



New York State Comptroller
THOMAS P. DiNAPOLI

New York's Support for Aging New Yorkers

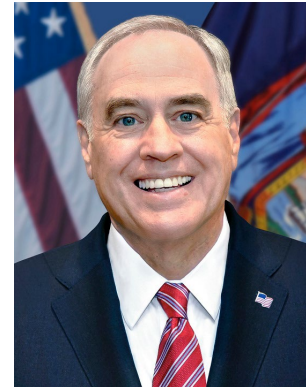
August 2025

Message from the Comptroller

August, 2025

New York has a moral obligation to care for its senior population. As the number and proportion of older adults increases in the State, it is important to examine both the services that will be needed and their delivery methods.

The New York State Office for the Aging (NYSOFA) performs a vital mission helping older New Yorkers remain independent through consumer-oriented and community-based programs. The importance of this work grows as the population of older New Yorkers continues to increase and to reach out for assistance to age in place.



Apart from supporting older New Yorkers and their families, these services help New York State in its use of limited taxpayer resources. NYSOFA services intercede sooner than under a clinical model of care, are not Medicaid-funded and utilize a broad network of response that is often locally based. As such, they help to avoid or delay more costly service provision that occurs under government-funded Medicaid programs, where long-term care expenses make up a large share of increased costs.

The recent shift and reduction in federal support that will likely affect benefits available to many older New Yorkers make this an opportune time to review the major NYSOFA programs and funding addressed in this report. The use of increased state funds for in-home services and unmet needs of older New Yorkers takes on a greater role within this context. As the State increases funding for these programs, it is essential to improve the consistency, accuracy and availability of key data for these programs.

The recently released Master Plan for Aging (MPA) Final Report provides a larger framework for review of services for older and all New Yorkers. It notes that preparing for the future will require state and local agencies to improve service delivery. This will be essential for meeting the linguistic and cultural needs of the shifting demographic composition of older New Yorkers and assisting those in underserved and rural communities.

Thomas P. DiNapoli
State Comptroller

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New York's Aging Population

Pursuant to a November 2022 Executive Order by Governor Kathy Hochul, the State Department of Health's Office of Aging and Long Term Care and the New York State Office for the Aging (NYSOFA) recently released a Master Plan for Aging (MPA) Final Report assessing New York's provision of services for older adults and making recommendations for improvements.¹ As New York's older population continues to increase and the federal funding that supports them becomes less predictable, understanding demand for services, how funding has addressed unmet needs and the challenges for fully supporting New Yorkers as they age is vital. This report focuses on programs administered by NYSOFA, particularly in-home services.

The share of the population that is 65 years of age and older is increasing both nationally and in New York. In 2023, this group represented 17.7 percent of the population in the United States (U.S.) and 18.6 percent in New York— over 3.6 million people of the total State population of nearly 19.6 million. While New York has a larger share of older population, the number of older individuals has been growing more slowly for the State. Compared to 2013, the number of New Yorkers 65 years and over rose by 28.5 percent, over four percentage points less than the nation. The growth in those 65 to 74 years of age has been significantly higher than in those 75 years and over. The median age has increased in New York by two years over this period to over 40 years old, higher than the nation. The share of households with one or more people at least 65 years old has grown by 5.4 and 6.3 percentage points from 2013 in the U.S. and New York, respectively; for New York, it is more than one-third of all households.

Figure 1
Population of Individuals 60, and 65 Years and Over

| | United States | | | | New York | | | | Percent Change, 2013-2023 | |
|--------------------|---------------|---------------------|------------|---------------------|-----------|---------------------|-----------|---------------------|---------------------------|-------|
| | 2013 | | 2023 | | 2013 | | 2023 | | U.S. | N.Y. |
| | Number | Share of Population | Number | Share of Population | Number | Share of Population | Number | Share of Population | | |
| 60 years and over | 62,892,590 | 19.9% | 80,983,092 | 24.2% | 3,965,557 | 20.2% | 4,950,701 | 25.3% | 28.8% | 24.8% |
| 65 years and over | 44,663,990 | 14.1% | 59,307,056 | 17.7% | 2,829,843 | 14.4% | 3,635,501 | 18.6% | 32.8% | 28.5% |
| 65 to 74 years | 25,213,746 | 8.0% | 34,824,818 | 10.4% | 1,541,599 | 7.8% | 2,083,076 | 10.6% | 38.1% | 35.1% |
| 75 years and over | 19,450,244 | 6.2% | 24,482,238 | 7.3% | 1,288,244 | 6.6% | 1,552,425 | 7.9% | 25.9% | 20.5% |
| Median age (years) | 37.5 | | 39.2 | | 38.2 | | 40.2 | | 4.5% | 5.2% |

Source: U.S. Bureau of the Census, American Community Survey, Table DP05.

Figure 2
Households with One or More People 65 Years and Over
(percent of total households)

| United States | | New York | |
|---------------|-------|----------|-------|
| 2013 | 2023 | 2013 | 2023 |
| 26.8% | 32.2% | 27.8% | 34.1% |

Source: American Community Survey, Table DP02.

The MPA forecasts that New York's aging population will continue to grow, and these individuals will require some level of care:

- By 2030, more than 25 percent of New York’s population in 51 counties will be over 60 years old, with approximately 5.5 million total New Yorkers this age;
- By 2050, growth will occur primarily among older adults of color, those over 60 years are projected to increase by almost 17 percent and those over 85 by 44 percent;
- 70 percent of New Yorkers who are older than 65 years will likely need some form of long-term care;
- Long-term care expenditures represent approximately 50 percent of the State’s Medicaid budget and are the largest cost driver in the State budget.²

Medical research and advances that allow individuals to live longer have not extended the period in which people live without major disease or disability.³ NYSOFA determined that 30 percent of New Yorkers 60 years and older in 2019 were functionally impaired by chronic health conditions. This included individuals who needed help with daily living activities.⁴ In 2023, data from the U.S. Census Bureau indicate 8.4 percent of New York residents aged 65 and older living outside of long-term care facilities had difficulty with self-care (bathing or dressing) and 14.8 percent had difficulty in living independently, or doing errands alone.

Figure 3
Individuals 65 Years and Over with Self-Care and Independent Living Difficulties

| | United States | | | | New York | | | |
|-----------------------------------|-----------------------|-------|-----------------------|-------|-----------------------|-------|-----------------------|-------|
| | 2013 | | 2023 | | 2013 | | 2023 | |
| | Percent of Population | | Percent of Population | | Percent of Population | | Percent of Population | |
| All Individuals 65 years and over | 43,353,631 | | 57,891,441 | | 2,729,119 | | 3,538,997 | |
| Self-Care Difficulty | 3,688,100 | 8.5% | 4,020,117 | 6.9% | 243,753 | 8.9% | 297,259 | 8.4% |
| Independent Living Difficulty | 6,692,064 | 15.4% | 7,498,989 | 13.0% | 428,412 | 15.7% | 524,582 | 14.8% |

Note: The American Community Survey covers six disability types, these include the following difficulties: hearing, vision, cognitive, ambulatory, self-care and independent living. See <https://www.census.gov/topics/health/disability/guidance/data-collection-ac.html#:~:text=All%20three%20surveys%20ask%20about,considered%20to%20have%20a%20disability>. The total population numbers represent the noninstitutionalized civilian population.

Source: American Community Survey, S1810.

Sustaining a person’s quality of life during longer lifespans requires adequate health care and may necessitate long-term provision for a variety of considerations – including food and nutrition, transportation, human services, home care and other kinds of non-medical assistance.⁵ It also requires support for aging in place when desired and possible. A NYSOFA survey indicated respondents found their communities to be good places to live and work,⁶ and a 2014 AARP survey showed that older New Yorkers would stay in the State if health, housing, transportation and employment were enhanced and other areas addressed.⁷

In addition to promoting and sustaining a healthy quality of life and positive outlook, aging-in-place strategies may also be more cost-effective. Testimony by the State Association on Aging in New York notes that it costs the network an average \$10,000 or less per year to serve older individuals in their homes and communities compared to \$150,000 at a skilled nursing facility funded by Medicaid.⁸ The New York City Department for the Aging further states that the annual cost in New York City for community care per recipient is \$61,000 and for institutional care is more than \$177,000.⁹

The MPA process was initiated to address the use of relevant government resources in providing services to older New Yorkers. In responding to an MPA survey, various State agencies indicated that “existing programs, services and regulatory functions for older adults have redundancies, gaps in coverage, and at times do not create a continuum of care across services.”¹⁰ One example is the existence of unmet needs for NYSOFA services that is discussed in this report.

NYSOFA-Administered Services

The New York State Office for the Aging's (NYSOFA) mission is to help older New Yorkers remain independent through "person-centered, consumer-oriented, and cost-effective policies, programs, and services that support and empower older adults and their families."¹¹ NYSOFA administers a range of services, including assistance in the home, through federal, state, local and private funding streams that represent non-Medicaid funded support. A network of 59 Area Agencies for Aging (AAA) across the State administer non-medical services directly or through contracted providers.

This approach was established by the 1965 federal Older Americans Act (OAA). Amendments to the OAA in 1973 created the AAA system for local response and provided funding for assisting older Americans with their needs in nutrition, health, disease prevention, protection of rights, among others. Later expansions extended support for services in transportation, adult day care, wellness, caregiver support and self-management, and, more recently, COVID response.

The OAA provides funding to care for those 60 years of age and older primarily, but other populations such as individuals with disabilities or those with long-term care needs may access certain programs that NYSOFA administers. AAAs coordinate care through a network of community-based organizations and health-care entities including licensed home care services agencies (LHCSAs) and providers of adult day care, respite, legal services and other kinds of assistance.

Broadly, these services intercede earlier than those provided under a medical model of care, do not require a physician's order and utilize a coordinated network to provide appropriate levels of response. According to NYSOFA, State costs for this type of support are less than those for Medicaid-funded services, and their use does not require individuals to take certain financial actions related to spending assets, as may occur under a Medicaid model of care.¹²

For delivering non-medical services, AAAs develop individual care plans after conducting assessments of recipients' functional abilities and taking into account resources available to their locality through relevant federal, state and local funding streams. New York State regulations specify eligibility requirements along with screening processes and assessment procedures.¹³

In-Home Contact and Support Services

NYSOFA provides in-home services that use federal, state, county and private funding to about 10,600 people.¹⁴ Major State-funded programs for this purpose include Expanded In-Home Services for the Elderly Program (EISEP), Community Services for the Elderly Program (CSE), Wellness in Nutrition (WIN) and Unmet Need. This set of programs provides an option for recipients to hire, train and manage the workers who deliver their in-home services, and is known as Consumer Directed In-home Services (CDIS).

Expanded In-Home Services for the Elderly Program (EISEP)

EISEP is means-tested and based on income. There is no charge for individuals with incomes up to 150 percent of the poverty level; cost-sharing is applied on a sliding scale for those whose incomes are between 150 to 250 percent of poverty. Participants with incomes over 250 percent of poverty pay the entire cost of these services. NYSOFA has noted that if potential clients cannot afford their cost share, they may be able to receive services through another funding stream.¹⁵ Counties and New York City are required to provide a 25 percent match to use State funding for EISEP.

EISEP provides long-term care to individuals who require assistance with at least one Activity of Daily Living (ADL) or two Instrumental Activities of Daily Living (IADLs) and are not currently receiving services through another program such as Medicaid.¹⁶ An ADL is a regular task to take care of one's basic physical needs, such as eating, bathing and toileting. IADLs require more advanced or complex skills, and include housekeeping, cooking, shopping, and managing communications and money. Individuals who receive assistance with ADLs also receive assistance with IADLs; a total of 11,000 individuals received personal care services in 2024 through EISEP and all other relevant funding sources. Services are provided in four areas, with most funding directed through the first two:

1. Case management (required for all recipients);¹⁷
2. In-home services that address ADLs and IADLs (personal care);
3. Non-institutional services that provide support such as respite; and
4. Ancillary services that respond to needs for equipment, repair of appliances and household items, social adult day care, transportation, etc.

Community Services for the Elderly (CSE)

This set of programs was established in the late 1970s through the New York State Community Services for the Elderly Act.¹⁸ It authorized assistance to localities to coordinate and improve the delivery of community support services by creating new programs and expanding existing ones. The primary goal is to enable older New Yorkers to remain in their homes and take part in family and community life. It is targeted to New Yorkers over 75 years of age who have a disability and live alone. The range of non-medical services includes case management, personal care, home-delivered meals, transportation, adult day care, legal services, health promotion, respite and other resources to maximize independence. CSE is a flexible funding stream; AAAs may use these funds to respond where there are service gaps. CSE-funded EISEP-like services also use cost-sharing.¹⁹

Wellness in Nutrition (WIN)

This program was established in 1984 as the Supplemental Nutrition Assistance Program and was renamed Wellness in Nutrition (WIN) in the State Fiscal Year (SFY) 2013-14 Enacted Budget.²⁰ Along with federal resources through the OAA, this State funding is used to provide meals and related services targeting low-income New Yorkers over 75 years of age who live alone and cannot provide or prepare a sufficient diet for themselves without assistance. Specifically, 87 percent of WIN funding is used for home-delivered meals and the rest for

congregate meals, nutrition counseling and shopping assistance.²¹ Other services that may be provided through WIN include case management, transportation, senior center programming and information and assistance. Funding is distributed to local AAAs on a formula basis.

Unmet Need

Beginning in 2019-20, NYSOFA appropriations were expanded to address the inability of AAAs to meet the needs of eligible individuals. Individuals that AAAs cannot serve represent unmet need. NYSOFA explains these are “individuals who are either waiting to be assessed for services or who have been assessed for services or indicated a need and are not able to receive due to funding limitations, personal care aide shortage or lack of capacity at the community level to deliver the service(s). It does not include individuals that have an immediate need and cannot wait to be placed on a list.”²² Unmet Need funding overall is available for EISEP and non-EISEP services including case management, personal care, home-delivered and congregate meals, nutrition counseling, transportation, legal services, health promotion, adult day and caregiver services among other purposes. Use of this funding by AAAs does not require a match from the county and it can be targeted where need has been identified.

Participation in NYSOFA Services

In SFYs 2021-22, 2022-23 and 2023-24, more than 1 million older New Yorkers received services annually through the AAA network using federal, state, local and private funding sources administered by NYSOFA. Based on NYSOFA's figures, individuals serviced by discrete programs may have varied year-to-year, but remained relatively stable in the aggregate. These services represent programs supported by the federal legislation and they expand on that core, covering a range of purposes broader than the state-funded in-home services described previously.

In 2024, the vast majority of those served were in three areas:

- 544,000 New Yorkers received information and assistance, including through the NY Connects: No Wrong Door System, which provides access to assistance on long-term services and supports for people of all ages or with any type of disability;
- 300,000 received meals or nutritional counseling; and
- 103,000 received counseling and assistance regarding Medicare and prescription drugs.

Figure 4
Numbers of New Yorkers Receiving Services with All Funding

| | 2022 | 2023 | 2024 |
|--|------------------|------------------|------------------|
| Information and assistance | 307,000 | 415,000 | 222,000 |
| Medicare plan and prescription drug counseling and assistance | 97,900 | 200,000 | 103,000 |
| NY Connects: No Wrong Door System | 313,000 | 250,000 | 322,000 |
| Registered dietician certified meals | 245,000 | 172,000 | 245,000 |
| Nutrition counseling and education | 45,300 | 87,000 | 54,000 |
| Assistance to maintain independence and navigate health and social services* | 78,000 | 75,000 | 72,000 |
| Transportation services for medical and other appointments | 30,000 | 24,000 | 40,000 |
| Health promotion and disease prevention | 77,000 | 15,000 | 111,000 |
| Caregiver support and respite services | 12,000 | 12,000 | 14,000 |
| Legal assistance | 11,600 | 11,300 | 11,000 |
| Personal care services | 11,100 | 11,000 | 11,000 |
| Total | 1,227,900 | 1,272,300 | 1,205,000 |

Note: *This is likely describing case management. NYSOFA notes separately that it served more than 78,000 individuals with case management in 2021-22.

Source: New York State Office for the Aging, *New York's Program to Address Unmet Need in Aging Services* (2023 and 2024), and *2023-2027 New York State Plan on Aging*.

Data available from NYSOFA do not consistently identify the program and service categories used by the agency to indicate participation (Figures 4, 5 and 6), making it difficult to analyze service levels and how funding changes have influenced them. As sums of discrete individuals, the annual totals of roughly 1.2 million would represent about one-quarter of New York's population 60 years and over in 2023. Some of these recipients may be individuals with disabilities, limitations or long-term care needs who are not older but eligible for certain NYSOFA services.

Increased NYSOFA Funding for Unmet Need

Appropriations

In SFY 2025-26, all NYSOFA Aid to Localities appropriations increased from 2018-19 by almost 70 percent to a total of \$417.3 million. General Fund support grew by more than 88 percent and federal funding increased by almost 50 percent. See Appendix for more information on NYSOFA's total appropriations.

Figure 5 shows General Fund support for the major programs reviewed in this report. This funding increased from \$108.8 million in SFY 2018-19 to \$205.0 million in 2025-26, growth of 88.5 percent. One reason for this growth has been the allocation of funding for "Unmet Need" starting in SFY 2019-20. Initially, \$15 million funding was designated within the EISEP appropriation; while that appropriation has continued at that level, additional funding for Unmet Need has been included beginning in SFY 2021-22. In total, \$68 million in funding for Unmet Need was included in the SFY 2025-26 Enacted Budget, relative to a total of \$205 million in total appropriation authority for major programs. Cumulative appropriations for Unmet Need since SFY 2019-20 were \$132 million through 2024-25 and are \$200 million in 2025-26.

Figure 5
General Fund Appropriations for Major Programs Administered by NYSOFA

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 | 2023-24 | 2024-25 | 2025-26 | Change, 2018-19- 2025-26 | |
|---|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|-----------------------------|--------------|
| | | | | | | | | | Dollars | Percent |
| CSE | \$31.2 | \$31.2 | \$32.1 | \$32.1 | \$35.9 | \$37.7 | \$39.5 | \$41.7 | \$10.5 | 33.6% |
| EISEP | \$50.1 | \$65.1 | \$65.1 | \$65.1 | \$67.5 | \$76.8 | \$68.4 | \$69.9 | \$19.7 | 39.4% |
| Unmet Need (within EISEP appropriation) | \$0.0 | \$15.0 | \$15.0 | \$15.0 | \$15.0 | \$15.0 | \$15.0 | \$15.0 | \$15.0 | - |
| Unmet Need | \$0.0 | \$0.0 | \$0.0 | \$8.0 | \$8.0 | \$8.0 | \$18.0 | \$53.0 | \$53.0 | - |
| WIN | \$27.5 | \$27.5 | \$28.3 | \$28.3 | \$33.5 | \$35.6 | \$38.2 | \$40.5 | \$13.0 | 47.3% |
| Total | \$108.8 | \$123.8 | \$125.5 | \$133.5 | \$144.8 | \$158.1 | \$164.0 | \$205.0 | \$96.2 | 88.5% |
| Unmet Need Only | \$0.0 | \$15.0 | \$15.0 | \$23.0 | \$23.0 | \$23.0 | \$33.0 | \$68.0 | \$68.0 | - |

Note: Represents appropriations in the enacted Aid to Localities budgets. Funding totals include any additions provided in the enacted budgets. Unmet Need is composed of a set-aside within the appropriation for EISEP and separate appropriations for this purpose. "-" indicates there was no funding for this purpose in 2018-19.

Source: State Enacted Budgets: Aid to Localities at <https://www.budget.ny.gov/>.

Use of Unmet Need Funding

Unmet need is determined by AAAs, which collect data each September and report to NYSOFA on the number of individuals they cannot serve. Many AAAs report that the number of individuals who wish to receive NYSOFA services has grown due to several factors including the increase in the population of older New Yorkers. Additionally, AAAs note that the growing inter-relationships among serving agencies has resulted in more awareness of NYSOFA and therefore, increased referrals for its services. NYSOFA's portal for finding services, NY Connects, also is being utilized increasingly by individuals to reach out.²³

Between 2018-19 and 2024-25, disbursements for the major General Fund programs reviewed in this report grew from \$92.6 million to \$154.0 million, more than 66 percent. While spending for EISEP and Unmet Need declined slightly in SFY 2024-25 from the prior year, it more than doubled since 2018-19. This includes an increase of 81.6 percent for EISEP, likely representing the recurring Unmet Need funding in this program's appropriation as of 2019-20 (available data does not break out spending within the EISEP appropriation). Spending for Unmet Need through the separate appropriation for this purpose began in 2022-23, the year after it was first made available. Such spending accumulated at \$28 million in 2024-25, or just two-thirds of the \$42 million appropriated. Spending in the table below consists of disbursements under original appropriations and reappropriations from prior years.

Figure 6
Spending for EISEP and Unmet Need

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 | 2023-24 | 2024-25 |
|---|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Expanded In-Home Services for the Elderly (EISEP) | \$37,640,288 | \$58,004,950 | \$64,119,515 | \$63,455,038 | \$66,981,936 | \$69,470,809 | \$68,355,540 |
| Unmet Need | \$0 | \$0 | \$0 | \$0 | \$12,000,000 | \$8,000,000 | \$8,000,000 |
| Total | \$37,640,288 | \$58,004,950 | \$64,119,515 | \$63,455,038 | \$78,981,936 | \$77,470,809 | \$76,355,540 |

| Change in 2024-25 | | | | |
|---|--------------|---------|--------------|---------|
| | From 2018-19 | | From 2023-24 | |
| | Dollars | Percent | Dollars | Percent |
| Expanded In-Home Services for the Elderly (EISEP) | \$30,715,252 | 81.6% | -\$1,115,269 | -1.6% |
| Unmet Need | \$8,000,000 | | \$0 | 0.0% |
| Total | \$38,715,252 | 102.9% | -\$1,115,269 | -1.4% |

Note: Represents disbursements from appropriations in the enacted Aid to Localities budgets. Amounts include spending from any additions provided in the enacted budgets. **EISEP contains spending for unmet need from the recurring set aside for this purpose in the appropriation since 2019-20. Unmet Need spending is composed only of the separate line for this amount in the Aid to Localities enacted budget and does not include spending from the set-aside within the EISEP appropriation.**

Source: Office of the New York State Comptroller, OSC calculations from Statewide Financial System data.

Language in the Aid to Localities enacted budgets providing Unmet Need funding require an annual report by September 1 that contains:

- The AAAs that have received these funds;
- The amount of funds received by each AAA;
- The number of participants served; and
- The services provided to them.

The Unmet Needs reports made publicly available on the NYSOFA website include the state-level amounts for the last two items. They do not contain the first two items or the last two items on the AAA or county level.²⁴ Based on this information, approximately 22,000 older New Yorkers received NYSOFA services in SFYs 2021-22 through 2023-24 through \$23 million in combined funding. (These individuals are included in the totals in Figure 4.) Over one-third of total reported three-year funding was used for case management, more than one-quarter for all personal care services and one-sixth for home-delivered meals.

Figure 7
New Yorkers Receiving Services with Unmet Need Funding and Average Costs

| | 2021-22 | 2022-23 | 2023-24 | | |
|--|--------------------|--------------------|--------------------|--------------------------------|-------------------------|
| | Individuals Served | Individuals Served | Individuals Served | Average Annual Cost Per Client | Unmet Needs Funds Spent |
| Case Management | 9,537 | 9,537 | 9,537 | \$776 | \$7,876,434 |
| Home Delivered Meals | 4,852 | 4,852 | 4,852 | \$1,118 | \$2,467,060 |
| Information and Assistance | 2,127 | 2,127 | 2,127 | \$205 | \$79,450 |
| In-Home Contact and Support | 919 | 919 | 919 | \$417 | \$289,675 |
| Congregate Meals | 757 | 757 | 757 | \$805 | \$364,038 |
| Personal Emergency Response System | 640 | 640 | 640 | \$183 | \$142,781 |
| Transportation Services | 586 | 586 | 586 | \$777 | \$486,305 |
| Outreach | 498 | 498 | 498 | \$308 | \$0 |
| Personal Care II (PCII) | 457 | 457 | 457 | \$8,094 | \$3,754,133 |
| PCII Consumer Directed | 34 | 34 | 34 | \$9,359 | \$580,563 |
| Personal Care I (PCI) | 427 | 427 | 427 | \$1,936 | \$1,703,142 |
| PCI Consumer Directed | 57 | 57 | 57 | \$4,534 | \$197,477 |
| Senior Center Recreation and Education | N/A | 420 | 944 | \$274 | \$258,789 |
| Legal Services | 380 | 380 | 380 | \$508 | \$48,398 |
| Escort Service | 278 | 278 | 278 | \$541 | \$95,444 |
| Nutrition Counseling | 189 | 189 | 189 | \$141 | \$2,432 |
| Nutrition Education | 52 | 52 | 0 | 0 | \$0 |
| Health Promotion | 39 | 39 | 39 | \$481 | \$57,073 |
| Caregiver Services | 10 | N/A | N/A | N/A | N/A |
| Adult Day Services | 7 | 7 | 7 | \$4,867 | \$19,240 |
| Other Including Administrative | N/A | N/A | N/A | N/A | \$2,069,012 |
| Total | 21,846 | 22,256 | 22,728 | | \$20,491,446 |

Note: Except for totals, all amounts as reported. For 2023-24, the “Unmet Needs Funds Spent” amounts divided by “Individuals Served” amounts do not often result in the “Average Annual Cost Per Client” amounts.

Source: New York State Office for the Aging, *New York’s Program to Address Unmet Need in Aging Services*, 2024 at <https://aging.ny.gov/system/files/documents/2025/04/nysofa-2024-report-on-unmet-need-funds.pdf>

The Office of the New York State Comptroller (OSC) conducted an [audit](#) during the period of April 2017 to July 2021 to determine if NYSOFA’s procedures for certain programs, including EISEP, CSE and Unmet Need, were adequate to meet older New Yorkers’ needs and to monitor AAAs’ program administration for this purpose.²⁵ The audit focused on allocation and use of the \$15 million for unmet need provided through the EISEP appropriation during this time. In its initial findings, OSC stated that:

- NYSOFA did not use AAAs’ current reported unmet need to revise initial allocations;
- Unmet Need funds remained unspent as of July 30, 2021 and unused funds were not redistributed; and

- NYSOFA did not consistently adhere to procedures for monitoring AAAs' administration of relevant program funds including annual on-site evaluations of all AAAs.

More specifically, OSC found that NYSOFA did not provide guidance on waitlist compilation and maintenance, and AAAs used different methods for this purpose. OSC was unable to verify if NYSOFA's allocation of Unmet Need funds proceeded in accordance with program instructions and determined that without reassessment of need and redistribution of funds, the goal of meeting unmet need may have been undermined.²⁶ NYSOFA officials indicated to OSC that Unmet Need allocations were not recalculated for 2020-21 and 2021-22 because growing need and costs exceeded available funds for this purpose, and due to an agreement with the Legislature not to reassess need.²⁷ NYSOFA also cited the role of the COVID-19 pandemic in limiting on-site evaluations and other monitoring of AAAs and in AAAs' use of funding.

OSC follow-ups to this audit found that limited progress had been made by NYSOFA to address these issues as of April 2023.

Waitlists

In August 2024, NYSOFA provided an electronic data form for all AAAs to use in annual collection of participation data. In relevant instructions to AAAs for this purpose, NYSOFA further defines unmet need "as the inability of the AAA to meet identified service needs of eligible individuals."²⁸ The total number of persons who do not receive services under current existing funding sources are referred to as "waitlists". Not all AAAs offer all NYSOFA services or maintain waitlists. Some AAAs report no unmet need. Also, the numbers of individuals on a waitlist may not represent total need. The August 2024 Program Instruction requires AAAs to certify the accuracy of data and maintain documentation on the process used to collect data.

State and county waitlist data is not readily available on NYSOFA's website or in its publications; the amounts below come from testimony and follow-up to testimony made by NYSOFA officials to the State Legislature. It indicates that approximately 16,000 older New Yorkers cannot be served annually.²⁹

Figure 8
Numbers of Individuals Whom AAAs Cannot Serve: 2023 and 2024

| Service | Survey Year | |
|------------------------------------|---------------|---------------|
| | 2023 | 2024 |
| Case Management | 7,691 | 6,600 |
| Home Delivered Meals | 1,264 | 1,514 |
| Personal Care II | 1,833 | 1,381 |
| Personal Care I | 1,768 | 1,233 |
| PC II Consumer Directed | 208 | 126 |
| PC I Consumer Directed | | 103 |
| Personal Emergency Response System | 825 | 1,115 |
| Transportation | 599 | 813 |
| Assisted Transportation | | 173 |
| Health Promotion | 255 | 550 |
| Legal Services | 323 | 466 |
| Respite | | 465 |
| Caregiver Services | 608 | 417 |
| Friendly Visits | | 378 |
| Telephone Reassurance | | 306 |
| Home Modifications | 241 | 304 |
| Nutrition Counseling | 148 | 174 |
| Chore | | 121 |
| Congregate Meals | 80 | 103 |
| Social Adult Day Services | 198 | 54 |
| Total | 16,041 | 16,396 |

Note: Follow-up data provided by NYSOFA to its 2024 Human Services Budget Hearing testimony indicated there were six counties or areas in 2023 “with no Wait List”: Essex, Rensselaer, Seneca, Seneca Nation, St. Regis-Mohawk, Wyoming. AAAs were required to use the electronic form provided by NYSOFA in August 2024 to submit the annual 2024 wait list data.

Source: NYSOFA, *Joint Legislative Public Hearing on 2024 Executive Budget Proposal: Topic Human Services, New York State Department of Aging – Follow Up Testimony* at <https://www.nysenate.gov/calendar/public-hearings/january-31-2024/joint-legislative-public-hearing-2024-executive-budget>; and Association on Aging in New York, *Sept 2024 Statewide Wait List Report* (provided to the Office of the New York State Comptroller), and *Written Testimony of Rebecca Preve, Executive Director: Association on Aging NY (AgingNY), 2024 Human Services Budget Hearing* at <https://www.informnny.com/wp-content/uploads/sites/58/2024/02/Joint-Budget-hearing-1.pdf>.

Factors Affecting Availability and Delivery of Services

Growth in the population of older New Yorkers and their rising awareness of and request for non-Medicaid support services have increased demand for NYSOFA-delivered services. A range of factors have affected the agency's ability to respond, including funding levels and inflation impacts on the costs of food, gas and other items for support services provided to older New Yorkers.

The numbers of direct care workers in New York who deliver both Medicaid-funded and NYSOFA-administered in-home services affect the ability to provide assistance. Even though the industry in which these jobs are located is the largest employer in the State and had the greatest employment gains since the pandemic,³⁰ NYSOFA reports there remains a shortage that has constrained the capacity for certain AAAs to meet existing need.³¹ The MPA Final Report indicates the “availability and adequacy” of this workforce “will be a primary issue.”³²

In 2024, there were almost 614,000 filled jobs in New York in the industries providing care for the elderly— home health-care services and services for the elderly and persons with disabilities.³³ The MPA Final Report estimates that “the demand for personal care aides is expected to rise exponentially (440,000 in 2018 to 700,000 by 2028).”³⁴

Given these circumstances, some counties (14 as of October 2024) have addressed this by training and/or hiring employees to provide services directly rather than relying solely on human services agencies under contract for this purpose. This action also provides certain public sector employee benefits to county workers not available in the private sector.³⁵

Additionally, a provision in the SFY 2022-23 enacted state budget requiring a \$2 per hour wage increase for home health care workers has impacted AAA resources. Funding has been provided to Medicaid service providers for this purpose but not to relevant NYSOFA service providers on a sustained basis even though workers paid through these two funding sources are drawn from the same human services agencies.³⁶ NYSOFA has used other funding when necessary, including monies designated for cost-of-living adjustments, to provide this mandated pay.³⁷

Finally, there may be impacts from state policy changes in Medicaid coverage for in-home personal care services that were postponed during the pandemic due to enhanced federal funding requirements for maintaining levels of benefits and eligibility. The increase from two to three in the number of ADLs required for new Managed Long Term Care enrollees to receive personal care services will be implemented in September 2025. Ineligibility of certain individuals under these changes may result in increased requests for such assistance from NYSOFA³⁸

Another source of funding for NYSOFA is the Personal Income Tax (PIT) voluntary contribution on state PIT returns that allows for contributions by taxpayers to the Senior Wellness in Nutrition program. Even though it is not a major source, the Office of the New York State Comptroller's most recent [report](#) on checkoffs notes that contributions for this purpose have not been disbursed. The accumulated fund balance for this program in SFY 2022-23 was \$341,886.

Federal Funding and Program Risks

There are recent shifts, reductions and eliminations of federal funding that support older New Yorkers. The reauthorization of the Older Americans Act is overdue and federal fiscal year (FFY) 2025 funding remains at FFY 2024 levels under the continuing resolution that maintains governmental operations through September 30, 2025. As noted earlier, the OAA provides funding to states for critical social and nutrition purposes.

The recently enacted federal budget bill (Public Law No: 119-21) will reduce federal support for Medicaid and the Supplemental Nutritional Assistance Program over time, affecting participation in these programs.³⁹ Resulting restrictions in eligibility and funding may leave some older New Yorkers without benefits they receive currently and may cause them to look for support from NYSOFA services.

Also, while the federal fiscal year (FFY) 2026 President's budget request maintains current levels of funding in many programs for older Americans, it proposes elimination of some programs that directly and indirectly support these individuals including:

- Prevention and Public Health Fund (includes Chronic Disease Self-Management Education and reductions in funding for falls prevention and the Alzheimer's Disease Initiative);
- Commodity Supplemental Food Program;
- Senior Community Service Employment Program and AmeriCorps Seniors;
- Community Services Block Grant; and
- Low-Income Home Energy Assistance Program.⁴⁰

Finally, the current White House administration is reorganizing the Department of Health and Human Services as part of its FFY 2026 budget including the elimination of the Administration for Community Living (ACL) — the office that has implemented the Older Americans Act and the State Health Insurance Assistance Program. Many of the ACL's responsibilities will be incorporated within the new Administration for Children, Families, and Communities or the Centers for Medicare and Medicaid Services.⁴¹ Accompanying staffing reductions may affect administration and oversight of programs for older Americans.⁴²

Conclusion

New York has recently made significant expansions in the authorization and expenditure of funding for aging services, particularly in-home assistance. This report indicates that the population of older New Yorkers is growing and there is a benefit to supporting them in their desire to age in place with assistance from in-home services. Even though NYSOFA reports recently serving more than 1 million New Yorkers, including 22,000 through Unmet Need funding, there are at least 16,000 older residents annually who have not been served.

NYSOFA's mission may be more critical as this year has seen a dramatic pullback of future federal support for Medicaid services while Medicaid continues to see growing costs for the provision of long-term care. These changes may both require the State to find savings in the Medicaid program and cause the underserved population to increase. NYSOFA services may help provide some Medicaid savings while also filling some service gaps, and aid in keeping older adults in their homes and out of institutional settings. At the same time, there are proposals for eliminations and reductions in federal programs that directly and indirectly support older Americans.

In combination with demographic trends, benefits and supports intended to improve the quality of independent life for older New Yorkers will be strained. The MPA Final Report noted that "revisiting existing policies and programs, improving coordination and collaboration among agencies, implementing new policies and programs, and advocating for federal actions to transform New York's long-term service and support system" will be required.⁴³ As a first step, even though digital information on NYSOFA services are [linked by category](#), all programs available to these individuals through multiple State agencies should be compiled in one place, or website, so New Yorkers may access easily what New York has to offer.

Public understanding of the status of aging services in New York would improve by increasing the availability, accuracy and consistency of data on participation and funding including allocations for in-home services, particularly those for Unmet Need funding. Currently, the format of certain state-level NYSOFA data related to individuals served and not served is not consistent or standardized; the availability of this data is also limited, including by geographic level (counties). Further, the actual allocations of Unmet Need funding to AAAs, the component amounts used for this purpose and county-level spending from these awards is not readily available, as required by statute.

The current status of waiting lists is also not publicly available. Without this information, policymakers and the public are unable to see how many people are still waiting for services, where these individuals are located and what resources would be required to fully support NYSOFA programs. What is clear is that even with increased funding, the needs of many older adults in the State are not being met. Increased reporting can help determine the reasons for this, including the possibility that one cause may be a shortage of direct care workers. NYSOFA should fulfill the statutory requirements related to annual unmet needs reports and also publicly report county level waitlists.

Improving transparency would support effective use of the significant additional funds provided through recent enacted budgets, and the decision-making process on proposals for new and

existing programs recommended in the MPA Final Report, particularly potential actions with fiscal impacts. Agency spending of Aid to Localities appropriations for major NYSOFA programs is relatively high but expenditure of all funding authorized for Unmet Need is unknown and funding for this purpose remains unspent as of SFY 2024-25. The MPA Final Report identifies specific funding provided through the current enacted budget and notes that additional investments “would be subject to the annual budget process and the availability of resources.”⁴⁴

Among a broad scope of purposes, the MPA Final Report proposes steps for improving services in areas addressed in this report such as providing adequate funding to the AAA network, financing long-term services and expanding, training and supporting the direct care workforce. The adoption and implementation of proposals for improving aging services will require sound and consistent data and documentation. During a time of uncertainty in federal support, this focus is particularly important for transparency and so that New Yorkers will benefit.

Appendix

Additional Characteristics of Older Individuals

The proportion of older Americans and New Yorkers that is Hispanic has grown from 2013 to 2023 by two percentage points to 9.4 and 12.3 percent respectively. The share of New Yorkers 65 and over who are White has gone down by 10 percentage points and those who are African American or Asian has increased. More than one-quarter of the older New York population speak a language other than English at home, 10 percentage points higher than nationally.

Race/Ethnicity and Language: New York and the U.S. (as percent of 65 years and over)

| | White | Black or African American | Asian | Hispanic or Latino origin (of any race) | Language at home other than English |
|----------------------------|-------|---------------------------|-------|---|-------------------------------------|
| United States, 2013 | 84.3% | 8.7% | 3.8% | 7.4% | 14.4% |
| United States, 2023 | 74.9% | 9.4% | 4.9% | 9.4% | 15.8% |
| New York, 2013 | 76.9% | 12.3% | 5.6% | 10.2% | 25.3% |
| New York, 2023 | 66.9% | 12.2% | 7.7% | 12.3% | 26.4% |

Note: Represents select categories.

Source: American Community Survey, Table S0103.

Since 2013, there has been significant growth in the proportion of households of individuals 65 and older with income in retirement, from about 48 percent to 57.5 percent in 2023. There has been a decline of over 3 percentage points in the share of older households that have Social Security income to just over 87 percent in the U.S. and 85.5 percent in New York and an increase of more than 3 percentage points in the proportion of such households with earnings to 40.5 percent in New York. This was accompanied by growth of about 2.5 percentage points in the share who are employed to about 19 percent nationally and in New York.

These trends coincided with growth during this period in the percent living below the poverty level to 11.3 in the U.S. and notably higher in New York, 14.3 percent. This was attended by an increase in older New Yorkers that received food assistance through SNAP to 17.8 percent but little change in the share of households receiving cash public assistance.

Income, Employment, Poverty and Assistance: New York and the U.S. (as percent of households or population 65 and over)

| | Households with retirement income | Households with Social Security income | Households with earnings | Population Employed | Population Below 100 percent of the poverty level | Households with Food Stamp/SNAP benefits | Households with cash public assistance income |
|----------------------------|-----------------------------------|--|--------------------------|---------------------|---|--|---|
| United States, 2013 | 47.9% | 90.4% | 36.2% | 16.3% | 9.6% | 8.9% | 1.9% |
| United States, 2023 | 57.5% | 87.1% | 38.8% | 18.7% | 11.3% | 10.6% | 1.9% |
| New York, 2013 | 47.7% | 88.8% | 37.3% | 16.7% | 11.6% | 15.2% | 2.0% |
| New York, 2023 | 57.5% | 85.5% | 40.5% | 19.2% | 14.3% | 17.8% | 2.9% |

Note: Earnings are wages, salaries and self-employment income. Earnings are a subset of all income surveyed and composed of earnings; interest, dividends or net rental income; Social Security; Supplemental Security Income; public assistance; retirement; and other types. See <https://censusreporter.org/topics/income/>.

Source: American Community Survey, Table S0103.

NYSOFA Aid to Localities Enacted Budget Appropriations

All Appropriations in the Aid to Localities Enacted Budgets

| | | General Funds | Federal Funds | Other | Total |
|---|----------------|------------------|------------------|-----------|---------------|
| Enacted State Fiscal Year Budgets | 2018-19 | \$129,665,500 | \$114,985,000 | \$980,000 | \$245,630,500 |
| | 2019-20 | \$145,150,500 | \$114,985,000 | \$980,000 | \$261,115,500 |
| | 2020-21 | \$145,576,500 | \$114,985,000 | \$980,000 | \$261,541,500 |
| | 2021-22 | \$163,891,513 | \$114,985,000 | \$980,000 | \$279,856,513 |
| | 2022-23 | \$181,525,500 | \$114,985,000 | \$980,000 | \$297,490,500 |
| | 2023-24 | \$194,861,434 | \$114,985,000 | \$980,000 | \$310,826,434 |
| | 2024-25 | \$205,654,101 | \$172,244,000 | \$980,000 | \$378,878,101 |
| | 2025-26 | \$244,080,100 | \$172,244,000 | \$980,000 | \$417,304,100 |
| Change in 2025- 26 from 2018-19 | Dollars | \$114,414,600 | \$57,259,000 | \$0 | \$171,673,600 |
| | Percent | 88.2% | 49.8% | 0.0% | 69.9% |

Note: Represents appropriations in the enacted Aid to Localities budgets. "Other" is grants and bequests.

Over this period of time, increases from the General Fund have been authorized for:

- Unmet Need through EISEP and separate appropriations;
- Community Services for the Elderly and Wellness In Nutrition programs;
- A range of existing and new purposes such as supporting the Long-Term Care Ombudsman, accessing digital technology, combatting social isolation and elder abuse, training and supporting caregivers, developing the State's Master Plan for Aging, among other items. See the following table for more detail from recent budgets.

**Appropriations with General Funds in NYSOFA' Aid to Localities Enacted Budgets
(sorted by 2025-26 amounts)**

| Program | 2021-22 | 2022-23 | 2023-24 | 2024-25 | 2025-26 |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|
| Expanded In-Home Services for the Elderly (EISEP) | \$65,120,000 | \$67,498,000 | \$67,498,000 | \$68,357,277 | \$69,866,436 |
| EISEP Addition | | | \$9,300,000 | | |
| Unmet Needs of the Elderly | \$8,000,000 | \$8,000,000 | \$8,000,000 | \$18,000,000 | \$53,000,000 |
| Community Services for the Elderly (CSE) Program | \$29,801,000 | \$33,617,000 | \$37,682,638 | \$39,509,508 | \$41,663,244 |
| CSE Additions | \$2,250,000 | \$2,250,000 | | | |
| Wellness in Nutrition (WIN) Program | \$28,281,000 | \$33,474,000 | \$35,648,296 | \$38,153,816 | \$40,491,920 |
| Long-Term Care Ombudsman Program | \$1,190,000 | \$1,190,000 | \$3,690,000 | \$3,690,000 | \$6,190,000 |
| LTC Ombudsman Addition | \$250,000 | \$2,500,000 | \$2,500,000 | \$2,500,000 | |
| Naturally Occurring Retirement Communities (NORCs) | \$2,027,500 | \$2,027,500 | \$4,027,500 | \$4,027,500 | \$4,027,500 |
| Neighborhood Naturally Occurring Retirement Communities (NNORCs) | \$2,027,500 | \$2,027,500 | \$4,027,500 | \$4,027,500 | \$4,027,500 |
| NORC/NNORC Addition | \$5,000,000 | \$4,825,000 | \$1,000,000 | \$1,000,000 | \$1,000,000 |
| Managed Care Consumer Assistance Program | \$1,767,000 | \$1,767,000 | \$1,767,000 | \$1,767,000 | \$1,767,000 |
| Lifespan Elder Abuse Prevention Program – Enhanced Multi-Disciplinary Teams | \$500,000 | \$500,000 | \$500,000 | \$1,500,000 | \$1,500,000 |
| Lifespan for Expanding Bill Payer Programs | | | \$750,000 | \$750,000 | \$750,000 |
| Elderly Abuse and Outreach Program (2025-26: refers to Lifespan) | \$745,000 | \$745,000 | \$745,000 | \$745,000 | \$745,000 |
| Lifespan Elder Abuse Outreach and Mitigation | \$250,000 | \$250,000 | \$250,000 | \$250,000 | \$250,000 |
| Lifespan Addition | \$125,000 | \$375,000 | \$375,000 | \$375,000 | \$375,000 |
| Transportation Operating Expenses for the Elderly | \$1,121,000 | \$1,121,000 | \$1,121,000 | \$1,121,000 | \$1,121,000 |
| Providers of Social Model Adult Day Services | \$1,072,000 | \$1,072,000 | \$1,072,000 | \$1,072,000 | \$1,072,000 |
| State Master Plan on Aging | | \$500,000 | \$1,500,000 | \$1,000,000 | \$1,000,000 |
| Guardianship Hotline | | | \$1,000,000 | \$1,000,000 | \$1,000,000 |
| Health Insurance Information, Counseling and Assistance Program | \$1,000,000 | \$1,000,000 | \$1,000,000 | \$1,000,000 | \$1,000,000 |
| Holocaust Survivors Initiative | \$1,000,000 | \$1,000,000 | \$1,000,000 | \$1,000,000 | \$1,000,000 |
| Holocaust Survivors Initiative Additions | \$500,000 | \$1,600,000 | \$1,430,000 | \$1,430,000 | \$1,430,000 |
| Programs to Combat Social Isolation | | \$900,000 | \$900,000 | \$900,000 | \$900,000 |
| Metropolitan NY Coordinating Council on Jewish Poverty | | \$900,000 | \$900,000 | \$900,000 | \$900,000 |
| Accessing Digital Technology and Internet Services | | \$700,000 | \$700,000 | \$700,000 | \$700,000 |
| LISMA Foundation, Inc. | | | \$500,000 | \$700,000 | \$700,000 |
| State Aid Grants to Providers of Respite Services | \$656,000 | \$656,000 | \$656,000 | \$656,000 | \$656,000 |
| GoGo Grandparent for Transportation Expansion and Capacity Building | | \$500,000 | \$500,000 | \$500,000 | \$500,000 |
| Congregate Services Initiative | \$403,000 | \$403,000 | \$403,000 | \$403,000 | \$403,000 |
| TRUALTA Caregiver Training and Support | | \$400,000 | \$400,000 | \$400,000 | \$400,000 |
| Regional Aid for Interim Needs, Inc | \$290,000 | \$865,000 | \$300,000 | \$400,000 | \$400,000 |
| Caregiver Resource Centers | \$353,000 | \$353,000 | \$353,000 | \$353,000 | \$353,000 |
| Association on Aging in New York State | \$250,000 | \$250,000 | \$250,000 | \$250,000 | \$250,000 |
| Retired and Senior Volunteer Program (RSVP) | \$216,500 | \$216,500 | \$216,500 | \$216,500 | \$216,500 |
| Older Adults Technology Services Center | \$200,000 | \$200,000 | \$200,000 | \$200,000 | \$200,000 |
| Various Aging Initiatives | | \$3,500,000 | | \$3,000,000 | |
| Other | \$9,496,013 | \$4,343,000 | \$2,699,000 | \$3,800,000 | \$4,225,000 |
| Total | \$163,891,513 | \$181,525,500 | \$194,861,434 | \$205,654,101 | \$244,080,100 |

Note: Other includes appropriations for cost-of-living adjustments.

Source: State Enacted Budgets: Aid to Localities at <https://www.budget.ny.gov/>.

Endnotes

- 1 New York State Department of Health's Office of Aging and New York State Office for the Aging, *New York State Master Plan for Aging* at <https://planforaging.ny.gov/system/files/documents/2025/06/mpa-final-report-6.30.25.pdf>; and No. 23: Establishing the New York State Master Plan for Aging (Executive Order 23), November 4, 2022 at <https://www.governor.ny.gov/executive-order/no-23-establishing-new-york-state-master-plan-aging>; and <https://www.ny.gov/programs/new-york-states-master-plan-aging>.
- 2 New York State, *Preliminary Report of the New York State Master Plan for Aging*, August 28, 2023 at https://planforaging.ny.gov/system/files/documents/2025/03/mpa_preliminary_report_final.pdf.
- 3 New York State Department of Health and Department for Aging, *Preliminary Report of the New York State Master Plan for Aging*, August 28, 2023 (released publicly on September 17, 2023) at https://www.ny.gov/sites/default/files/2023-09/MPA_Preliminary_Report_FINAL.pdf; and Linda P. Fried, MD, MPH, Maureen Henry, JD, PhD, John R. Beard, MBBS, PhD and John W. Rowe, MD, *Public Health 4.0: Creating Health for Longer Lives* (Public Policy and Aging Report, 2023, 33, 86-91) at <https://academic.oup.com/ppar/article-abstract/33/3/86/7261052>.
- 4 New York State Office for the Aging, *New York State's Program to Address Unmet Need in Aging Services, 2024* at <https://aging.ny.gov/system/files/documents/2025/04/nysofa-2024-report-on-unmet-need-funds.pdf> (see page 11 and NYSOFA's reference to use of an American Community Survey Special Tabulation on Aging, 2019); and *2023-2027 New York State Plan on Aging* at https://aging.ny.gov/system/files/documents/2023/09/2023-2027-new-york-state-plan-on-aging_final.pdf (see page 111 referring to "approximately 30 percent of the 4,381,355 individuals aged 60 and older in New York State were functionally impaired by chronic health conditions."
- 5 New York State Department of Health and Department for Aging, *Preliminary Report of the New York State Master Plan for Aging*, August 28, 2023 (released publicly on September 17, 2023) at https://www.ny.gov/sites/default/files/2023-09/MPA_Preliminary_Report_FINAL.pdf.
- 6 Ibid.
- 7 New York State Department of Health and Department for Aging, *Preliminary Report of the New York State Master Plan for Aging*, August 28, 2023 (released publicly on September 17, 2023) at https://www.ny.gov/sites/default/files/2023-09/MPA_Preliminary_Report_FINAL.pdf reference to AARP, AARP Livable Communities, *New York Commits to Being Age-Friendly*, February 2018.
- 8 Rebecca Preve, Executive Director, Association on Aging NY (AgingNY), in New York State Assembly, Assembly Standing Committee on Aging, *Public Hearing: Expanded In-Home Services for the Elderly Program (EISEP)*, October 17, 2024 (transcript), pages 87-88 at https://nystateassembly.granicus.com/DocumentViewer.php?file=nystateassembly_b3b4c1cd778b61763575847973285726.pdf&view=1.
- 9 Ryan Murray, Executive Deputy Commissioner and Chief Program Officer, New York City Department for the Aging in New York State Assembly, Assembly Standing Committee on Aging, *Public Hearing: Expanded In-Home Services for the Elderly Program (EISEP)*, October 17, 2024 (transcript), pages 50-51 at https://nystateassembly.granicus.com/DocumentViewer.php?file=nystateassembly_b3b4c1cd778b61763575847973285726.pdf&view=1.
- 10 New York State Department of Health and Department for Aging, *Preliminary Report of the New York State Master Plan for Aging*, August 28, 2023 (released publicly on September 17, 2023) at https://www.ny.gov/sites/default/files/2023-09/MPA_Preliminary_Report_FINAL.pdf.
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- 12 Greg Olsen, Director of the New York State Office for the Aging in New York State Assembly, Assembly Standing Committee on Aging, *Public Hearing: Expanded In-Home Services for the Elderly Program (EISEP)*, October 17, 2024 (transcript) at https://nystateassembly.granicus.com/DocumentViewer.php?file=nystateassembly_b3b4c1cd778b61763575847973285726.pdf&view=1; and Association on Aging in New York, *Written Testimony of Rebecca Preve, Executive Director, Association on Aging NY (AgingNY), Joint Budget Hearing - Human Services*, February 12, 2025 at <https://www.nysenate.gov/sites/default/files/admin/structure/media/manage/filefile/a/2025-02/association-on-aging-in-new-york.pdf>.
- 13 Department of State, *State Register/Codes, Rules and Regulations of the State of New York* at <https://dos.ny.gov/state-register>. See Title 9. Executive Department, Subtitle Y. New York Office for the Aging,

Chapter II. Older Americans, Community Services, and Expanded in-Home Services for the Elderly Programs, Parts 6651 through 6656.8 (see especially Part 6654). See also <https://www.law.cornell.edu/regulations/new-york/title-9/subtitle-Y>.

- 14 Greg Olsen, Director of the New York State Office for the Aging in New York State Assembly, Assembly Standing Committee on Aging, *Public Hearing: Expanded In-Home Services for the Elderly Program (EISEP)*, October 17, 2024 (transcript) at https://nystateassembly.granicus.com/DocumentViewer.php?file=nystateassembly_b3b4c1cd778b61763575847973285726.pdf&view=1.
- 15 Ibid.
- 16 New York State Office for the Aging, 2023-2027 New York State Plan on Aging at https://aging.ny.gov/system/files/documents/2023/09/2023-2027-new-york-state-plan-on-aging_final.pdf; and New York State's Program to Address Unmet Need in Aging Services, 2024 at <https://aging.ny.gov/system/files/documents/2025/04/nysdfa-2024-report-on-unmet-need-funds.pdf>. Activities of Daily Living represent New York's/NYSOFA's Personal Care II. Instrumental activities of daily living (IADLs) make up New York's/NYSOFA's Personal Care I.
- 17 Department of State, *State Register/Codes, Rules and Regulations of the State of New York* at <https://dos.ny.gov/state-register>. See Title 9. Executive Department, Subtitle Y. New York Office for the Aging, Chapter II. Older Americans, Community Services, and Expanded in-Home Services for the Elderly Programs, Parts 6654.16 (b) EISEP case management also at <https://www.law.cornell.edu/regulations/new-york/title-9/subtitle-Y>. "Case management consists of the following functions: screening, assessment, care planning, determining eligibility for program subsidy, arranging and authorizing service delivery, services follow-up and client monitoring, reassessment and discharge. The conduct of screening, assessment, care planning and eligibility determination in compliance with this section is a prerequisite for the provision of in-home services, ancillary services, or noninstitutional respite under EISEP."
- 18 New York State Elder Law, Article II, Title 1. When it was enacted, the Community Services for the Elderly Act was section 541 of Article 19-J of the Executive Law of New York State.
- 19 New York State Elder Law, Article II, Title 1, section 214 subdivision 4; and New York State Office for the Aging, *Program Instruction 25-PI-04 2025 Financial Levels for EISEP and CSE Client Cost Share and Potential Medicaid Eligibility Determination*, April 1, 2025 at <https://aging.ny.gov/system/files/documents/2025/04/25-pi-04-2025-financial-levels-for-eisep-and-cse-client-cost-share-and-potential-medicaid-.pdf>.
- 20 Chapter 53 of the 2013 Laws of New York (State Fiscal Year 2013-14 Aid to Localities Budget (S.2603-E/A.3003-E)).
- 21 New York State Office for the Aging, *Wellness in Nutrition Program (WIN)* at <https://aging.ny.gov/wellness-nutrition-program-win>.
- 22 New York State Office for the Aging, 2023-2027 New York State Plan on Aging, page 17 at https://aging.ny.gov/system/files/documents/2023/09/2023-2027-new-york-state-plan-on-aging_final.pdf.
- 23 Association on Aging in New York, *Written Testimony of Rebecca Preve, Executive Director, Association on Aging NY (AgingNY), Joint Budget Hearing - Human Services*, February 12, 2025 at <https://www.nysenate.gov/sites/default/files/admin/structure/media/manage/filefile/a/2025-02/association-on-aging-in-new-york.pdf>.
- 24 For the most recent report, see New York State Office for the Aging, *New York's Program to Address Unmet Need in Aging Services, 2024* at <https://aging.ny.gov/system/files/documents/2025/04/nysdfa-2024-report-on-unmet-need-funds.pdf>.
- 25 Office of the New York State Comptroller, *New York State Office for the Aging, Monitoring of Select Programs, Report 2020-S-47*, January 2022 at <https://www.osc.ny.gov/state-agencies/audits/2022/01/21/monitoring-select-programs>.
- 26 New York State Office for the Aging, *Program Instruction, Number 19_PI-29 (Supersedes 19-PI-10)*, October 25, 2019 at https://aging.ny.gov/system/files/documents/2019/11/19_pi_29_sfy_2019_2020_budget_15_million_to_address_unmet_need.pdf; NYSOFA's 2019; NYSOFA's 2019 Program Instructions for this purpose include 19-PI-10, 19-PI-19 and 19-PI-29. NYSOFA's 2019 Program Instructions explained that AAAs reporting unmet needs in SFY 2017-18 would receive funding: "...calculated by taking the number of people eligible for, but not receiving services for, a particular service and multiplying it by that AAA's annual expense for that service. It is understood that those needs as reported were a snapshot in time and fluctuate in terms of numbers of people in need of services or the type of service needed...The funds provided to the AAAs to address unmet needs will therefore be available to the AAAs to be used flexibly."

- 27 Office of the New York State Comptroller, New York State Office for the Aging, *Monitoring of Select Programs, Report 2020-S-47*, January 2022 at <https://www.osc.ny.gov/state-agencies/audits/2022/01/21/monitoring-select-programs>.
- 28 New York State Office for the Aging, *Program Instruction, Number 24-PI-12, Subject: 2024 Unmet Need Data Collection*, August 30, 2024 at <https://aging.ny.gov/system/files/documents/2024/08/24-pi-12-unmet-need-data-collection-program-instruction-2024.pdf>. See form and Attachment A linked to in this document. On August 30, 2024, NYSOFA released a Program Instruction (PI) to AAA directors for submitting 2024 unmet need data through an electronic form. The PI provides the following options for selection prior to indicating the number of individuals in need of a particular service: “Service not offered”; “No waitlist maintained”; or “Waitlist maintained”. According to the instructions on the electronic form, if a service is not offered or no waitlist is maintained, AAAs are directed to enter “0”.
- 29 Testimony from the American Association of Retired Persons notes this number could range between 11,000 to 18,000. See Beth Finkel, State Director, American Association of Retired Persons (AARP) in New York State Assembly, Assembly Standing Committee on Aging, *Public Hearing: Expanded In-Home Services for the Elderly Program (EISEP)*, p. 71, October 17, 2024 (transcript) at https://nystateassembly.granicus.com/DocumentViewer.php?file=nystateassembly_b3b4c1cd778b61763575847973285726.pdf&view=1
- 30 New York State Department of Labor, *Annual Quarterly Census of Employment and Wages (QCEW)* at <https://dol.ny.gov/quarterly-census-employment-and-wages>. See QCEW data for calendar year 2024.
- 31 New York State Office for the Aging, *2023-2027 New York State Plan on Aging* at https://aging.ny.gov/system/files/documents/2023/09/2023-2027-new-york-state-plan-on-aging_final.pdf.
- 32 New York State Department of Health’s Office of Aging and New York State Office for the Aging, *New York State Master Plan for Aging* at <https://planforaging.ny.gov/system/files/documents/2025/06/mpa-final-report-6.30.25.pdf>.
- 33 New York State Department of Labor, *Annual Quarterly Census of Employment and Wages (QCEW)* for calendar year 2024 at <https://dol.ny.gov/quarterly-census-employment-and-wages>. See North American Industry Classification System (NAICS) 6216: Home Health Care Services (372,980 employees) and NAICS 62412: Services for the Elderly and Disabled (240,953 employees). The latter industry includes jobs providing care to people with disabilities who may or may not be receiving services under NYSOFA.
- 34 New York State Department of Health’s Office of Aging and New York State Office for the Aging, *New York State Master Plan for Aging*, p. 38 at <https://planforaging.ny.gov/system/files/documents/2025/06/mpa-final-report-6.30.25.pdf>.
- 35 New York State Office for the Aging, *2023-2027 New York State Plan on Aging* at https://aging.ny.gov/system/files/documents/2023/09/2023-2027-new-york-state-plan-on-aging_final.pdf; and *New York State’s Program to Address Unmet Need in Aging Services, 2024* at <https://aging.ny.gov/system/files/documents/2025/04/nysofa-2024-report-on-unmet-need-funds.pdf>.
- 36 New York State Public Health Law, Article 36, *Home Care Services, section 3614-f*. See also New York State Department of Health, *MLTC Home Care Minimum Wage Guidance*, and *Home Care Worker Minimum Wage Guidance* at https://www.health.ny.gov/health_care/medicaid/redesign/mrt61/2022-09-12_hcw_min_wage_guide.htm; and New York State Department of Labor, *Home Care Aide* at <https://dol.ny.gov/system/files/documents/2024/12/p105-home-health-aide-10-23-24.pdf#:~:text=Beginning%20October%201%2C%202022%2C%20through,remainder%20of%20New%20York%20State>. This includes home health aides.
- 37 Greg Olsen, Director of the New York State Office for the Aging in New York State Assembly, Assembly Standing Committee on Aging, *Public Hearing: Expanded In-Home Services for the Elderly Program (EISEP)*, October 17, 2024 (transcript) at https://nystateassembly.granicus.com/DocumentViewer.php?file=nystateassembly_b3b4c1cd778b61763575847973285726.pdf&view=1.
- 38 New York State Social Services Law, sections 365-a. 2. (e) (v) and 365-f. 2.; *Written Testimony of Rebecca Preve, Executive Director: Association on Aging NY (AgingNY), 2024 Human Services Budget Hearing* at <https://www.informny.com/wp-content/uploads/sites/58/2024/02/Joint-Budget-hearing-1.pdf>; and Paul Francis (Step Two Policy Project), *What Happened? And What’s Next? (Commentary #21)*, July 24, 2025 at <https://www.steptwopolicy.org/post/what-happened-and-what-s-next>.
- 39 119th Congress (2025-2026) *H.R. 1 - One Big Beautiful Bill Act* at <https://www.congress.gov/bill/119th-congress/house-bill/1/text>.
- 40 *President’s Budget* at <https://www.whitehouse.gov/omb/information-resources/budget/>; U.S. Department of Health and Human Services, *Fiscal Year 2026, Budget in Brief* at <https://www.hhs.gov/sites/default/files/fy-2026-budget-in-brief.pdf>; National Council on Aging, *Current Federal Budget and Appropriations for Aging Services Programs*,

June 05, 2025 at <https://www.ncoa.org/article/current-federal-budget-and-appropriations-for-aging-services-programs/>; and Meredith Freed, Juliette Cubanski, Tricia Neuman (Kaiser Family Foundation), *What to Know About the Older Americans Act and the Services it Provides to Older Adults*, June 3, 2025 at <https://www.kff.org/medicare/issue-brief/what-to-know-about-the-older-americans-act-and-the-services-it-provides-to-older-adults/>.

41 U.S. Department of Health and Human Services, *Fiscal Year 2026, Budget in Brief* at <https://www.hhs.gov/sites/default/files/fy-2026-budget-in-brief.pdf>.

42 Meredith Freed, Juliette Cubanski, Tricia Neuman (Kaiser Family Foundation), *What to Know About the Older Americans Act and the Services it Provides to Older Adults*, June 3, 2025 at <https://www.kff.org/medicare/issue-brief/what-to-know-about-the-older-americans-act-and-the-services-it-provides-to-older-adults/>.

43 New York State Department of Health's Office of Aging and New York State Office for the Aging, *New York State Master Plan for Aging* at <https://planforaging.ny.gov/system/files/documents/2025/06/mpa-final-report-6.30.25.pdf>.

44 Ibid.

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