



A Master Plan for Aging for New York

Stakeholder Advisory Committee Meeting #1

JANUARY 9, 2023

Attributes of the Master Plan for Aging

- A unified approach across settings and services
- Holistic, taking into account medical, behavioral and social determinants of health
- Transparent, so that costs are understood and advanced, so beneficiaries know what services are covered by insurance or other funding sources
- More than health: a set of strategies that reflect the relationships among housing, transportation, community support and quality of life
- Equitable, acknowledging challenges related to geography, race and language and ethnicity
- Evolving, so recommendations can be updated with best practices, and policies that can be responsive to observed outcomes
- What we can do to collectively to assure conditions in which people can age

What the Master Plan Should Not Be

- A “start from the beginning,” as New York has done a significant amount of work on aging, and the Master Plan will leverage and build upon that work.
- A focus on identifying only challenges and obstacles facing older New Yorkers. The Master Plan will instead seek to outline a proactive vision for supporting New Yorkers as they age.
- A process limited to the offices and agencies in this room. The Master Plan will seek input from other stakeholders in aging, experts in related fields, partners on the ground working at the local level, and New York's citizens.
- A fixed, unchangeable product. The Master Plan should be regularly assessed and updated after its initial adoption.

Role of the Stakeholder Advisory Committee

The Stakeholder Advisory Committee will be the entity that does the following:

- Prioritizes and identifies areas of focus of the Master Plan for Aging
- Works alongside the Department of Health and the New York State Office for the Aging to engage members of the public to further refine the goals and focus of the Master Plan
- Creates and oversees topic specific subject focus groups/subcommittees
- Collaborates with the State Agency Council to create the reports mandated by the Executive Order
- Consult and collaborate with Association Resource Groups to ensure local feedback statewide
- Creates and prioritizes a comprehensive set of recommendations for action that will include strategies to streamline and support an aging system into the coming decades

Proposed Guiding Principles for Informing & Developing the Master Plan

- 1 Require and ensure **person-centered planning** regardless of care setting
- 2 Support individuals to live in the **most integrated setting** most appropriate to their needs, and recognize how housing supply affects aging
- 3 Achieve **equitable and inclusive access and quality of care** across geography, race, ethnicity and language
- 4 Provide individuals, family, caregivers and friends with **accurate and timely information** to understand their options for medical and logistical needs, including transportation and food security
- 5 Provide for **fair pay and appropriate working conditions** in all long-term care settings
- 6 Utilize State authority – **licensing, regulatory and payment** - to ensure quality of care
- 7 Recognize and secure the role of **non-profit, religious and other community organizations** to support aging in place, and address social support for quality of life
- 8 Ensure that **long term care providers and plans receive funding consistent** with their service obligations and allow for access to quality care
- 9 Achieve **meaningful budget predictability and savings** through Medicare alignment and acute care savings

Potential Areas of Focus/ Subcommittees

The Executive Order establishes three subcommittees:

- Long term care services and supports
- Community-based services
- Caregivers

Additional subject matter subcommittees to consider as well as cross-cutting themes (e.g., Diversity, Equity and Inclusion):

- Housing
- Community Planning and Development
- Health and Wellness
- Economic Security
- Safety and Security
- Communication & Information
- Support for special populations, e.g., SMI, I/DD, Alzheimer's and other forms of dementia
- Technology
- Local Services and Implementation

Expected
Timeline for
Development of
Master Plan for
Aging

Early 2023

Establish State Agency Council and Stakeholder Advisory Committee/Convening of Subject Focus Groups and Association Resource Groups

Summer 2023

Preliminary Advisory Report Due

Throughout 2023

Continued Public Engagement

Early 2024

Draft Final Advisory Report

Late 2024

Adopt Final Master Plan

Master Plan Website

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PROGRAMS

New York State's Master Plan for Aging

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OVERVIEW

Under the leadership of Governor Kathy Hochul, New York State has embarked on a State Master Plan for Aging (MPA). The MPA is designed to ensure that older adults and individuals of all ages can live healthy, fulfilling lives while aging with dignity and independence.

The New York State Department of Health (NYSDOH) and New York State Office for the Aging (NYSOFA) are coordinating the MPA, building on decades of work and partnerships with state agencies, local governments and stakeholders. [Learn more about the MPA.](#)

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All New Yorkers deserve to age in their community with dignity and independence.

Governor Kathy Hochul

Why a Master Plan for Aging?

New York ranks fourth in the nation in the number of individuals aged 60 and over, at 4.6 million. By 2030, this population is expected to reach 5.3 million. This population brings enormous economic, social and cultural value to their communities.

New York State's Aging and Disability Landscape

Programs, services and supports for the aging population are administered by the Department of Health, NYSOFA and their partner agencies (OMH, OASAS, and OPWDD, as well as others).

This includes regulation of facilities like hospitals and nursing homes, administration of Medicaid and other payor programs, and direct funding of specialized services like behavioral health programs.

It also includes the administration, funding and/or regulation of non-health programs, such as supportive housing, transportation assistance, and systemic advocacy.

Many of these services are addressed through the State's 59 local Area Agencies on Aging (AAAs), administered by NYSOFA.

The State estimates that the total spending on long-term services is **\$32 billion** dollars annually, more than any other service that the State supports.

Aging Services and Supports

Aging support begins substantially before entering the long term care system.

Aging supports and services, many administered by NYSOFA, include:

- Employment and volunteer opportunities to support social connectivity and economic security
- Providing Evidence-Based Interventions for individuals with chronic conditions or in need of minor assistance, as well as case management
- In-home supports to help individuals caring for a loved one with functional and/or cognitive impairments.
- Health Insurance information, counseling and assistance (HIICAP)
- Medicare counseling to decrease out-of-pocket costs and help the consumer choose appropriate coverage.
- Elder abuse prevention
- Long Term Care Ombudsman
- Title V Workforce
- Home modifications and repairs

The average Office for the Aging client at risk is: 83-year-old woman, lower income, lives alone, has 4 or more chronic conditions, and is on the NYSOFA caseload for 6 years at a cost of less than \$10,000 per year – a significant savings to Medicaid.

Medicaid Programs

Medicaid funds a broad array of payor programs and targeted services and facilities:

- Managed care plans, including:
 - Managed Long Term Care Plans
 - Medicaid Advantage Plus
 - Medicaid Managed Care (Mainstream)
- Facilities, including:
 - Assisted Living Program
 - Skilled Nursing Facilities
- Hybrid programs, including:
 - Program of All-Inclusive Care for the Elderly (PACE)
 - Health and Recovery Plans (HARP)
- Waiver programs providing specific home and community based services (HCBS), including:
 - Nursing Home Transition and Diversion (NHTD)
 - Traumatic Brain Injury (TBI)
- Other programs targeted at specific populations, including:
 - Money Follows the Person
 - Partnership for Long Term Care

Home and Community- Based Services

Home and Community-Based Services provide opportunities for individuals to receive services in their homes or communities, rather than in residential facilities.

These types of services may include:

- Objective Information and Assistance, such as with benefits
- Comprehensive Person Centered Planning
- Home care (including personal care)
- Caregiving training
- Social adult day care
- Adult day health care
- Palliative care
- Hospice
- Home delivered meals
- Nutrition assistance and counseling
- Respite and caregiver supports
- Evidence based interventions, i.e., fall prevention programs

New York State's Master Plan for Aging - Drawing the Blueprint

Hearing from New Yorkers

We will be soliciting feedback on an ongoing basis, to ensure that the Master Plan engages the needs of all New Yorkers:

Public Mailbox – MPA@health.ny.gov

Planning for Town Halls & Remote Listening Sessions

Statewide Survey

Next Steps for the Stakeholder Advisory Committee

In advance of next month's Committee meeting:

We will be reaching out to each of you to (1) join one or more Subject Focus Groups and (2) to help identify other defining roles and steps to advance our charge. This is where the substantive work of drafting the sections of the Master Plan will occur.

The next meeting of the Stakeholder Advisory Committee will be held:

- Date: February 6th, 2023
- Time: 10:00 a.m. -12:00 p.m.
- Location: 90 Church Street, NYC (A remote option will be made available for those unable to participate in person)