

September 2, 2025

The Honorable Kathy Hochul Governor NYS State Capitol Albany, NY 12224

Re: A.2027 (Paulin)/S.3361 (Rivera)

Dear Governor Hochul,

LeadingAge New York, on behalf of its over 350 not-for-profit and mission-driven members, writes to you today in support of A.2027 (Paulin)/S.3361 (Rivera). This legislation would allow medical evaluations for assisted living program (ALP) services to be conducted and signed by a physician assistant (PA) or nurse practitioner (NP). Currently, the Department of Health requires a physician to conduct the evaluation, and/or provide a co-signature to an evaluation conducted by a physician assistant or nurse practitioner for the ALP.

Unfortunately, the current inflexibility in completing medical evaluations for low-income older adults in need of ALP services can lead to unnecessary delays and barriers in securing the services they need. This legislation would promote timely access and continuity of services by allowing older New Yorkers, regardless of specific ACF/AL setting, to obtain their medical evaluation with their community healthcare provider of choice.

Healthcare systems are increasingly relying on physician extenders, both in primary care and acute care. In other parts of the healthcare system, changes have been made to recognize the important role of these healthcare professionals. In 2011, a law was passed enabling NPs and PAs the authority to complete and sign the required medical evaluation for ACFs and assisted living residences. The ALP medical evaluation is analogous to the medical evaluation for other ACF and assisted living services.

In 2021, the Department of Health also announced a change in regulations to enable NPs and PAs to sign home care orders, including orders for Medicaid covered services. The ALP medical evaluation serves as an order for ALP Medicaid services, analogous to home care orders. Thus, logically, a PA or NP should be qualified to conduct the ALP medical evaluation.

Like any consumer, ALP residents may see an NP or PA for their primary care needs on a regular basis. Residents of ALPs should be able to see their practitioner of preference for the purposes of conducting the medical evaluation required for admission and ongoing residence in the ALP.

Treating an ALP resident differently than other ACF and assisted living residents is not only confusing to consumers and the healthcare community, but it also creates a barriers to care and services. This is

inconsistent with New York's commitment to health equity. At a time when there are significant healthcare workforce shortages, we should be doing all we can to remove barriers to access to care and services, particularly for our most vulnerable New Yorkers.

For these reasons, LeadingAge New York supports A.2027 (Paulin)/S.3361 (Rivera) and urges it be signed into law.

Sincerely,

Sebrina Barrett President & CEO

LeadingAge New York