation is not only effecting the older adults, but it is also effecting the older adult clubs. Right? We have... utility costs are rising every day. Older adults... Utility costs are doubling. I mean, I... Con Edison made a presentation, they were saying costs are doubling. Well, that's fine... That's not good for the average New Yorker, but it is definitely devastating for an older adult who lives on a fixed income. We also have accelerated increases in food costs. All of those things are having an impact on the older adult clubs, as well as the individual older adult. And, so, we are trying to figure out ways of remedy. The blessing in disguise, which is interesting, is that because we have low census, the programs have been able to navigate the increased, uh, inflationary costs because of the low census. That situation will not continue as we hoped... that the weather gets warmer and people come out. So,

there has to be a way that we balance and address that in the future.

CHAIRPERSON HUDSON: Thank you. And, what requests to OMB have been made for the Executive Plan?

COMMISSIONER CORTÉS-VÁZQUEZ: We are constantly in negotiations with OMB about what our needs are. We have identified three strategic priorities to the administration, which include caregiving, food provision, you know, initiatives and food provision, and the third one was our workforce issues to make sure that older adults have opportunities for employment so that they can balance these escalating costs, and that they can no longer live just on their retirement income. And also, it is a way of combating agism. So, we are constantly negotiating with OMB, and, uhm, and it is part of our strategic priorities, we will be continuing our conversations.

CHAIRPERSON HUDSON: Okay.

And the Fiscal 2024 Preliminary Budget includes a vacancy reduction of eight positions, what will these positions be pulled from, and could this further slowdown nonprofit CBO contracting with NYC Aging?



COMMISSIONER CORTÉS-VÁZQUEZ: The vacancies, uhm, the eight vacancies that we have... I am trying to find that, I have a very specific answer for you... excuse me... (CROSS-TALK)

CHAIRPERSON HUDSON: That's okay, I will wait as long as it takes for a really good answer.

COMMISSIONER CORTÉS-VÁZQUEZ: The eight positions, which were part of the vacancy reduction, cut across, uh, several bureaus, and with different functions, one of them is Legal Aide, uh, the Legal Affairs Unit, the other one is a Senior Employment Services, one is in the ACO, another one is in the Bureau of Community Services, which oversees older adults clubs and Meals on Wheels, and a small program called the Bill Payer Program, which is a support for older adults. The other one is in Human Services, and one more was in General Services, which is supports for the administration of the department.

CHAIRPERSON HUDSON: So, what impacts will the reduction of those positions, particularly Human Services, Legal Affairs, Community Services, what impact will those have on delivering services?

COMMISSIONER CORTÉS-VÁZQUEZ: Legal Services, we have, I believe that the impact will not be great,

1 because we have two fulltime people and this would  
2 have been a third person. And, so that... we have  
3 been functioning with two fulltime people for a while  
4 now. Uhm, and in Senior Employment, we are  
5 navigating that and making some provisions with grant  
6 funded positions. The Bill Payer Program, again, is  
7 a very small program. And, then, we are even looking  
8 its... given its scale, whether that is a program  
9 that should continue, and we can divert those  
10 resources elsewhere, probably to Senior Employment.  
11 In terms of Human Resources (sic) it is always a  
12 challenge for us, but we are a small agency... I  
13 want to go back, with a very low headcount ,you  
14 know, compared to other city agencies. And, so it is  
15 a clerical position, and uh, we are just navigating  
16 that at this point.

18 CHAIRPERSON HUDSON: Okay, and, then, there are  
19 six positions added in non-city level, how would it  
20 affect NYC Aging's program areas and service  
21 delivery?

22 COMMISSIONER CORTÉS-VÁZQUEZ: Ask that question  
23 again, because I'm...

24

25

CHAIRPERSON HUDSON: there are six positions added in non-city level, how would it affect NYC Aging's program areas and service delivery?

COMMISSIONER CORTÉS-VÁZQUEZ: Okay, they are... Those six are in, uh, grant funded positions.

CHAIRPERSON HUDSON: Okay.

COMMISSIONER CORTÉS-VÁZQUEZ: Four of them are in a program that we call HIICAP , which are... The four positions are in HIICAP, which is a program that we use to enroll adults and train older adults on how to pick their Medicare plan that is best for them. And that is seasonal; although, we do continue it throughout the year, and the other two are in Senior Corp, which was the \$4 million that we raised from AmeriCorps, so that we can provide opportunities for older adults. Now we have a program for older adults over their poverty level that matches... Uh, employment program that we for older adults, uh, on the [INAUDIBLE]... (CROSS-TALK)

CHAIRPERSON HUDSON: And, just for the record, I just want to... I think the numbers are switched.

COMMISSIONER CORTÉS-VÁZQUEZ: I'm sorry, four for Senior Corp and two for HIICAP.

CHAIRPERSON HUDSON: Okay, great, thank you.

Uhm, the vacancy rate at NYC Aging is 11%, higher than the citywide average of 3%, what is being done to staff up these approximately 36 vacancies? And what is the impact of these vacancies on contracted older adult programs?

COMMISSIONER CORTÉS-VÁZQUEZ: That's of January. We don't have those vacancies.

CHAIRPERSON HUDSON: So, they have all been filled?

COMMISSIONER CORTÉS-VÁZQUEZ: Yeah. I think we have... (CROSS-TALK)

CHAIRPERSON HUDSON: Okay. As of January?

MR. MERCADO: Yes, well, as of today, they've been all... been filled.

CHAIRPERSON HUDSON: Okay, great.

MR. MERCADO: [INAUDIBLE] condition... That's what... We have those vacancies [INAUDIBLE]... (CROSS-TALK)

CHAIRPERSON HUDSON: Got it. Got it. That's good.

Uhm, give me one second... So, you have no current, active, uh, current open positions?

MR. MERCADO: We do have current active positions, uh, but most of them... they are grants, and, so we are actually in the hiring process.

CHAIRPERSON HUDSON: Okay, do you know how many?

MR. MERCADO: We will get back to you. I don't have it off the top of my head.

CHAIRPERSON HUDSON: Okay.

And, uhm, for these positions... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: [INAUDIBLE]...

CHAIRPERSON HUDSON: Are they key client facing positions?

MR. MERCADO: No... (CROSS-TALK)

CHAIRPERSON HUDSON: No? Okay...

MR. MERCADO: They're all...

CHAIRPERSON HUDSON: And, just... Can you, for the record, could you just walk us through the entire hiring process, starting from how the agency identifies an necessary position for hiring, all the way through the approval process... CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: Sure...

CHAIRPERSON HUDSON: The agency needs to undergo with the Office of Management and Budget?

COMMISSIONER CORTÉS-VÁZQUEZ: The... What I will tell you, is that we have an excellent Chief Human

Resources Officer, Sade McIntosh, and Sade has been able to establish relationships, external relationships, with stakeholders that may have candidates who are... like, universities, and college fairs, and other opportunities to recruit and send out that information as much as possible. That is standard in addition to using the other social media networks like LinkedIn. So, we have a whole process that we do for recruitment. And recruitment for us is ongoing. It is not for a... In addition to the recruitment that we do for a single position... But, we have a recruitment process that she has established to do as an ongoing year-round process to just identify individuals who have an interest in serving at the Department for the Aging. The one thing that we are also looking at is our titles, to make sure that our titles are fungible with other City titles, so that when we advertise we can use that information so that people in other city agencies know that this is comparable to the title that they may have in Aging. And the other thing that she has done, and you haven't asked about this, but we have done, with Michael Ognibene and Sade, an extremely robust human development, professional

development process for middle managers, for entry workers, for social workers, for our teams that are client facing, all as part of our retention strategy.

CHAIRPERSON HUDSON: Uh, has there been work done in advocating for higher salaries for employees at NYC Aging? You know, I mean, some of the positions that you all have in your agency, equivalent positions in other agencies make more. So, I am just wondering where we are with...

COMMISSIONER CORTÉS-VÁZQUEZ: It is one of the issues that we have a workforce group with... We developed a workforce group with the network, uh, providers, precisely looking at some of those issues... and, uh, looking to have parity across, not only City agencies, but also external forces... external operations. And, so, it is something that we are constantly looking at. But, I want to just remind, uh, the Chair, I am sure you remember, that we took the initiative, not for our own staff, but to increase the salaries during the model City budget for older adult clubs to increase the market rate value for people who worked in the food arena. We also did the same thing for social services. And,

recently, we did that for the case management agencies.

CHAIRPERSON HUDSON: So, that was done in the model budget, but has any of that sort of come to fruition in the actual budget?

COMMISSIONER CORTÉS-VÁZQUEZ: Yeah, it... Yeah, the model budgets reflected the new salary scales [INAUDIBLE]... (CROSS-TALK)

CHAIRPERSON HUDSON: Okay, fair enough, thank you.

COMMISSIONER CORTÉS-VÁZQUEZ: And the CMA salaries went up. It was our initiative that we undertook rather than issue the RFP earlier, those savings, we used to then give salary increases to the workers in the CMA programs and to increase at all different levels of support. And, then, now we have issued the, uh, the RFP.

CHAIRPERSON HUDSON: Great, thank you.

COMMISSIONER CORTÉS-VÁZQUEZ: You're welcome.

CHAIRPERSON HUDSON: I want to acknowledge that we have also been joined by Council Member Mealy. And I want to throw it over to my colleagues for a couple of questions before I jump back into mine, starting with Council Member Schulman.



COUNCIL MEMBER SCHULMAN: Thank you very much, and thank you, Chair, for this very important budget hearing. And, hello, Commissioner, it is always good to see you.

COMMISSIONER CORTÉS-VÁZQUEZ: Thank you

COUNCIL MEMBER SCHULMAN: So, older adults are growing... The number of older adults in New York City is growing a lot. And, as Chair of the Health Committee, I just wanted to know how much, if any, part of the budget goes toward connecting older adults with health care?

COMMISSIONER CORTÉS-VÁZQUEZ: Uhm, one of the things that we are doing... First of all, we have a very strong relationship with The Department of Health, as well as with H+H... And, they are two leading partners in the cabinet. So, I can get back to you what the dollar figure is for each one of those. I don't think they disaggregate it by age. But, what I can tell you is that there is some very strong, robust initiatives that we have undertaken with both of those city agencies to ensure that older adults are connected to health services at the local community, and also looking at some of the practices. Like, one of the things that we do is that we train

health care professionals at DOH facilities, we are going to do that in a more robust fashion now that we've had the cabinet... And we are doing the same thing with H+H.

COUNCIL MEMBER SCHULMAN: Thank you.

So, one, they should disaggregate it by age. So, I will take that up with them. The other is...

(CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: They may, I'm not... I... (CROSS-TALK)

COUNCIL MEMBER SCHULMAN: No, no, no, that's fine.

That's a question for them. So, I am actually going to be... There is a bill that I introduced that is going to be passed in the Council on Thursday which creates the first citywide diabetes reduction plan. And, so, I am going to ask you to think about what that means in terms older adults and the elder centers, and coordinating with DOHMH and H+H around that.

COMMISSIONER CORTÉS-VÁZQUEZ: That's an excellent initiative, because it is so prevalent in older adults -- diabetes is so prevalent. We'd be very happy to work with you on that and to work with DOH on that.

CHAIRPERSON SCHULMAN: You know, because one of the things that we are looking at is ,you know, getting glucometers ,you know, different things like that. So, we should... And, obviously, there's a cost for that, too. But, if we can coordinate that, that would be great.

And, also, you talked about... I mean, I just want to emphasize what the chair has said about inflation and making sure... Because, I saw in terms of the home meals and everything else, there are more and more, at least in my district, and I am sure citywide, people who are in need of food and who are food insecure. So, we should take a look at that-- if we need to boost that, want to be able to do that.

COMMISSIONER CORTÉS-VÁZQUEZ: Yes, some of the... Many of... And, I think food insecurity is something that we are all concerned about -- particularly during the summer... inflation.

So, there are programs that have food pantries. We also have the program that we work with [TIMER CHIMES] the farmers markets, where we give out \$25.00 coupons to older adults who... so, that they can get fresh greens at the farmers markets. And that is given to about 4,300 individuals, I believe, and I

will correct the record if that number is lower than what it is supposed to be. But, it also is for home delivered meals people. And if they are unable to go out and purchase their food, we usually get them surrogates so that they can help them navigate that.

COUNCIL MEMBER SCHULMAN: And if I could just... Chair, I just want to finish my train of thought on this. So, in terms of the food markets, the green markets, there is one by me, and I don't think that people are aware that that's offered. And there a lot of older adults that take advantage of that, so we should have that conversation offline about how to make sure that that is promoted.

COMMISSIONER CORTÉS-VÁZQUEZ: That is a robust... That program is really well utilized.

COUNCIL MEMBER SCHULMAN: Okay, thank you very much, Chair.

CHAIRPERSON HUDSON: Thank you so much, Council Member.

And, Council Member Lee?

COUNCIL MEMBER LEE: Hi, Commissioner, good morning.

COMMISSIONER CORTÉS-VÁZQUEZ: Good morning.

COUNCIL MEMBER LEE: Okay, so, I wanted to focus more on the mental health piece and the disabilities piece.

So, if I am... And this is just for my own clarification, so there are 88 sites that DFTA geriatric mental health program has, but that is operated by about four to six providers, right?

COMMISSIONER CORTÉS-VÁZQUEZ: Right.

COUNCIL MEMBER LEE: Okay.

And, then, there is also a separate Council initiative, GMHI, which is also similar -- the Geriatric Mental Health Initiative -- but that is around 35 providers, right?

COMMISSIONER CORTÉS-VÁZQUEZ: Right.

COUNCIL MEMBER LEE: And, so, they do a lot... more of the supportive services, because those folks are not necessarily the Article 31's and the clinical piece, right? And, I remember, uhm, because we had an Article... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: [INAUDIBLE] the ones that DFTA are? DFTA is... (CROSS-TALK)

COUNCIL MEMBER LEE: Okay, yes...

COMMISSIONER CORTÉS-VÁZQUEZ: The 88 programs are clinicians... (CROSS-TALK)

COUNCIL MEMBER LEE: Yes, those are the clinicians, but the 35 that through the Council initiative are whole host of variety... Okay. Which is also just as important.

And, uhm, is there... For the RFP that's coming out, will there be new host sites that are added and new providers that are added? Or, what is the criteria of how they are selected?

COMMISSIONER CORTÉS-VÁZQUEZ: Well, the criteria of how they are selected is the proposal that offers the greatest opportunity for the older adults in that community. So, that is how they are selected. The one thing that we... included in that, from our perspective, is, do they have the cultural competency to serve the community that they are expecting or they are planning to serve. So, that is the criteria that we look at as criteria in all RFPs.

What we have done, and I don't know if this answers your question, but we have done is we do it be geographic area to make sure that we get as much coverage as possible. I think the model that we have employed, and I think you know this well, is using the older adult club as a hub... is a very effective model, because we are able to go to that community.

The other thing is that because of this pandemic life that we have lived in, in this post-pandemic life, Telehealth is still an option that can be employed.

COUNCIL MEMBER LEE: And do they feel comfortable using Telehealth at this point, or is it... Do you know what the percentage is of the folks that are using it?

COMMISSIONER CORTÉS-VÁZQUEZ: No, I can get back to you that, but it is something that is utilized widely.

COUNCIL MEMBER LEE: Okay.

Uh, and, then, for the folks... Because, I totally understand that the state regulations prevent the clinical services from going into some of the locations because of the space restrictions and all of that... So, for those centers that do not have the clinical piece readily available, how do you guys work with the centers and the clients to make sure that if someone does need the services, and the mental health services, that [TIMER CHIMES] they get plugged in? Like, what is the process for getting referrals?

COMMISSIONER CORTÉS-VÁZQUEZ: They do a whole network of community services. So, I... You don't

1  
2 need a referral. If you are an older adult, and you  
3 come in to one of the sites, and that is the service  
4 that you what, you don't need a referral.

5 COUNCIL MEMBER LEE: No, but, like, just in case,  
6 uh, for example, our center at KSC, in case the  
7 director or folks there didn't know which clinical  
8 programs they could connect seniors to, would they be  
9 able to reach out to you guys? Like, how does that  
10 connection happen with the DFTA center, sorry that's  
11 what I meant.

12 COMMISSIONER CORTÉS-VÁZQUEZ: Oh, okay, I'm sorry,  
13 I misunderstood you. Absolutely, they connect with  
14 us. They connect the mental health... Toby (sp?)  
15 and Jocelyn (sp?), and they will connect with them...  
16 which they already do. And they will continue...  
17 And, we provide them with who are the local providers  
18 in their area. They were one of the sites... KCS  
19 was one of the sites that we did a pilot with at one  
20 of the OAC sites. And we did a pilot with them so  
21 that they could provide case management as well as  
22 geriatric mental health services. So, we will see  
23 what the results of all of that is when we finalize  
24 the RFP.

25 COUNCIL MEMBER LEE: Nice.



And, then, sorry, Chair, if I could just ask two more questions?

Okay, uhm, in terms of workforce, because I have been hearing more and more throughout the hearings, because I still chair, in addition to Mental Health, it is the Disabilities Committee and the Addiction, so especially around the disabilities community, uhm... And, which a lot of older adults are included in that as well, but there seems to be this real desire, like you said, fighting against the agism and then people wanting to work, and then, plus, on top of that, we know now, after the pandemic, that people can work virtually as well. So, are there opportunities that DFTA is thinking through in terms of... You know, there is a need to hire more people, and there is a group that's, you know, willing to work, and so how do we sort of mesh those two together? And are there other ways to expand the workforce programming?

COMMISSIONER CORTÉS-VÁZQUEZ: It is... We have a stellar workforce group headed by a woman named Sivean (sp?), and I can tell you that the biggest challenge for us is getting employers and reeducating employers on agism... and influencing employers on

1 the benefits of the older worker. The workers are  
2 there. The skills are there. What we need.. That  
3 is our biggest challenge. I would say that we are  
4 making strides, but we have a long way to go. So,  
5 everything and anything that all of us can do, in  
6 this room and outside of this room, to influence  
7 people on agism and the value of having older workers  
8 in their workforce would be welcome. Because, older  
9 workers make the difference and can. We know that.  
10 Study after study says diversity of thought in a work  
11 place makes it more productive. And that includes  
12 older adults.

14 COUNCIL MEMBER LEE: Yes, I totally agree.

15 I wonder if there could be incentives, too. I am  
16 just thinking out loud.

17 And, then, also, my last question is around  
18 [INAUDIBLE]... (CROSS-TALK)

19 COMMISSIONER CORTÉS-VÁZQUEZ: Tweeting and  
20 campaigns work.

21 COUNCIL MEMBER LEE: Yes.

22 I am also wondering, uhm, because one thing that  
23 we heard a lot about in the, uhm, Disabilities  
24 hearings have also been around the paratransit  
25 services. And I am sure that for older adults it is

COMMISSIONER CORTÉS-VÁZQUEZ: We are issuing a transportation RFP now. We welcome your partnership in that. And the goal there is not to just be a... The goal of the transportation program was not just to be a program that addresses the needs of OAC. However... addresses the transportation needs of a community including work and also visiting family. You know, sometimes that is just as important... to get transportation to visit a family member. So, in the RFP, we are looking at individual groups, but also group trips... But, looking at it to serve a myriad of transportation needs, not just transportation to the older adults centers.

COUNCIL MEMBER LEE: Mm-hmm. Or, if they just wanted to go out to dinner or meet friends. That's important... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: Or if they just want to go shopping together.

COUNCIL MEMBER LEE: Okay, thank you.

CHAIRPERSON HUDSON: Not a problem.

And Council Member Mealy?

COUNCIL MEMBER MEALY: Yes, I just wanted to talk about the \$3 million that was added to the Fiscal 2023 to support the 10,000 tablets for older adults. What is the rollout time on that?

COMMISSIONER CORTÉS-VÁZQUEZ: Those tablets have already been distributed, and... through a variety of older adults clubs.

COUNCIL MEMBER MEALY: How are you tracking them and making sure that our seniors are utilizing them properly?

COMMISSIONER CORTÉS-VÁZQUEZ: What we have is... Because they have one year of internet service, we can see who is utilizing it and who is not utilizing it. And, so, we have that record. If you want that information, I'll be more than happy to supply that to you.

COUNCIL MEMBER MEALY: Please.

Grab-and-go Meals, will New York City agencies continue to allow grab-and-go meals for the centers

that prefer it as an option? Even though they were not included in the plan of activity in the last RFP?

COMMISSIONER CORTÉS-VÁZQUEZ: Grab-and-go meals were included in the RFP... (CROSS-TALK)

COUNCIL MEMBER MEALY: But, if the center opts out...

COMMISSIONER CORTÉS-VÁZQUEZ: But, if the center opted to have grab-and-go, they could continue Grab-and-Go at some.... for some under certain circumstances. And, as I said earlier, we are discouraging grab-and-go as an option, because what we want to do is to have older adults come and socialize and get involved in the day to day activities of an older adult club.

COUNCIL MEMBER MEALY: Okay, you are saying... We are talking about food insecurity, what is your plan in regard to feeding centers that do not have a sponsor? And I am kind of taken aback that there was an RFP on March 9th, and this will be implemented in July 2023, and I have seniors centers that do not have a sponsor, that need food. So, how are you working towards... in collaboration? I thought I asked you every hearing that I can tell you about my senior centers that do not have a sponsor. This is

1 senior housing... 300 seniors do not have food.  
2 That's life and death. And, I got someone to sponsor  
3 that Mount Ararat Senior Center, and I am still  
4 getting no response from you. And, to hear that  
5 there was an RFP, I thought we were working in  
6 collaboration to wipe out food insecurity. So, how  
7 can partner with me to make sure... And, it is not  
8 just this one senior center, it's numerous senior  
9 centers that are falling through the cracks, that we  
10 as government have to make sure we feed these  
11 individuals. There are people that need help. So, I  
12 need your [TIMER CHIMES] help. How can you do this?

14 COMMISSIONER CORTÉS-VÁZQUEZ: For the record,  
15 there is no RFP that has been issued for older adult  
16 clubs or for food programs. So, I want to be really  
17 clear with you. You will always have my partnership.  
18 When that RFP comes out, in the future, and that will  
19 probably be in about a year or 18 months, when that  
20 RFP comes out, then we could revisit those. But, at  
21 this point, there has been no RFP issued since 2021.

22 COUNCIL MEMBER MEALY: I know this happens every  
23 three years. So, what was this RFP for? I'm sorry,  
24 correct me, the one you just said about March 9th?

COMMISSIONER CORTÉS-VÁZQUEZ: Well, we issued.. So, one of the things that New York City Aging has done, because our programs were not revised or changed -- some of them for 12 years, some of them for 11 years -- we have issued RFPs to include diversity and address the changing population in each one of the areas, so that is Case Management, Home Delivered Meals, OAC... (CROSS-TALK)

COUNCIL MEMBER MEALY: So, that's what this RFP was for?

COMMISSIONER CORTÉS-VÁZQUEZ: I don't know which one you are talking about in particular, but I can tell you the ones that have issued: Geriatric Mental Health, Transportation, and Case Management. So, all of the core services have been RFP'd. All right? And, uh, Home Care... So, if you are talking about the most recent one, that was the geriatric mental health RFP, which is not related to food insecurity per se, as you are hoping to get a sponsor for an older adult club.

COUNCIL MEMBER MEALY: I just have one more question. I have been asking, do you have a data base for this city for seniors centers who do not have a sponsor? I ask this at every hearing. We have

to be able to know who is falling through the cracks and who is not. Seniors are the most vulnerable population.... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: I will get back to you on that... (CROSS-TALK)

COUNCIL MEMBER MEALY: Please do.

COMMISSIONER CORTÉS-VÁZQUEZ: We have... We have information on who has applied for RFPs and may not have received one.

COUNCIL MEMBER MEALY: So, isn't it our job to make sure that they get fed somehow or another... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: I will get back to you... (CROSS-TALK)

COUNCIL MEMBER MEALY: Even if an elected official could put the recourses in, but we need to know how we can go about doing this. So, I am looking forward to seeing that database. And I will write a letter to make sure that we stay in communication. I really need to know. Because it is my job as a sub-chair of Senior Centers and Food Insecurities. And, more and more, I am going to every district, and there are a lot of senior centers that do not have food. And, then, they are housing... there is senior housing,



that they could right downstairs. We cannot do that to our seniors. So, I am looking forward to partnering with you...

COMMISSIONER CORTÉS-VÁZQUEZ: Thank you, Council Member... (CROSS-TALK)

COUNCIL MEMBER MEALY: and getting that information. Thank you.

COMMISSIONER CORTÉS-VÁZQUEZ: I am always looking forward to partnering with you. And we have to be clear when an RFP comes out, to look at what that... what that census is to see if they are eligible to apply. But, we would be more than happy to work with you on that. I think we have common, cause about food insecurity and that older adults should not go hungry. We have a common cause with that. I don't think there is any dispute. I welcome any correspondence and any partnership with you.

COUNCIL MEMBER MEALY: Thank you.

CHAIRPERSON HUDSON: The cityside Vacancy Reduction Memo issued in November described the change in the City's hiring process ending the policy that only allowed agencies to fill one of every two vacant positions. Yet we have been hearing from many agencies that this practice is still being enforced

in some cases. Since November has NYC Aging been approved by OMB to fill vacant positions or are you still required to provide two vacant positions for everyone to be hired? And this would be relevant to the positions that are already filled.

COMMISSIONER CORTÉS-VÁZQUEZ: Yeah, no, we don't... That practice... We have not been subject to the two to one... (CROSS-TALK)

CHAIRPERSON HUDSON: Okay, great...

COMMISSIONER CORTÉS-VÁZQUEZ: for a while. And they have authorized 19 positions... Or 14 positions? Okay, we will get back to you. Jose is telling me not to say any more.

CHAIRPERSON HUDSON: No problem. No problem. That's why he's beside you. (LAUGHING)

According to attrition information provided by OMG for Fiscal 2023... Hold on one second... Okay, sorry, according to the... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: I want to just clear for the record, it wasn't confusion, it's just that Jose wanted to be clear, that because the number changed at a different point and time...

CHAIRPERSON HUDSON: Right.

COMMISSIONER CORTÉS-VÁZQUEZ: And I didn't want to put anything on the record that was incorrect for that point and time.

CHAIRPERSON HUDSON: No problem. But, you will follow up?

COMMISSIONER CORTÉS-VÁZQUEZ: We will follow up, yes.

CHAIRPERSON HUDSON: Okay, great, thank you.

Uh, okay, according to attrition information provided by OMB for Fiscal 2023 through January, NYC Aging has lost 24 fulltime employees. In which areas and positions titles have you seen more attrition? And has the loss been disproportionate?

COMMISSIONER CORTÉS-VÁZQUEZ: We don't have attrition numbers. We will get back to you on that.

CHAIRPERSON HUDSON: Okay, no problem.

Just going back to some of the providers, we know that a lot of our providers are having to take out loans because of delays in getting funding from agencies, especially for our senior service organizations. How is DFTA working to get funding out as quickly as possible and minimize disruption to services

COMMISSIONER CORTÉS-VÁZQUEZ: I am proud to say that we reimburse between a seven to 10 day window. We have a good record of that. Where there may be a delay is where the submission is not totally accurate, we may send it back. But, we have... According to the guidelines, we have 30 days for submissions. We reimburse well within that threshold.

The other thing that I would like to say is -- and I have said this to you and the committee before -- what we need is partnership with the providers -- which we have -- but, if they invoice on time we would be able to reimburse them on time.

CHAIRPERSON HUDSON: Okay.

COMMISSIONER CORTÉS-VÁZQUEZ: Invoicing is just as important as reimbursement.

CHAIRPERSON HUDSON: Understood, thank you.

You mentioned cultural competency earlier, I believe, in your testimony, and we know that generally it costs more to achieve cultural competency if you need to hire people who are bilingual, or particularly sensitive, let's say, to the LGBTQ community, so, how is DFTA accounting for this, and what proactive steps have you taken

1 particularly since our hearing on LGBTQ older adults,  
2 thinking also about older adults who are HIV  
3 positive? We have heard from a lot of concerned  
4 older adults about... who fall into the margins, in  
5 particular populations. So, I am wondering what NYC  
6 Aging is doing both from a provider perspective to,  
7 ensure that they are able to pay what they need to  
8 pay to achieve the cultural competency we are all  
9 looking for, and then also from an agency  
10 perspective?

11  
12 COMMISSIONER CORTÉS-VÁZQUEZ: I think... I think  
13 that when you hire competent people who reflect the  
14 City of New York, you get cultural competency. So, I  
15 don't know if there is additional cost for that per  
16 se...

17 CHAIRPERSON HUDSON: Well, I think it's, like, if  
18 you are looking for a case manager, or let's say a  
19 social worker specifically, and you are looking for a  
20 social worker who might be fluent in ,you know, a  
21 specific language...

22 COMMISSIONER CORTÉS-VÁZQUEZ: Sure, sure...

23 CHAIRPERSON HUDSON: there may not be as large of  
24 a workforce, and then you... You know, the salaries  
25 are fairly low, and so you might find people who just

are not willing to take the job. So, not necessarily that there is a dearth in competency or ability to fill the role, but really, specifically that the payment for the role might be low... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: Yeah, I think the market forces come in to play all of the time , you know, not only in terms of language and particular skills to deal with a particular population. I think the issue is the salary level overall for geriatric programs. And, so, I think that is the larger question.

When we issue the RFP, and we ask for people to serve particular communities, we make sure that they submit an RFP that reflects their particular needs. So, I think the market forces are things that we have that are a challenge for all positions in older adult... in the geriatric arena.

CHAIRPERSON HUDSON: Okay, thank you for that.

And, then, just going back to our last conversation about invoicing being as important... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: We have zero backlog.

CHAIRPERSON HUDSON: You have zero backlog on your end?

COMMISSIONER CORTÉS-VÁZQUEZ: Yeah.

CHAIRPERSON HUDSON: Okay, do you know how many providers are late or what proportion of providers it is? And how much money does it represent -- the folks who might be submitting late invoices?

COMMISSIONER CORTÉS-VÁZQUEZ: I can get back to you on that, but we definitely have that number. Because that reflects for us unspent dollars, which is a great concern for us.

CHAIRPERSON HUDSON: Okay, and do you have staff that are specifically assisting the role as to assist with invoicing (sic)?

COMMISSIONER CORTÉS-VÁZQUEZ: Yes, Jose's entire shop does that.

CHAIRPERSON HUDSON: Okay. So, if your entire shop is helping with invoicing, then why might the invoices be coming in late? Do you have insight into what might be causing that?

MR. MERCADO: So, we have, for example, accounts payable unit who basically... We run reports every month to determine who is not invoicing.

CHAIRPERSON HUDSON: Mm-hmm?

MR. MERCADO: And we reach out to them ourselves. And we also reach out to our partners, our program officers, to find out exactly what their needs are, and then we will help them with whatever they need.

CHAIRPERSON HUDSON: But, so, when you're helping them, they've already not submitted the invoice...

(CROSS-TALK)

MR. MERCADO: Right, right... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: Right.

MR. MERCADO: We find out who they are. Like I said, we run a monthly report, there are a couple of providers who have not submitted, we reach out to them, we find out why -- in some cases they may be... there's one case that is a good example where the bookkeeper has been out for a month due to a death. And, so, we try to give them advice on how to actually try to fill out invoices and submit it to us.

If push comes to shove, then, again, we will probably give them an advance to kind of move that along for the next month.

CHAIRPERSON HUDSON: Okay, and, so, these are monthly invoices?



MR. MERCADO: Yeah, they are required to submit monthly invoices.

CHAIRPERSON HUDSON: So, are there organizations that every month submit late invoices?

COMMISSIONER CORTÉS-VÁZQUEZ: Yes.

MR. MERCADO: Yes, we do have a couple that we... Again, we point out... Again, we run a list every month, figure out who has missed the deadline -- as the commissioner mentioned, they have 30 days to submit an invoice. Most of them try to submit it by the 15th. We run a report on the 15th, and we run a report on the 30th. We identify who did not submit. We then call them and find out what is going on. If they don't respond back to us, in most cases, some don't, we then go out to our program officers who then follow up... who then actually do field visits and contacts. We are constantly trying to figure out why it is going on, because we know cashflow is very important.

CHAIRPERSON HUDSON: Right.

MR. MERCADO: and, just to point out ,you know, at the beginning of the year, we give out three months of cash. And, in some cases that kind of don't submit invoices on time, they had that little

1  
2 flow for three months. But, again, we are constantly  
3 on top of that.

4 CHAIRPERSON HUDSON: Okay... (CROSS-TALK)

5 COMMISSIONER CORTÉS-VÁZQUEZ: And that is a  
6 concern for us, because... And, you have heard me  
7 report this, we have found ourselves, even with all  
8 our technical assistance and support to get invoices  
9 , we have found ourselves at the end of a year with  
10 about \$15... One year was as high as \$15 million of  
11 many that we could not redeploy, because people had  
12 not invoiced for it. And when you look at an  
13 organization, such as The Department for the Aging,  
14 and the needs that are out there, that is something  
15 that we try to avoid as much as possible.

16 CHAIRPERSON HUDSON: How... The work that you  
17 described for your team, is that going to be impacted  
18 by a reduction in staff at all?

19 MR. MERCADO: Uhm, well, I would say right now,  
20 no. None of the vacancies have actually hit the  
21 accounts payable unit at this point and time.

22 CHAIRPERSON HUDSON: Okay, and then going back to  
23 that \$15 million, so what is causing the  
24 inflexibility in terms of not being able to...

25 (CROSS-TALK)

CHAIRPERSON HUDSON: Right.

CHAIRPERSON HUDSON: But, is that... That's a procurement policy? Is it...

CHAIRPERSON HUDSON: The... You... You write  
the... the contracts, right?

CHAIRPERSON HUDSON: So, then could you create

terms in the contract that would then allow you to do  
 ,you know, what you are describing? Or to perhaps,  
 ,you know, create more flexibility in terms of  
 when... how long they have to receive the money or

even throw it to another agency that is doing similar work?

COMMISSIONER CORTÉS-VÁZQUEZ: We have the language in the... in the contract about the ability to do that. We don't have what you just described, which I think is ,you know, a term by...

CHAIRPERSON HUDSON: Right.

COMMISSIONER CORTÉS-VÁZQUEZ: a four month delay and you have not even drawn that on your advance, then we probably would have options that... that's probably another provision that we could include in the contract provisions.

CHAIRPERSON HUDSON: Okay.

Anything to add?

COMMISSIONER CORTÉS-VÁZQUEZ: What was I saying...  
(CROSS-TALK)

MR. MERCADO: So, I was going to say, you know, there is a human services contract, which is boiler plate across the... which allows, as you mentioned earlier, to kind of due budget modifications... contract modifications. But, it takes us a little longer to identify... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: To identify...

MR. MERCADO: Right. Who to take down, I mean we look at the end of the year. By the end of the year, and then decided, as the commissioner mentioned, to kind of figure out how to actually reduce those contracts going forward. But, it takes time. It is not something that we can just do with a flip of a switch.

CHAIRPERSON HUDSON: Right. But, I mean, but you could... You could do it for future contracts is what I am getting at... (CROSS-TALK)

MR. MERCADO: Yeah, absolutely, that's what we have been trying to do is look at it, you know...

CHAIRPERSON HUDSON: Right.

MR. MERCADO: Future contracts, uh, [INAUDIBLE] specific RFPs, as we issue the RFPs, we are looking at those specific catchment areas, where, again, there is... I hate to say the word, but the need is not there, but there... the need is somewhere else. So, that is kind of the reason... Changing all of RFPs are constantly what we are doing.... besides the other issues.

CHAIRPERSON HUDSON: Okay, thank you.

Addressing inflation, which ,you know, we are all unfortunately too familiar with, cost have gone up

1 aggressively for older adult centers and home  
2 delivered meals programs for things like raw food,  
3 gas and utilities, is NYC Aging assessing the  
4 inflation cost impacts for raw food, gas, and other  
5 materials at OACs and home delivered meal programs,  
6 and, if so, what is the plan to address these budget  
7 needs in particular?  
8

9 COMMISSIONER CORTÉS-VÁZQUEZ: We are looking at  
10 that. We are looking at the unit costs, but I don't  
11 think that we have a plan right now on how we can  
12 address it given ,you know, the fiscal constraints.

13 MR. MERCADO: So, you mentioned... We have  
14 actually been looking at... specifically, right now  
15 the HDM. We have actually been working with the  
16 providers. They are supposed to be submitting profit  
17 loss statements to us for the first six months and  
18 projecting forward for the next month... couple of  
19 months.... And to look at what specifically the needs  
20 are. And, again, trying to pinpoint, again, the gap  
21 in terms of cost, inflationary costs, driver costs.  
22 So, we are looking at HDM first. As the commissioner  
23 mentioned earlier, we are looking at OACs later,  
24 because, again, because of the low participation  
25 rate, there hasn't been a big influx of requests to

cover inflationary costs. So, again... But, HDM, that is actually on our radar right now.

COMMISSIONER CORTÉS-VÁZQUEZ: The other thing that we have been looking to address and to mitigate some of these costs, is to.... how can we use our scale? Right? Our purchasing power as a group, uh, to influence prices? And, so we have a work group of providers just looking at that. It is not group purchasing in a traditional sense, but if we could just influence the market prices, because of our scale, in one or two or three commodities, that would make a big difference also.

CHAIRPERSON HUDSON: Is there a possibility of a midyear increase for FY23 at this point to address these needs?

COMMISSIONER CORTÉS-VÁZQUEZ: I think one the... The review that we are looking at, HDM, is something that is seriously being considered.

CHAIRPERSON HUDSON: Okay.

COMMISSIONER CORTÉS-VÁZQUEZ: But, we do not have a definitive answer.

CHAIRPERSON HUDSON: But you don't have what?

COMMISSIONER CORTÉS-VÁZQUEZ: But, we do not have a definitive answer.

CHAIRPERSON HUDSON: Okay.

Recruitment and retention issues are challenging for the aging services workforce, which we have sort of been talking about, due in large part to low salaries that stem from poorly funded contracts. Advocates are calling for a 6.5% cost of living adjustment for human services workers, does NYC Aging agree that we need additional funding to support the workforce?

COMMISSIONER CORTÉS-VÁZQUEZ: We have always known that our workforce in the geriatric arena has been underfunded. Which is... The steps that we took to increase salaries with you, in terms of the OACs and bringing salaries at market rate for kitchen staff and food preparation staff, as well as for the case managers. So, it is something that we have always had... hold as a high value, which is fair wages for the work that they have done. And we are constantly looking at that.

CHAIRPERSON HUDSON: And we addressed this a little bit earlier as well, but what is NYC Aging doing to assist providers with hiring especially for



staff who speak multiple languages? Is there any type of support that you are providing?

COMMISSIONER CORTÉS-VÁZQUEZ: Other than the encouragement and the support that cultural competency is key tenet of all of our programs. And that... We advertise as much as we possibly can in multiple languages. I don't... I think that the provider is ,you know, has a [INAUDIBLE] structure to... to really look at some of those local issues for themselves. But, as a broad mandate, yes, we do everything that we advertise, and in every one of our public positions is the importance of cultural competency.

COMMITTEE COUNSEL: Okay. And, I don't know, maybe this is more specifically for Jose, but we understand program officers are citing providers in their audits when they have a staff vacancy for three or more months, but these positions are very difficult to full due to low salaries that are available via contracts. These citations can hurt a provider the next time there is an RFP and they have to reapply. Can you explain this discrepancy and change the policy?

COMMISSIONER CORTÉS-VÁZQUEZ: That comes into play... First of all, program officers may point out where there is a deficiency, and it is all part of an assessment process. That... Staff vacancies are important to us, particularly in geriatric mental health and in case management, because those staff vacancies mean that services cannot be provided. So, it has a direct impact on services. And, so, that is where the program officer... And, I don't believe... I will look into that, but I don't believe that they citing them. I think they probably call it to their attention and make sure that they need to press... Particularly if they are underserving individuals in case management services. So, I think there is a strong correlation between the vacancy and the service delivery. So, we will look at... And, I will look at the process, but I don't think that it is a practice that is unfair or over... heavy handed, because it is... It has a direct impact on services. Those are client facing positions.

CHAIRPERSON HUDSON: Okay, thank you.

And, apologies for jumping around a little bit here. Other questions are coming up as you're speaking.

So, uh, I wanted to share that is estimated that 73% of New Yorkers living with HIV will be over the age of 50 by 2030. New Yorkers over 50 were 17% of new HIV cases in 2020. Advances in medicine and the aging of our general population explain why this population is growing so fast. This is the first generation of long term HIV/AIDS survivors. How is the City supporting the unique needs of the growing population of older New Yorkers with HIV? Is there a plan to expand or promote sexual health programming at OACs?

COMMISSIONER CORTÉS-VÁZQUEZ: Yes. I...

CHAIRPERSON HUDSON: Yes, there is a plan?

COMMISSIONER CORTÉS-VÁZQUEZ: No, there is not a plan right now. And, yes, there will be a plan. And those numbers are a little alarming.

CHAIRPERSON HUDSON: Yes.

COMMISSIONER CORTÉS-VÁZQUEZ: Okay, so, I think we owe it... Part of our programming in OAC, there has always been some information around safe sexual practices. But that is something that you have just... We will definitely start looking at it in a more earnest way.

CHAIRPERSON HUDSON: okay, and we can follow up and send you more details if that is helpful.

COMMISSIONER CORTÉS-VÁZQUEZ: Sure. Yeah. I would welcome those numbers, because... And we work with... I am surprised... We will work with SAGE to make sure that we can come up with a remedy for this.

CHAIRPERSON HUDSON: Okay. Great.

Uhm, older adult service providers often have great challenges in achieving timely registered contracts, does NYC Aging have enough budget procurement and contracting staff to ensure timely registration of contracts?

MR. MERCADO: Yes.

CHAIRPERSON HUDSON: Okay, can NYC Aging provide the range and average number of months it takes discretionary award contracts to be registered?

MR. MERCADO: We can... Yes, we can provide that information... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: We can provide... (CROSS-TALK)

CHAIRPERSON HUDSON: Follow up? Okay. And will you commit to working with us to benchmark the average time between council award designation,

registration, and reimbursement, and to help reduce it?

COMMISSIONER CORTÉS-VÁZQUEZ: Yes.

CHAIRPERSON HUDSON: And, how does NYC Aging manage payments to its RFP awarded providers?

COMMISSIONER CORTÉS-VÁZQUEZ: We give them three months. Go ahead... (CROSS-TALK)

MR. MERCADO: Well, yeah, I mean, that... I mean, in the beginning of the fiscal year, there is always a three month advance. And, then, on top that, they are submitting their invoices for July and August. So, technically, by six months... Or more than that, they have eight months' worth of cash out there.

COMMISSIONER CORTÉS-VÁZQUEZ: Which is why on-time invoicing is so important to us.

CHAIRPERSON HUDSON: NYC Aging's... I am moving into capital

NYC Aging's capital budget is one of the smallest in the City, representing less than 1% of the City's total Preliminary Capital Commitment Plan for Fiscal 2023 through 2027. Do you expect new capital appropriations to be added in Fiscal Year 2023 and 2024 by adoption?

MR. MERCADO: I don't know. I don't know.

COMMISSIONER CORTÉS-VÁZQUEZ: We are not aware.

MR. MERCADO: Yeah.

CHAIRPERSON HUDSON: Okay, and how many new older adults centers will be opened or built in the next four years? I know you mentioned in your testimony about going to a few ribbon cuttings?

COMMISSIONER CORTÉS-VÁZQUEZ: Right, I will get back to you with those numbers.

CHAIRPERSON HUDSON: Okay.

By what process does NYC Aging prioritize capital needs requests to OMB?

MR. MERCADO: I will get back to you.

CHAIRPERSON HUDSON: Okay, who gets to decided which projects are funded?

MR. MERCADO: Well, in most cases... I mean, like you said, we are a small agency, most of our capital budget is not controlled by us. Most money that we get, comes through the Council, so in terms of prioritizing, what we normally do is look at the specific needs of the areas that we have, and then go on that. So, a good example would be, we are currently now replacing our Star System, which is basically our case management system for each senior.

That was a big priority for us. So, that was a priority, so we focused on that.

COMMISSIONER CORTÉS-VÁZQUEZ: That is the client system.

MR. MERCADO: Right.

COMMISSIONER CORTÉS-VÁZQUEZ: The other thing is that many of our construction projects are either managed through EDC or through another agency. And, so, it... Our job is to constantly negotiate with them to keep those projects on target. Some of those projects have been somewhat delayed.

MR. MERCADO: As we [INAUDIBLE]... (CROSS-TALK)

COMMISSIONER CORTÉS-VÁZQUEZ: The design [INAUDIBLE]... (CROSS-TALK)

MR. MERCADO: Because we have a conversation with the Council, we don't control the budget, I mean, in terms of... We don't do any construction at all. Again, as the money comes in, we identify the agencies who is supposed to be responsible, whether it is HPD, EDC, DDC, and those are the ones that manage those projects for us.

COMMISSIONER CORTÉS-VÁZQUEZ: We do have a unit that is responsible for the upgrades and repairs in existing sites.

CHAIRPERSON HUDSON: And, what... I guess, are there criteria for choosing projects? You kind of talked about that a little bit, but...

MR. MERCADO: Well, I think, for example, we tend to... As the commissioner mentioned, we have a unit that goes out and looks at all of the conditions of each site that we have a contract with to determine which ones are in good condition and which ones are not. Then we prioritize using whether we have capital money or [INAUDIBLE] funds to kind of move forward with those projects.

CHAIRPERSON HUDSON: Are there any projects in the pipeline from these funds not reelected in the current plan that you can tell us about?

COMMISSIONER CORTÉS-VÁZQUEZ: There has been a longstanding project, and I will get back to you on the details, with Carter Burden, which is a renovation of their facility and the... I believe either the installation of either the elevator or improvement of the elevator, for their site in East Harlem. But, I can get back to you with those details.

CHAIRPERSON HUDSON: Okay.



And, budget line distribution of new appropriations demonstrates where the agency estimates it will sign contracts next year. Do these new capital additions have adequate expense funding to operate?

MR. MERCADO: We will get back to you.

COMMISSIONER CORTÉS-VÁZQUEZ: Yeah.

CHAIRPERSON HUDSON: Okay.

And your preliminary committee plan for fiscal year 2023 through 2027, is 76% or \$34.6 million more than the adopted capital commitment plan. What is included in the increase?

MR. MERCADO: I will get back to you on that one.

CHAIRPERSON HUDSON: And, there is... Is there a \$33 million allocation for a relocation of your headquarters? Of NYC Aging's headquarters?

COMMISSIONER CORTÉS-VÁZQUEZ: We believe that it is \$38 million.

MR. MERCADO: Yes.

COMMISSIONER CORTÉS-VÁZQUEZ: And we are hoping that by June... (CROSS-TALK)

CHAIRPERSON HUDSON: This June?

COMMISSIONER CORTÉS-VÁZQUEZ: Sign a lease by this June, and you can come visit us in... (CROSS-TALK)

CHAIRPERSON HUDSON: June of 2023?

COMMISSIONER CORTÉS-VÁZQUEZ: August.

CHAIRPERSON HUDSON: Okay.

What is the rationale behind your headquarters relocation?

COMMISSIONER CORTÉS-VÁZQUEZ: We are in a very... First of all, we have outgrown our space. And our space... into Lafayette, which I believe that the City is looking at for a total renovation.

CHAIRPERSON HUDSON: And has OMB instructed you to push projects further out in the capital plan?

COMMISSIONER CORTÉS-VÁZQUEZ: Not to my knowledge... (CROSS-TALK)

MR. MERCADO: Yes... (CROSS-TALK)

CHAIRPERSON HUDSON: If, so, why?

MR. MERCADO: I mean, we have specific capital targets. We can give you the backup to that information.

CHAIRPERSON HUDSON: Okay.

Sorry, give me just one moment, please.

COMMISSIONER CORTÉS-VÁZQUEZ: Sure.

CHAIRPERSON HUDSON: Okay, sorry about that, thank you.

There are an estimated 900,000 to 1.3 million unpaid caregivers in New York City, and the majority of caregivers are women, and at least 50 years old, which you referred to earlier. Respite care is found to be one of the areas with the highest level of unmet needs. At least one in four needs respite, but does not receive it.

What are NYC Aging's performance goals for its caregiving program in fiscal years 2023 and 2024?

COMMISSIONER CORTÉS-VÁZQUEZ: Our performance goals far exceed our performance goals. And I can get you exactly what those numbers are for our caregiving. But, respite is part of our plan and has always been part of our caregiving plan. But, as I said, caregiving is one of those areas that is going to increase tremendously. Part of that is a very essential education and outreach campaign. Most people do not think of themselves as caregivers. You just think of yourself as the daughter or the daughter, and, so, it is to let people know that they're caregivers, that there are services out there for them. But, it is a growing, growing, growing issue for us.

CHAIRPERSON HUDSON: Is there additional funding for respite care?

COMMISSIONER CORTÉS-VÁZQUEZ: It is part of our strategic priorities with the City.

CHAIRPERSON HUDSON: Is there a specific amount that you can share?

COMMISSIONER CORTÉS-VÁZQUEZ: No, those negotiations have not started.

CHAIRPERSON HUDSON: Okay.

Most unpaid caregivers do not have information about available services, as you mentioned, what is your plan to reach these people and provide information?

COMMISSIONER CORTÉS-VÁZQUEZ: Part of the plan to recognize caregiving as a strategic priority, is educating the public. It is basically letting people know, one, that they are caregivers, and, two, then one of the services that are available to them, and, then, how they can access those.

CHAIRPERSON HUDSON: Great.

The PMMR represented improved indicators for home delivered meals, home care, and case management. Thank you for working hard to make that happen.

The most recent census shows that the HDMS waitlist has been cleared, while 259 awaiting home care and 1,736 awaiting a full case management assessment.

What are these figures now if you have them?

COMMISSIONER CORTÉS-VÁZQUEZ: Yeah, home care is a challenge. The issue with home care is usually not new clients, as much as it is additional hours for individuals. And I can get you what those numbers are at this time and point.

And the same thing with the case management waitlist. As you know, Danial Kroop is not here, but we have a different definition of waitlist, but we have aligned with his. Which is, once someone gets assessed, if they have immediate needs, those immediate needs are tended to. And the immediate need would be food insecurity. And so, they will get home delivered meals while the rest of the assessment goes on. But, I will get you what those numbers are at this point and time. But, again, that ties back to the earlier conversation we had about staff vacancies. You know, most of our programs are operating at about 89 and above percent, and... when you talk about the ratio to worker to client. But,

1  
2 if you look at those that have consistent staff  
3 vacancies, that drops precipitously, which also  
4 contributes to the waitlist issue.

5 CHAIRPERSON HUDSON: And, so, how much would it  
6 cost to clear those waitlists for home care and case  
7 management services?

8 COMMISSIONER CORTÉS-VÁZQUEZ: We will get back to  
9 you on that. It is something that we... You have  
10 been a longstanding partner with us on.

11 CHAIRPERSON HUDSON: Okay.

12 Uh, so, we are just continuing on the same vein  
13 case management, we know that it is overburdened, and  
14 there have been many budget additions and cuts over  
15 the last year, including a \$4.3 million PEG to case  
16 management services in the November 2022 budget  
17 modification. How does this relate to the request  
18 for a proposal for case management programs? And  
19 what is NYC Aging doing to clear case management  
20 backlogs?

21 COMMISSIONER CORTÉS-VÁZQUEZ: You'll do the budget  
22 part, I'll do the backlog.

23 MR. MERCADO: So, the \$4.3 million was actually...  
24 You know, we realized that there was a big delay in  
25 contracting out, so that was the surplus to that.

But, it does not affect the RFP going out. So, there was a \$3 million... (CROSS-TALK)

CHAIRPERSON HUDSON: But, sorry, you are saying the \$4.3 million was... (CROSS-TALK)

MR. MERCADO: To... \$3 million was case management, and then there was an actual ,you know, case management... And, another \$1.3. So, both of those two numbers: \$3 million and \$1.3 if I remember correctly, uh, case management, both of them are... We realized that it would take forever... Not forever... It would take us awhile to amend the contracts. And, so, that is the surplus that we got for FY23.

But, it does not affect the RFP going forward.

CHAIRPERSON HUDSON: Okay, thank you.

And case management agencies have seen an estimated \$250,000 to \$750,000 shortfall in the case management request for proposal as a result for the proposed case management to case load ratio and reimbursement rates. How is NYC Aging working with case management agencies to address this?

COMMISSIONER CORTÉS-VÁZQUEZ: We are looking at that information that we received yesterday also. We don't know where those numbers are coming from. But,

as through the RFP process, we have had very, very extensive conversations, and had people out, had opportunities to raise those issues. Uh, we will look at that, but I am not quite clear how those numbers have been arrived at -- at all.

CHAIRPERSON HUDSON: Okay, thank you.

Those were all of my questions, so, thank you very much. We appreciate your time, insights, and partnership in all of this. And we look forward to all of the follow up.

COMMISSIONER CORTÉS-VÁZQUEZ: And I really want to thank you for your advocacy. And I want to thank you for your partnership -- you and the committee. I know that any advancements we have made are because of you and the committee's support. So, thank you for that.

CHAIRPERSON HUDSON: Thank you. Thank you all, take care. And, I think we will take a quick break before public testimony.

Okay, thank you for everyone's patience. We are going to resume the hearing with public testimony. And I am going to turn it over to our committee counsel.



COMMITTEE COUNSEL: Good morning, everyone. So, if you have not filled out an appearance card, and you wish to testify in person, please fill out an appearance card now.

And, just noting for everyone, that you will be able to submit written testimony up to 72 hours after the close of this hearing. So, please help us do that. We read all of the testimony very carefully, so, thank you.

So, we are going to be doing a mix here of panels. Our first panel is going to be a hybrid panel, and, then, we will move to an in-person panel after that.

So, our first hybrid panel will be James O'Neal (sp?), Josh Bentley, and Greg Morris.

And, then, the in-person panel will be Lisa Armogan, if you can please come up. I'm sorry if I mispronounce any names.

And, so, we can start with Lisa, since Lisa is in person, and then we will go to our virtual panelists.

LISA ARMOGAN: Hello, good morning, it is still morning, I believe. My name is Lisa Armogan, I am Vice President at New York Foundation for Senior Citizens. Thank you, Chair Hudson, and to each Aging

Committee Member for the support you have provided for our Fiscal Year 2022-2023 Home Sharing and Respite Care Program. On behalf of the board of directors of New York Foundation for Senior Citizens, we are requesting and would be deeply appreciative of an allocation from each of your individual and borough delegation discretionary funds, plus you support for the provision of a minimum of \$200,000 from the Speaker's citywide fund within the City's 2023-2024 budget to ensure the continuation of our citywide home sharing and respite care program throughout the next fiscal year.

Our free, home sharing service matches adult hosts, who have extra space in their apartments or their houses, to share with responsible, compatible guests in need of affordable housing -- one of the match mates must be age 60 or over.

Over the past four decades, we have successfully matched over 2,500 persons in 1,250 shared living arrangements.

Our respite care program provides affordable, short-term, in-home attendant care at the low cost of \$17.00 per hour for older adults who are attempting to manage at home, with the help of others, thereby

preventing the need for their premature institutionalization. The program's respite care service also provides free temporary in-home care for functionally impaired older adult caregivers who experience a sudden inability to provide care.

Over the past four decades, we have provided over 10,000 older adults and many more thousands of their caregivers with respite care services. Our program's home sharing and respite care services are the only ones of their type in New York City. And they help older adults of all ethnic, racial, religious, income backgrounds, and the LGBTQ+ populations.

Cumulative findings from our cost benefit analysis over the past 12 years have demonstrated that between October 1, 2010 and June 30, 2022, New York City provided our home sharing and respite care program with a total of \$7,320,534.00. In turn, the program saved the City \$24,757,191.38 in Medicaid [TIMER CHIMES] and other expenses by preserving and providing affordable housing as well as affordable in-home respite care services; thereby, preventing homelessness and preventing institutionalization. We believe our program is also cost effective and responsive to the City's older adults' housing

problem, as it prevents institutionalization in nursing homes, in homeless shelters by enabling our hosts to afford to maintain and remain in their homes, and our guests to obtain affordable housing. To build an apartment costs the City \$300,000 to \$400,000. To maintain one homeless individual in our shelter costs the City over \$34,000 per year; therefore, on behalf of New York Foundation for Senior Citizens Board of Directors, I urge you to provide allocations from each of your individual and borough delegation discretionary funds, plus support for the provision of a minimum of \$200,000 from The Speaker's citywide fund towards this program. By doing so, you will afford the foundation's home sharing and respite care program the ability to continue to provide its desperately needed services that prevent homelessness and institutionalization while ensuring essential savings in Medicaid expenses for New York City and New York State throughout the Fiscal Year 2023-2024.

Thank you for your support. Thank you so much.

CHAIRPERSON HUDSON: Thank you.

COMMITTEE COUNSEL: Thank you very much.

We will be moving onto James O'Neal. Please wait for the Sergeant At Arms to call time before you begin your testimony. You will have three minutes.

SERGEANT AT ARMS: Starting time.

JAMES O'NEAL: Good afternoon, Chair Hudson and members of the City Council Committee on Aging.

My name is James O'Neal, and I am the Volunteer State President of AARP New York, which has 750,000 members in New York City. Thank you for the opportunity to testify. And, thank you, Chair Hudson, for your hashtag #AgeInPlaceNYC legislative package as well as for your support of older adults.

Older adults represent New York's fastest growing demographic. According to a new report from the Center for an Urban Future, New York's 65 and older population grew by 31%. In New York City every borough's 65+ population increased. Even more concerning, the number of older New Yorkers living below the poverty line increased by 37.4% over the past decade.

Despite the new demographic reality, the City is not prioritizing the basic needs of our older adults. NYC Aging receives less than 1% of a city budget.

And, now, the mayor proposes cutting even that small amount by \$25 million.

In the mayor's proposed budget, the City does not provide equitable funding to meet the demand for essential aging services. Our first priority is to increase investment in nonprofits and to provide essential services for older adults including human service providers. One of the key challenges providers face in meeting demands for service is a worker shortage. It is not unusual for organizations to have 20% and even 50% staffing shortages in their programs. That is why we are calling on the City to provide human service workers a 6.5% cost of living adjustment increase.

Our next priority is combatting hunger and food insecurity. We are advocating for \$38.4 million to combat older adult hunger. This increased investment in home delivered meals is needed to meet the rising costs and demand.

The last priority I would like to mention today is affordable housing. A lack of affordable housing is the biggest concern for more than half of the City's voters aged 50+. To help older adults age in their own communities, we are asking the City to

increase the reimbursement rate for senior affordable rental apartments and to allocate capital funding to develop 1,000 units of affordable senior housing per year.

Older adults build this city and made it great. The over 1.8 million older adults living in New York City deserve better.

Thank you.

CHAIRPERSON HUDSON: Thank you very much.

COMMITTEE COUNSEL: Okay, thank you.

We will actually now be going onto an in-person panel.

I would like to call up Tara Klein, Dr. Cynthia Maurer, Jeremy Kaplan, and Juan Carlos Salinas.

Tara, we can start with you and then move down the table, and you will each have three minutes for your testimony.

DEPUTY DIRECTOR KLEIN: Great, thank you.

So, thank you for convening today's Preliminary Budget hearing, Chair Hudson.

My name is Tara Klein, and I am Deputy Director of Policy and Advocacy for United Neighborhood Houses. UNH is a policy and social change organization that represents 40 neighborhood

1  
2 settlement houses in New York City. We reach New  
3 Yorkers from all walks of life, all ages. Our  
4 members run aging programs including older adult  
5 centers, NORCS, home delivered meals programs,  
6 geriatric mental health, case management, and much  
7 more.

8       So, we are very concerned this year about a  
9 number of budgetary issues that are quickly reaching  
10 crisis levels and need intervention from the City.  
11 These include record-high levels of inflation without  
12 adequate contract amendments to match, growing  
13 challenges with recruitment and retention of staff  
14 due to low wages, rising demand for service -  
15 including from the growing number of older adults in  
16 New York City -- and growing capital and  
17 infrastructure needs.

18       We know that NYC Aging continues to receive one  
19 of the smallest agency budgets in the City despite  
20 growing needs, and the agency suffers from years of  
21 systemic underinvestment. We welcome the Council's  
22 advocacy and support of our FY 2024 Budget priorities  
23 and alleviating some of these concerns.

24

25



1  
2       So, I am just going to quickly summarize some of  
3 our budget requests this year. There is much more  
4 information in my written testimony.

5       First, and foremost, we need to invest in the  
6 human services workforce. Recruitment and retention  
7 are at crisis levels, again. And that is due to  
8 those low salaries that are in those contracts. And,  
9 so, we support calls for 6.5% cost of living  
10 adjustment.

11       We also know that this a bigger challenge. We  
12 can't just do a small COLA each year and call it a  
13 day. We need to include cost escalators in contracts  
14 regularly. We should look at bigger solutions such  
15 as a prevailing wage schedule -- looking at minimum  
16 wage increases.

17       We also need to support providers who are hiring  
18 multi-lingual and immigrant staff in some unique  
19 ways.

20       Our next big priority, we just heard from AARP as  
21 well, is around combatting older adult hunger. We  
22 know that hunger is at very high levels in New York  
23 City. According to recently released census data,  
24 between December 2022 and February 2023, 21% of older  
25 adults in the New York City metropolitan area, who

Addressing this, for DFTA, this really starts with making sure the providers can afford to run programs and can afford to run high quality programs. So, this year, that is going to mean looking at the home delivered meals program where we are proposing a \$14 million increase to cover inflation costs, as well as looking at waitlists and weekend and holiday meals. And for older adult centers, that is going to look like \$46.3 million just to cover inflation costs and rising costs.

And, then, finally, we have a number of requests for discretionary funding. We are hoping that discretionary pot can grow this year. We are

specifically looking at the Support Our Seniors Initiative.

So, with that, I will wrap up, and just say thank you so much for your time.

CHAIRPERSON HUDSON: Thank you for your testimony.

DR. CYNTHIA MAURER: Hello, and thank you for this opportunity to speak with you.

My name is Cynthia Maurer; I am with Visiting Neighbors. We are basically all about keeping seniors independent, active, connected to other people, and keeping them from being a lot less lonely and feeling alone and isolated. And the pandemic really exacerbated that. We have programs of friendly visiting, where volunteers will go in, they're matched based on interest, hobbies -- though sometimes opposites attract -- and we bring people together so that they are not feeling so alone.

Sadness is one of things that has really come out of the pandemic at an increasingly alarming rate, which has led to a lot of depression and despair. We are trying to combat this in the best way we know how. And that is through the companionship of someone else. And it is amazing what the difference would make just to have somebody with you --

connected with you -- and feeling like you are important and that you matter.

We also provide shopping escorts, which is an enormous help for seniors who really had no way to get their errands and shopping taken care of. We will go for or with -- on days like this, we will go for -- but we are there to be able to get them access to important food and supplies.

When they go into a hospital we want people to know that someone is watching. And, in the medical staff world, you need to have an advocate. If you cannot advocate for yourself, you had better have one. And we are there to be a support and advocate for our clients.

We also help with everything from going to the library, picking up books, believe or not, people still do that! -- And, then, going to banks and errands and even visiting somebody's gravesite. Going to do a hairdresser appointment, people say, well, that's a nicety, well, if you have chemo, and you have lost all of your hair, and the appointment is to go from one borough to another, which we do, and then you have somebody going to get a wig, that is a big deal. It is also about the emotional ride

1  
2 to this, too. The volunteers that we work with are  
3 basically there to be emotionally supportive, as well  
4 as physically supportive.

5 We also have our telephone reassurance, health  
6 advocacy, student nursing, and wellness. We  
7 basically give all kinds of information that we get  
8 from professionals to be able to share, because  
9 knowledge is power.

10 And, out of the pandemic came another need, which  
11 we addressed and we responded to immediately, which  
12 is the need to get out of the house for a safe walk  
13 and not be run over by somebody who was on a bicycle,  
14 or someone not paying attention on their cell phones.  
15 We have students who actually look around and say,  
16 "Look, notice how many people are crossing the street  
17 on their cell phones!"

18 The seniors that we work with are age 60 to 105.  
19 We lost our 106 and 107-year-olds last year, but they  
20 died peacefully at home, which is the way, if we are  
21 all lucky, we get to be.

22 We are also there for caregiver support. We are  
23 there to be there for that overwhelmed [TIMER CHIMES]  
24 person who needs that additional support.  
25

We know you are our heroes. We know you get it. You have really kept us -- enabled us -- to be the little engine that could, would, did, and continuing to do, but we need your support to do it. Your funds kept our doors open. We were here throughout the pandemic, working in our offices, doing direct services, and we took on more clients... And also, were there for those people who just needed a supportive arm. And, so, we got people out, and we engaged young people in these walking programs. Because we want the younger generation to understand that seniors are not scary, that there is a connection that can be made. And what is wonderful is that the young people are learning skills from the seniors. And, the seniors, which took a huge hit, uh, of their ego during the pandemic, this also helps them so they feel like, I am not just taking, I am giving, too... And remembering special occasions. I gave you a sample, because you are going to say, "What is that?," of just a card that one of the youngsters did for Valentines Day. And, it is a little thing, but it is a huge thing, because it makes people smile. And that is what we are here to do, to try to make life a little nicer, and to help

1 deal with the sadness, the loneliness, the isolation,  
2 but also getting the needs done. Our student nurses  
3 do home checks; they are there to do blood pressure  
4 screenings, and we have prevented so many crises from  
5 happening, and that is a huge thing.

6 Thank you so much, and we need you! And the  
7 seniors need us. So, we ask for you to continue your  
8 support, and we are so grateful. We are grateful for  
9 our council. We love you guys. Like I said, you're  
10 our heroes. You keep our doors open. Thank you.

11 CHAIRPERSON HUDSON: Thank you so much. Thank  
12 you. Thank you for your testimony.

13 EXECUTIVE DIRECTOR KAPLAN: Good afternoon, Chair  
14 Hudson, and thank you for the opportunity to testify  
15 today, and thank you so much for all you do to  
16 advocate for older New Yorkers and for the nonprofit  
17 providers who do everything we can do to serve them.

18 My name is Jeremy Kaplan, and I am the Executive  
19 Director of Encore Community Services. Encore is a  
20 nonprofit organization that provides lifesaving  
21 nutritious meals to older adults on Manhattan's West  
22 Side. We serve hundreds of thousands of meals to  
23 older adults at our centers and through the Home  
24 Delivered Meals Program. During the COVID emergency,  
25

Encore stepped up and ran the recovery meals program across three boroughs.

Home delivered meal recipients are older adults who cannot leave their homes. They are often immunocompromised, they live on fixed incomes, and they are isolated. And every single one of these individuals deserve to have food to eat.

At Encore Community Services, we believe that every older adult should be well nourished and connected to community, so that they may age in place with dignity for as long as possible.

Unfortunately, our ability to deliver on this mission for an Encore for life, is hampered by the cumulative effects of years of under investment in aging services. And I am here today, Chair, to raise the alarm about the severe systemic risks to services for the aging. The sector's nonprofits are approaching a crisis, and some may even struggle with solvency if things do not change immediately.

Our population is aging rapidly already placing a strain on limited organizational recourses. At the same time, functional cuts to the NYC Aging services are taking a further toll on our operations.



We have seen the fastest and highest period of price increases in a generation and are being asked to do substantially more with substantially less. Operational costs have skyrocketed, including up to 90% increase in the cost of providing home delivered meals -- and up to 20% increase in the cost of providing meals at our older adult centers. Yet the rate of reimbursement increases that we have seen this year don't even meet the minimum that we requested two years ago. Additionally, it has become immanently unsustainable to provide weekend meals. But, we continue to do so, because our clients often rely on us as their *only* source of food. To give you a sense of how dire the circumstances are, Encore Community Services has already maxed out our annual budget for meals. And we are one of the largest home delivered meal providers in the City. And, I know that we are not alone with that struggle. We urgently need the reimbursement rates to increase right now -- retroactively -- and to continue into Fiscal Year 2024.

Champions like Commissioner Cortés-Vázquez [TIMER CHIMES] have worked minor miracles... (CROSS-TALK)

SERGEANT AT ARMS: Time expired.

EXECUTIVE DIRECTOR KAPLAN: The commissioner has worked minor miracles in years past to support nonprofits like Encore to serve old New Yorkers. But, we need a renewed investment. Minor miracles won't do it anymore. We urge the Council and the administration to step in. We need New York City to truly make a long term investment in older adults. Thank you for your time.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Juan Carlos?

MR. JUAN CARLOS SALINAS: Thank you, Chair Hudson, so much for having us today.

My name is Juan Carlos Salinas, and I am the Director of Education at Jamaica Center for Arts and Learning.

I am here today to advocate for the Su Casa Program. Since the inception of the Su Casa Program, JCAL has established itself as a leading provider of artistic services for seniors throughout the entire borough of Queens.

Whether it is finding their inner actor, dancer, musician, or creating visual art pieces that capture the legacy of their lives, our seniors, no matter

1  
2 their level of experience, develop and embrace their  
3 artistic powers. I have seen firsthand when a senior  
4 gets up from their chair and dances to the rhythm of  
5 Celia Cruz's la Vida es un Carnaval. I have seen our  
6 seniors belt at the top of their lungs as they sing  
7 in harmony Let the Sunshine In. I have also had the  
8 privilege of seeing our seniors create pieces of  
9 visual art based on their life story, because they  
10 want a testament to the journey on this earth that  
11 will last forever. Sometimes it is as simple as  
12 creating a piece of jewelry that a senior will gift  
13 to their grandchildren.

14 Through our innovative program, Creative Aging,  
15 Life Through the Arts, seniors invigorate their  
16 physical and mental well-being with a routine of fine  
17 arts practices.

18 These programs are only possible with the general  
19 support of the City Council. On behalf of JCAL, the  
20 JCAL family, and our ten senior center partners, we  
21 want to thank you for your generous support, and as  
22 we just learned, as we just heard on Sunday, no one  
23 is ever past their prime.

24 The cultural community respectfully requests that  
25 the \$40 million added at adoption and Fiscal Year

2023, be restored and baselined. We request an additional \$10 million to be split evenly between the CIGs and our program [INAUDIBLE] partners to help create more sustainable stability and equity within the sector.

Finally, we ask for a full restoration of all cultural council initiatives. Thank you, Council Member Hudson.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Thank you very much to this panel.

At this time, we are going to be moving to a virtual panel. We are going to be hearing from Farhana Hussain, Ravi Reddi, and Jeanette Estima.

As a reminder, for those testifying virtually, please wait for the Sergeant At Arms to call time before you begin your testimony. You will each have three minutes.

We will start with Farhana Hussain, please.

SERGEANT AT ARMS: Starting time.

MS. FARHANA HUSSAIN: Good afternoon to the Committee on Aging, Chair Hudson, Council Members, staff, and all who are present at today's hearing. I

am speaking on behalf of India Home, a Queens-based nonprofit dedicated to serving vulnerable South Asian and Indo-Caribbean immigrant older adults across New York City.

Since 2007, we have touched the lives of over 5,000 older adults through our culturally competent programs such as congregate meals program, creative aging, and education services, case management, mental health services, and advocacy opportunities.

Over the past two years accessible transportation has been one of the highest priority needs of our seniors. Since August 2022, we have primarily relied upon DFTA's Access-A-Ride paratransit services to meet the transportation needs of our clients. While accessing this service is relatively easy, many elders in our community have a challenging time navigating the Access-A-Ride booking processes and policies on their own where they sometimes experience poor quality service.

One of our seniors for example, was once recently prevented from boarding her Access-A-Ride trip because she arrived three minutes later than the scheduled time and was recorded as a no-show even though there is minimum five minute wait time for

passengers to board the vehicle. She ended up missing her doctor's appointment that day and had to wait until a few weeks later for a new appointment.

Another major need of our seniors is access to greater food security and nutrition. In 2022, we provided over 7,900 halal and vegetarian home delivered meals and over 7,400 congregate meals.

Our culturally tailored food program is highly utilized among the seniors we serve, helping many to have the daily nourishment and nutrition intake they need in order to stay healthy. Funding culturally competent congregate and home delivered meals programs, such as the one at India Home. It helps to supplement the food needs of many elders in the communities that we serve especially those who are homebound, unable to pay for rising food costs, or arrived within five years or less in the country and are not eligible for SNAP benefits yet.

And, uh, additionally, we have also seen a greater need for more emotional and wellness tech support services and one on one counseling sessions amongst South Asian older adults, especially among women from this community. For many of these women, India Home is the only safe space where they can open

up and speak comfortably in a culturally and linguistically competent setting with our trusted staff. We have several such seniors who visit our centers daily for the support actually, and because they are lonely and they feel socially isolated in their own homes.

This past year, we have established two new older adult centers, one in Flushing and another at Woodside, Queens. With a total of six older adult centers running now, we need more funding to be able to sustain and stabilize the future of South Asian older adults.

We ask The Committee on Aging to support increased funding for more efficient and better transportation options of funding to help us expand our case management services to meet the [TIMER CHIMES] growing needs for transportation [INAUDIBLE] ... (CROSS-TALK)

SERGEANT AT ARMS: Time expired, thank you

MS. FARHANA HUSSAIN: We also request adequate funding to be allocated for the expansion of culturally competent Halal and vegetarian meal programs, emotional wellness -- as I mentioned before-- and creative aging services.

And, I also want to share that India Home is a proud member of the Asian American Federation Senior Working Group, the first and only Asian senior-focused advocacy coalition, as well as the Coalition for Asian-American and Children's Families "18% and Growing Campaign". This is a diverse coalition bringing together over 98 over 90 AAPI-led and serving organizations across New York City to fight for a fair and equitable budget that protects the needs of our most vulnerable community members.

As part of both of these coalitions, I want to humbly request that The Committee on Aging please allocate adequate funding proportionate to serve our diverse community's expansive growth and needs.

Thank you for your support and consideration.

CHAIRPERSON HUDSON: Thank you for your testimony.

COMMITTEE COUNSEL: Thank you very much.

Moving on to Ravi Reddi. You will have three minutes. Please wait for the Sergeant At Arms to call time before you begin your testimony.

ASSOCIATE DIRECTOR REDDI: Thank you so much.

I want to thank Chair Hudson and the Council Members of the Aging Committee for holding this hearing and giving the Asian American Federation



(AAF) the opportunity to testify on the needs of our older adult community. I am Ravi Reddi, Associate Director of Advocacy and Policy at The Asian American Federation, where we proudly represent the collective voice of more than 70 member nonprofits serving 1.5 million Asian New Yorkers.

Going into FY 2024, as you have already heard, older adults continue to face a number of challenges, from a teetering economy to continuing anti-Asian hate. We are proud that we are leading the seniors Working Group, the first and only Asian older-adult-focused advocacy coalition in New York State. A couple of our member organizations are here with us - Farhana, from India Home, who just spoke, and you will be hearing from Adiba from South Asian Council for Social Services as well -- This group served over 306,964 Asian older adults in 2022, 120,000 of whom were low-income. Asian older adults comprise 13.7% of the City's older adult population, and more than a quarter of them live in poverty. Of our older adults in poverty.

Asian older adults are heavily targeted by anti-Asian violence, and we are seeing permanent shifts in their behavior around how they interact with city and

state services, especially regarding the services provided by DFTA and that are being contracted out to our community based organizations.

Food insecurity, again as Farhana mentioned, is one of the top concerns for or Asian older adults within our Seniors Working Group, alongside anti-Asian violence, older adult centers, and mental health, all of which are connected. Culturally competent meal programs have become our older adults' lifeline, especially amid an era of increased anti-Asian violence that have left older adults understandably terrified to leave their homes. The meal programs our CBOs offer not only give them an opportunity to pick up food or eat together, but also to participate in social activities, receive assistance applying for services, and access health and mental health care.

While Asian New Yorkers comprise at least 10% of the population in more than half of City Council districts, we always highlight the fact that from Fiscal Year 2002 to 2014, the Asian American community received a mere 1.4% of the total dollar value of social service contracts through the city. That is meant to reflect a broader trend that is

currently being addressed, but it is not nearly adequate enough to respond to growth in the fastest growing community in our city.

SWG members in balancing the needs of culturally competent food, and reopening older adult centers, as the City wants, and simultaneously addressing the needs to isolated older adults, are overstretched, under staffed, and risking burnout. Signs of strain among CBO staff members are showing, and they have been showing for a while.

Throughout the pandemic, our CBOs have reported more burnout among staff who are stretched to their limits with too much work and not enough institutional support. Put simply, it just costs more to be bilingual, it just costs more to be culturally competent, and we need City contracts to reflect those additional costs.

CBO staff members are meeting our most vulnerable where they are, and ,you know, we need the City to support, reinforce, and build capacity for programming [TIMER CHIMES] by and for marginalized communities... (CROSS-TALK)

SERGEANT AT ARMS: Time has expired, thank you...  
(CROSS-TALK)

ASSOCIATE DIRECTOR REDDI: [INAUDIBLE] the recommendations really quick, if you'll permit me.

There are four recommendations:

First, Increase funding to Asian-led, Asian-serving older-adult service providers, and expand this funding to include time and expenses spent on case management and digital literacy, devices and training. Our CBOs are juggling expansion of in-person services while catering to the needs of an isolated older adult population without funding to meet the demand for both streams.

Three more:

Prioritize funding both congregate and remote services and programming, again, our CBO staff are stretched thin because of the City's focus on one but continued community demand for the other.

Our third point, uh, continue funding a network of linguistically and culturally competent food service programs that provide alternative food benefits to older-adults.

And, our last one, Expand funding to include culturally competent, in-language, and older-adult-focused non-traditional mental health service models. This includes prioritizing CBOs that have a history

of providing free or subsidized nontraditional, culturally competent services for funding opportunities.

On behalf of the Asian American Federation, thank you so much for joining us in this work. We look forward to continuing our work with you. Thank you so much for being our allies, and we look forward to continuing this conversation around how the City Council can truly show up for our communities. Thank you.

CHAIRPERSON HUDSON: Thank you so much.

COMMITTEE COUNSEL: And we are moving to the last person on this virtual panel, Jeanette Estima, you will have three minutes for your testimony. Please wait for the Sergeant At Arms to call the time before you begin your testimony.

SERGEANT AT ARMS: Starting time.

DIRECTOR ESTIMA: Hi, good afternoon, My name is Jeanette Estima, and I am the Director, Policy and Advocacy at Citymeals on Wheels. Thank you, Chair Hudson and members of the committee, for the opportunity to testify today.

Citymeals was created over 40 years ago to fill a significant gap in the City's home delivered meal

program, which provides only one meal per day, five days a week, excluding weekends and holidays. We are also a citywide emergency responder for homebound older adults.

Like many providers, we have experienced a huge growth in the need for our services over the years. This was further compounded by the COVID-19 pandemic. Citymeals was serving 18,000 older adults; today we are serving 20,000.

In addition to providing thousands more weekend and holiday meals, we must also provide thousands more of emergency meals. Those are both the meals that we pre-supply to all of the program participants to ensure that they have some food on hand whenever there is an extreme weather event, and also those that we provide in direct response during localized emergencies or citywide emergencies -- anything from a power outage or a hurricane or, of course, the pandemic.

In addition to serving more people, we are, just like everybody else, experiencing a staggering increase in our costs due to inflation.

In FY22 our food costs increased 33% and our fuel costs for nearly all of the deliveries have nearly

doubled. Maintaining our current level of service under these extraordinary circumstances is really untenable. Therefore, we respectfully request:

First, \$800,000 through the Council's Senior Centers, Programs, and Enhancements Initiative to ensure that our emergency response infrastructure is adequately funded for the future.

We are also asking that the City allocate about \$4 million in the budget allocated for Citymeals weekend and holiday meals, which are not currently covered by the City's home delivered meals program.

Finally, the entire network of human service providers that support older New Yorkers is under extreme pressure, like the pressures I have mentioned, caused by increased needs and increased costs. Moreover, the low wages that are dictated in their city contracts are not only unjust for workers, but also make it impossible to maintain the staffing levels that are needed to meet the needs. Therefore, we urge the City to establish, fund, and enforce a 6.5% cost of living adjustment for City contracted human services workers.

Thank you so much, I appreciate your time.

CHAIRPERSON HUDSON: Thank you for your testimony.

COMMITTEE COUNSEL: Thank you very much to this panel.

We are going to be moving to an in-person panel. We will be hearing from Peter Kempner, MJ Okma, and Brianna Paden-Williams.

Brianna, we can start with you, and then we will just move down the table. Just a reminder, you will each have three minutes for your testimony, thank you.

MS. PADEN-WILLIAMS: Hi, my name is Brianna Paden-Williams, I am the Communications and Policy Associate at LiveOn NY. Thank you for the opportunity to testify, and thank you to Aging Chair Hudson for holding this hearing today.

LiveOn NY's members include more than a 110 community based nonprofits, including a number who are testifying today, such as Encore Community Services, SAGE, and the New York Foundation for Senior Citizens. And, they provide core services, which allow all New Yorkers to thrive in our community as we age.

Aging services are essential with over 1.8 million older adults living in New York City. Yet,



older adults have not been prioritized by the City despite an essential human services workforce providing critical services that provide the necessary support for older adults to the aging community.

Over the past year, community based organizations have been faced with significant inflationary costs for raw food, gas, and other items coupled with the growing waitlist for aging services, but does not have the equitable funding from the City to meet the growing demand for community based services.

The lack of prioritization is evident in the proposed cuts to NYC Aging or DFTA, despite the increased demand for aging services. Rather than cuts, it is time to invest in older adults and for the City to just pay human service workers.

We offer the following investments to truly build and equitable city for all ages:

First the City must just pay all human service workers a livable and equitable wage. Poverty level governmental contracts have left human service workers severely underpaid for years. And this workforce that is comprised mainly of women and people of color have kept New York City afloat

1  
2 throughout the pandemic, yet the wages of these  
3 workers have remained stagnant despite the rising  
4 costs of living in New York City. And, so, we ask  
5 the City to fund, and establish, and enforce a 6.5%  
6 cost of living adjustment for all human services  
7 contracts.

8       Secondly, we ask for a \$64.8 million in  
9 additional funding to combat hunger among older  
10 adults. As you have heard today, that includes \$14  
11 million to address the inflation costs for home  
12 delivered meals as well as \$46 million to address the  
13 inflation costs for congregate meals at older adult  
14 centers. And, we have found in a recent study  
15 through our members and providers that they have  
16 experienced an average of a 27% increase in the cost  
17 per meal in comparison to last year in 2022. And,  
18 for some organizations, like we have heard from  
19 Encore Community Services, they have run out of food  
20 to continue to sustain the capacity of community  
21 services.

22       And, in addition to that, we also ask for \$4  
23 million to support the weekend and home delivered  
24 meals as mentioned by Citymeals on Wheels.

We also ask for \$29.4 million to address the unmet needs for older adults, and that includes investments for additional technology for programming as well as for virtual programs, as well as investments to address the case management waitlists, and to just continue to meet the growth and the demand for case management programming for all clients. This also includes investments for the home care program as well.

We also ask for [TIMER CHIMES] investments in affordable housing, and that includes investing in a 1,000 units per year with services.

And, lastly, we ask for... (CROSS-TALK)

SERGEANT AT ARMS: Time expired.

MS. PADEN-WILLIAMS: additional funding in the discretionary funding, and that includes investments for the Support Our Seniors, but as well as the restoration of all discretionary funding related to Aging. But, more information can be found in my written testimony as well as the Budget Priorities.

Thank you for the opportunity to testify today.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: MJ?

1 MJ OKMA: Good afternoon, Chair Hudson, my name is  
2 MJ Okma with SAGE. Sage has been serving LGBTQ+ and  
3 HIV affected elders for over four decades providing  
4 comprehensive social services and community building  
5 programming through a network of LGBTQ+ welcoming  
6 older adult centers across New York City -- as well  
7 as being the onsite service provider at New York  
8 State's first LGBTQ+ welcoming elder housing  
9 developments -- the Stonewall House in Brooklyn and  
10 Crotona Pride House in the Bronx.

12 SAGE also provides extensive virtual programming  
13 services for our homebound, LGBTQ+ and HIV affected  
14 older New Yorkers, and run New York's only dedicated  
15 program designed to specifically address the unique  
16 needs of LGBTQ+ older veterans.

17 There are over one million LGBTQ+ adults in New  
18 York State, with a greatest concentration being right  
19 here in New York City. And one-third of LGBTQ+ older  
20 New Yorkers are over the age of 50.

21 The number of New Yorkers aging with HIV is also  
22 growing rapidly, with 73% of New Yorkers living with  
23 HIV estimated to be over the age of 50 by 2030. Yet,  
24 at the same time of rapidly growing needs, LGBTQ+  
25 elders are often invisible, disconnected from

services, and severely isolated without traditional, biological family support. They are far more likely to live alone and less likely to rely on adult children or family members for informal care giving. In fact, 25% of SAGE's constituents reported having no one else to call during emergencies but SAGE.

Because a thin support networks, LGBTQ+ elders and older people living with HIV rely more heavily on community service providers, yet they are often distrustful of providers after a long history of stigma and compounding discrimination. For many of these elders, the City Council's LGBTQ Senior Services in Every Borough Initiative is their lifeline.

Last fiscal year the New York City Council made history with the first ever enhancement to this initiative since it was created in Fiscal Year 2015. The \$255,000.00 enhancement helped fuel the growing demand for LGBTQ+ services by directly funding GRIOT Circle, New York City's only staffed organization specifically serving LGBTQ+ elders of color, while maintaining SAGE's funding.

It is critical that the fiscal year 2024 budget renews funding for the LGBTQ Senior Services in Every

Borough Initiative at the new Fiscal Year 2023 levels to continue to support the vital work of both organizations.

SAGE is seeking at renewal of \$100,155,000 under this vital initiative.

We are also seeking funding renewals to support our dedicated services for LGBTQ+ older veterans, mental health services for homebound elders, and care management services. More details about those initiatives and requests can be found in my written testimony.

Thank you so much, Chair Hudson, for your work in championing this initiative. We look forward to working with you and your office.

CHAIRPERSON HUDSON: Thank you so much.

MR. KEMPNER: Good afternoon, my name is Peter Kempner, and I am the Legal Director and Senior Law Project Director at Volunteers of Legal Service, also known as VOLS.

VOLS's biggest project is our Senior Law Project, which serves low income New Yorkers age 60+ primarily by providing Last Wills and Testaments, Powers of Attorney, Health Care Proxies, and other critical advance directives. These life planning documents

1  
2 enable our clients to properly prepare for possible  
3 incapacity and death. They allow our clients to  
4 maintain income, avoid homelessness, ensure that  
5 their dying wishes are fulfilled, and empower our  
6 clients caregivers to be able to obtain services  
7 necessary for our clients to access health care and  
8 age in place in the community.

9 While we strongly believe that all older adults  
10 should have the right documents in place as they age,  
11 we have several initiatives that focus on vulnerable  
12 subsets of the older adult population in New York  
13 City. These include veterans, Spanish Speaking  
14 elders, women identify, and LGBTQIA+ older adults as  
15 well.

16 We have created these initiatives, because we  
17 know that it is important to deliver culturally  
18 competent services that are tailored to the  
19 communities that we seek to serve.

20 The VOLS's Senior Law Project also provides legal  
21 services on a range of other civil legal issues  
22 including landlord tenant matters, access to  
23 benefits, consumer matters, and other civil legal  
24 needs.  
25

We provide training and support for social workers, older adult centers staff, and pro bono attorneys to help address our client's legal issues. Another important part of our program is our efforts to educate older adult New Yorkers and their caregivers about the value of planning for the future and how to obtain free legal services.

We have heard from so many important services this morning, but one thing that I have not heard is the importance of legal services. Legal services providers stand up with our seniors when they are facing eviction in housing court; they ensure that they are not improperly denied benefits, and they help them plan for the future.

Sadly, too few seniors have properly planned for their futures. Among the US population, it is estimated that only one-third of seniors have an advance directive. Many low income older New Yorkers think that because they don't have recourses of wealth to pass on to the next generation that they don't need to have advance directives in place. Instead of thinking about planning for the future in these terms, we encourage our clients to think about



protecting what they have and accessing what they may need during their lifetime.

There are many examples that you will see in my written testimony about why these documents are so critical. But, we want to ensure that our clients and their caregivers have all of the tools [TIMER CHIMES] that they need in their toolbox... (CROSS-TALK)

SERGEANT AT ARMS: Time expired.

MR. KEMPNER: in order for these older adults to age in place in the community. That is why the City Council's financial support for our program is so critical.

We want to thank the Council for the funding that we have been given to provide these free legal services to our clients, thank you.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Thank you very much to this panel.

We are going to be moving to a virtual panel: Paul Nagle, Adiba Chowdhury, and Josh Bentley. As a reminder, you will each have three minutes for your

testimony, please wait for the Sergeant At Arms to call the time before you begin your testimony.

We will start with Paul Nagel.

SERGEANT AT ARMS: Starting time.

DIRECTOR NAGEL: Good afternoon, Chair Hudson, thank you for the opportunity to testify via Zoom, which makes it much less burdensome for those of us from small to midsize organizations with smaller staffs to participate in the hearing process.

My name is Paul Nagel, and I am the Executive Director for Stonewall Community Development Corporation. Our mission is to see New York City's LGBTQ older adults in welcoming housing with access to health and mental health care services that meet their unique needs.

The subject of my testimony is the imperative for digital inclusion of the most fragile aging populations.

Loneliness kills. This alone is reason enough to make sure that every older adult New Yorker has the capacity to interact digitally, as classes, social groups, and communities are continuing to provide online access for seniors who are homebound and will continue to be so now, even during periods when

1  
2 pandemics are waning. And what about isolated older  
3 adults living with cognitive, aural or visual  
4 impairments? New assistive technologies can help them  
5 participate, but how do we find these people, reach  
6 them and introduce them to these assistive  
7 technologies and help them acquire them?

8       Further, it's not just about alleviating  
9 loneliness. Access to all services is increasingly  
10 migrating to online. Whether it's banking, healthcare  
11 or housing, access to services is increasingly  
12 digital only. Even when a paper process is available  
13 it often places the applicant so far behind that  
14 their ability to participate or especially compete  
15 for say affordable housing opportunities, is severely  
16 disadvantaged.

17       Online access is the basic foundation for getting  
18 connected and efforts have correctly focused on  
19 achieving this first critical step. But, there is  
20 another whole set of tools that seniors should be  
21 thinking about -- remote monitoring and telehealth  
22 systems, which promote independence by providing  
23 support only when and where it is needed. From  
24 providing daily Activities of Daily Living support  
25 and medication reminders, to one touch video calls to

support teams, to wireless health and activity sensors that can alert caregivers when someone needs help.

It is very important that older adults understand not only the increasing imperative to embrace technology but are made aware of some of the other awesome ways that technology can enable them to remain in their homes longer.

Indeed, by all reports, attitudes are shifting in technology's favor. Our own ongoing, unscientific digital survey now includes 175 responses. To the statement "I would consider using safety monitor technology that would help me stay in my home safely": 89.7% of the respondents Agreed; 51.4% Agree, 38.3% Strongly Agree; 8% are Unsure, and only 2.3% either Disagree or Strongly Disagree.

The conundrum is that if someone is not already digitally connected, they are hard to find and engage. Intentional outreach efforts must go beyond ads in the subway. Community based organizations, who are on the ground and in the field can be a critical resource, especially if they can effectively team with the offices of local elected officials. Ironically, old fashioned tools of canvassing, word

of mouth community outreach, and community info sessions may very well provide the bridge to technology access.

Stonewall Community Development has been working on such a model and invites local elected officials to contact us and learn more about how we can partner to field test this approach... (CROSS-TALK)

SERGEANT AT ARMS: Time has expired, thank you.

DIRECTOR NAGEL: and educate your older adult constituents about available technologies and provide access through pilots designed to engage them in the further development and applicability of these technologies to their own real-world needs, thanks.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Thank you. Moving onto Adiba Chowdhury, you will have three minutes. Please wait for the Sergeant At Arms to call time before you begin your testimony.

SERGEANT AT ARMS: Starting time.

MS. ADIBA CHOWDHURY: Good morning, Chair Hudson, and members of the Aging Committee.

I am Adiba Chowdhury, Senior Program Manager from Family Support Services at South Asian Council for Social Services or SACSS.

Thank you for this opportunity today to share with you a glimpse of how some of our senior programs impact the well-being and [BACKGROUND NOISE][INAUDIBLE] immigrant seniors in the City.

SACSS' community based organization is located in Flushing, Queens. Our mission is to empower and integrate underserved South Asian and other immigrants into the economic and civic life of New York.

All of our programs are free and provided by culturally competent staff that speaks 19 languages: 12 South Asian, and Spanish, Mandarin, Cantonese, Hakka, Malay, Haitian, and French Creole.

Our senior programs provide immigrant seniors with the ability to address their social economic needs and improve their overall quality of life.

Throughout the pandemic, we ensured that our seniors continued to be connected to vital services in the areas of health care, benefits, case management services, food pantry services, home

delivered heart meals, and were able to get emotional support when they needed it.

The majority of seniors [BACKGROUND NOISE] [INAUDIBLE] services at SACSS often feel overwhelmed while accessing benefits. Many of them have limited English proficiency and have fixed incomes, which creates anxiety and stress.

Through a range of senior support services such as connection to benefits, senior centers, counseling, and food pantry services we ensure that seniors physical, emotional, financial, and social well-being is maintained.

Our senior center is now open twice a week, Tuesday and Thursday from 9:30 a.m. to 1:00 p.m. with breakfast and lunch served. Seniors attend yoga and Salsa classes and also include recreational activities such as ballroom dancing, karaoke, movie nights, and we also have trips to do apple picking, bowling, and [INAUDIBLE] gorge (sp?) on the Hudson.

We have [INAUDIBLE] so ride so that they can maintain their visits to the therapist, their PCP, and even to our senior centers.

In 2022, we served over 10,500 seniors through all of our programs, which includes connection to

health care access and other benefits, food pantry services, mental health counseling, legal information clinics, and English and computer classes.

Please support our seniors and the Geriatric Mental Health Initiative. Thank you so much for your support and time.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Thank you.

We will be moving on to Josh Bentley. You will have three minutes for your testimony. Please wait for the Sergeant At Arms to call time before you begin.

SERGEANT AT ARMS: Starting time.

MR. JOSH BENTLEY: Good afternoon Councilmembers, my name is Josh Bentley and I am Grants and Advocacy Coordinator with Korean Community Services. Thank you very much to the Committee on Aging for holding this hearing and providing the opportunity to testify today. I especially want to thank Chairperson Crystal Hudson, council members Christopher Marte, Kristin Richardson Jordan, Eric Dinowitz, Linda Lee, Lynn Schulman, and Darlene Mealy for hearing the testimonies today.



Korean Community Services of Metropolitan New York is a proud member of the 18% and Growing campaign, a critical and diverse city-wide campaign uniting over 90 AAPI-led and serving organizations across New York City to fight for a fair and equitable budget that protects the needs of our most vulnerable community members.

We advocate as a collective in solidarity to hold New York City accountable in providing the necessary resources to serve and empower the diverse needs of all AAPI New Yorkers and other communities of color as "We Are Building A Community Too Powerful To Ignore."

Korean Community Services has served the Korean immigrant and Korean American communities in New York City for fifty years. Our organization began as a hub for new Korean immigrants to find stability in their new lives in New York City. More recently, our work has diversified not only in our services offered but in the communities we serve. A key component of our programming is our older adult centers, whose work aims to provide older adults with resources, classes, meals, and a sense of community and belonging. The work our older adult centers, located in Flushing and

Corona, could not be achieved if not for proper funding, our dedicated staff, and the support of our various coalitions and community-based organization partners.

We know our organization is not alone in the work it is dedicated to. There are countless other CBOs who dedicate their time and energy to the Asian American and Pacific Islander communities across the city. Whether they big new or tenured, large in scale or just breaking into their neighborhood, the work these institutions are committed to is invaluable to the health, well-being, and security of their communities.

Korean Community Services urges the New York City Council to uplift the collective priorities of the 18% and Growing Campaign which include expanding the AAPI Community Support Initiative to \$7.5 million, Communities of Color Nonprofit Stabilization Fund to \$7.5 million, and the Access Health Initiative to \$4 million, among other key city-wide initiatives to take further steps in not envisioning, but truly creating a more inclusive, safe, healthy, and sustainable society for our diverse diaspora.

Thank you very much for your time.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Thank you very much to that panel.

We are going to be moving onto an in-person testimony from Kimberly George, please. You can proceed.

MS. KIMBERLY GEORGE: Great.

Thank you, Chair Hudson, and committee members for the opportunity to present today.

As Chair Hudson knows, I am Kimberly George President and Chief Executive Officer of Project Guardianship.

Project Guardianship is a spinoff of the Vera Institute of Justice. We are a nonprofit organization providing comprehensive, person centered, court appointed adult guardianship services for hundreds of limited capacity New York City residents.

Our clients are living with disabilities, dementia, serious mental illness, substance misuse, traumatic brain injuries, and other conditions that negatively impact their ability to manage their affairs.

We serve clients regardless of their ability to pay, and provide services for some of the most compelling and complex cases in the City.

We also share research and policy recommendations for a better guardianship system, and we advocate for a more equitable service provision for people in need of surrogate decision making supports or protective arrangements.

My written testimony is full stats that I really don't need to go over, because as the Committee on Aging, you are well aware that the population is aging, and not only is the percentage of population that is older, their also living longer, living longer with disabilities, and older New Yorkers are living in poverty than ever. In addition, more are living and aging alone.

All of these trends mean that the demand for guardians will increase -- and is increasing. Yet, our ability to meet that demand is at a huge shortfall.

New York State is fortunate to have strong legal protections that entitle New Yorkers access to guardianship services. Our state law provides that anybody who a judge deems in need of a guardian, the

state will provide a guardian. Yes, the need is underfunded, and we do not have the ability to meet the demand.

Currently, there is a patchwork of nonprofit providers and pro bono attorneys who provide services when a family member, a friend, or a private paid guardian is not an option. But, this network is stretched to capacity.

Guardianship has the function to protect the safety, well-being, dignity, and assets of those individuals that the court has found to have limited capacity.

Project Guardianship will continue to fill the gaps in our social safety net and persist and connecting our clients to housing, health and mental health care, legal and immigration services, and the public benefits they need and deserve in order to gain stability and to age with dignity. But, we will need additional funding to adequately meet the needs of these clients in the most person centered and least restrictive way possible.

New York City can lead and create a dedicated funding stream to support guardians that provide care for older, limited capacity adults and individuals

with disabilities. In doing so, more New Yorkers will be able to access the benefits and services that they are entitled to so that they can thrive as they age -- while ideally living in their own communities.

With the rapid expansion of older adult population [TIMER CHIMES], dramatic increases...

(CROSS-TALK)

SERGEANT AT ARMS: Time expired.

MS. KIMBERLY GEORGE: in adults living in poverty, and the rise of Alzheimer's and mental health needs, the time to act is now.

Thank you very much.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Thank you very much.

We will moving back to virtual panelist.

Alex Stein, you will have three minutes. Please wait for the Sergeant At Arms to call time before you begin your testimony.

SERGEANT AT ARMS: Starting time.

ALEX STEIN: Thank you guys so much. I really want to start by saying I apologize for some of the stuff that I said to Council Member Brewer... (SINGING)

CHAIRPERSON HUDSON: We are going to move on to the next witness.

COMMITTEE COUNSEL: Okay, thank you. At this time, I am going to call names of folks who were not present but did register: Vick Benson, Carrie Bloss, Lloyd Feng, Greg Morris, Elenore (sp?)Carter, Shaban (sp?) Neboa (sp?), Juan Calcutta?

Okay, none of those folks are present.

At this time, is there anyone in the room who wishes to testify and has not done so yet?

Seeing none, at this time, if there is anyone who wishes to testify virtually that did not have their name called, please indicate that you would like to testify by using the Zoom Raise Hand Function.

Okay, at this time, we will hearing from Eleni DeSiervo. You will have three minutes, please wait for the Sergeant At Arms to call time before you begin your testimony.

SERGEANT AT ARMS: Starting time.

MS. ELENI DESIERVO: Great, Good afternoon, Chair Hudson and members of the Committee on Aging. Thank you for offering this space today to address the critical need for city investments for our older adults.

My name is Eleni DeSiervo, I am testifying on behalf of Lincoln Center as the Senior Director of Government Relations.

When the administration discusses an age inclusive city and aging in place, culture and the arts must be part of that conversation as a key to healthy older adult population. This is in addition to the services many of my colleagues in the nonprofit sector testified to today.

A 2021 CUNY Graduate Center Study reports that the population of adults ages 65 and older in New York City is expected to jump 40% by 2040, especially as New Yorkers are living longer.

Serving as both cultural and community hubs, cultural organizations are at the heart of this city nurturing the mind, body, and soul of all who live here -- especially older adults seeking connection, reflection, and healing.

Recently, we worked with Council Member Brewer and AARP Senior Planet to host a tech clinic for older adults which will be happening again in June.

Lincoln Center Moments, a performed based programs designed for neurodiverse audiences tailored to serve older adults living with dementia and with



developmental disabilities, serves over 1,000 participants annually for free. This past fall of 2022, we welcomed 646 participants. We are currently accepting registration for the spring season for virtual and in person Relax performances along with artmaking workshops.

Our programs are virtual and in person, and our virtual programming is offered with Spanish interpretation.

Additionally, new this year, Lincoln Center is piloting coordinated transportation with interested older adult centers. We thank Council Member Hudson for her leadership in connecting us with the centers in her district to coordinate access to this program directly.

We have also been in conversation with The Department for the Aging and senior centers across the NYCHA network. We look forward to continuing to expand both of these partnerships.

This program is made possible in part due to support by the City Council. We are here to ask for the continued investment of council initiatives, including Autism Awareness, Geriatric Mental Health, Arts as a Catalyst for Change, CASA, and SU-CASA,

which allow cultural organizations like Lincoln Center to deliver tailored arts experiences directly to New Yorkers.

Additionally, The cultural community respectfully requests that the \$40 million added at Adoption in FY23 be restored and baselined with a new request of \$10 million, to help create more stability and equity within the sector.

Today, I will leave you with a few anecdotes from participants in our Lincoln Center Moments Program:

The First one:

*I did not want to leave the Zoom at the end of the session. I felt so touched that I got a little emotional. All the dancers were dancing beyond their boundaries, which were amazing. Their movements and coordination were extraordinary and outstanding. The art workshop was so much fun. I have never done anything with clay. I greatly appreciate all of you putting together this wonderful program for caregivers and Alzheimer's disease/dementia individuals which is beneficiary and helpful* [TIMER CHIMES]... (CROSS-TALK)

SERGEANT AT ARMS: Time expired...

MS. ELENI DESIERVO: Thank you for your time.

CHAIRPERSON HUDSON: Thank you for your testimony.

COMMITTEE COUNSEL: Thank you.

We will be moving on to Elizabeth Bird. You will have three minutes for your testimony. Please wait for the Sergeant At Arms to call time before you begin.

SERGEANT AT ARMS: Starting time.

MS. ELIZABETH BIRD: Hi, thank you, Chair Hudson and members of the Aging Committee, for the opportunity to testify today. My name is Elizabeth Bird, and I am the Director of Public Policy at Educational Alliance. We are a settlement house with community centers located throughout the Lower East Side. We operate older adult services across three sites, two older adult centers and a NORC, all of which are supported by contracts with NYC Aging.

Investments in older adults benefit everyone. Not only do our programs benefit older adults directly, they alleviate pressure on families, caretakers, and other support systems that also provide care for older adults.

In particular, preventive health offerings help older adults avoid costly institutionalized nursing homes and emergency care. The future of New York City

depends on all New Yorkers being able to age with dignity, so my complete written includes five critical investments the City must make for older adults.

I will highlight three here today:

First, we urge the City to increase the overall NYC Aging budget to adequately support the work we do, specifically to add \$38.4 million in new funding for older adult services to address rising costs due to inflation and maintain discretionary funding for aging service programs in every district.

This funding is so critical to the work we do, and we could not continue to provide the high quality programs we do without it.

This year, significant increases for the cost of food and supplies, due to inflation, our budgets are stretched even more thinly, and we are sometimes forced to make difficult programming decisions.

Secondly, we urge the City to restore funding for the Geriatric Mental Health Initiative at \$3.4 million. This initiative has provided critical funding for counseling and support. As more people become aware of the mental health services we have available, more people are likely to ask for help.

And, lastly, we urge the City to increase funding for NORCS and create more affordable senior housing. NORCS are a proven model for helping older adults live independently in their homes and communities. But, our NORCS have not had a recent budget increase and struggle with increased costs due to inflation.

Thank you so much for the opportunity to testify today.

CHAIRPERSON HUDSON: Thank you so much for your testimony.

COMMITTEE COUNSEL: Thank you very much.

At this time, if there is anyone else who wishes to testify virtually, who has not had their name called, and would like to testify, please indicate so using the Zoom Raise Hand Function.

Seeing, none, I am turning it back to Chair Hudson for closing remarks.

CHAIRPERSON HUDSON: Thank you so much.

First, I want to thank everyone who has come, both in person and virtually, to testify today. We know that our needs increase as we get older. And I just want to reiterate from my opening statement that serving almost a fifth of the city's population, the

department's budget continues to account for less than one-half of 1% of the City's overall budget.

By 2040, the City's older adult population is projected to increase to 1.86 million, which represents a 48.5% increase from 2000. Yet, this population is served by the agency with the smallest operating budget of any City agency.

Instead of tracking with this projected population growth, NYC Aging's Fiscal 2024 Preliminary Budget is down \$68 million from the Fiscal 2023 current budget. And we need to do everything we can to continue advocating for older adults.

I am always heartened by all of the testimony that we hear at every hearing, but I am particularly heartened today, knowing how great our needs are concerning inflation and so many other factors that we are dealing with day to day.

So, thank you all again. I will continue to advocate for the needs of older adults, for the needs of the providers who serve older adults, and I appreciate every one's testimony. Thank you.

The meeting is adjourned.

[GAVELING OUT] [GAVEL SOUND]

C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date March 27, 2023