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Testimony on the Executive Proposed Health / Medicaid FY26 Budget

Nurse Practitioners of Metropolitan New York (NPNY)

February 11, 2025

On behalf of Nurse Practitioners of Metropolitan New York (NPNY), I would like to thank the Honorable Finance Chair Senator Krueger, Honorable Ways & Means Chair Assembly Member Pretlow, Health Chair Senator Rivera, Health Chair Assemblywoman Paulin, and distinguished members, for the opportunity to provide testimony.

NPNY is a grassroots not for profit organization founded in 2000 by a group of nurse practitioners and advocates for accessible, affordable, and quality health care. NPNY supports the contributions and importance of NPs to the delivery of health care, empowerment via continuing education and professional networking, policies and legislation that ensure quality health care for New Yorkers. NPNY is the New York Metro Area Group Member of American Association of Nurse Practitioners.

In the light of the current federal executive administration, we are fortunate to live in a region which supports scientific and evidence-based health care. We appreciate sharing thoughts about the New York State's Proposed Executive Budget Proposal and our recommendations. The experiences of our members and patients experiences we have witnessed through the years inform our recommendations below related to the State Budget and legislative agenda. The workforce and our patients continue to experience trauma and adversity needing careful attention to short term, intermediate and long term solutions. It is for that reason, we recommend investment in a workgroup supporting stakeholders, community and government organizations in addition to asking the workforce directly why people left, relocated, stayed, or are choosing different careers.

What We Support

- **NPNY supports the inclusion eligibility of nurse practitioners for appointment to county boards of health and health services advisory boards.** Allowing for flexibility on the composition of the local county health boards while still ensuring that there is healthcare provider expertise, will help to ensure that the county health boards have a full complement of members when decisions on cost-effectiveness of health care delivery are being made, which is not the current case in New York. Recently signed into law S8561 Rivera / A8232 Paulin enacts this.



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- **NPNY supports the NY Health Act.** In an ideal world, health care would be a human right. NPNY appreciates the nuances surrounding health care for all.
- **Reproductive rights, freedoms, protection and privacy.** New York must continue to be a leader in the fight for reproductive freedom for all (patient and provider) by relentlessly pursuing bold policy actions to protect and expand access, and meaningful financial investments in the sexual and reproductive health care delivery system to ensure care is truly available to anyone seeking it.
- **Incentivizing preceptors. NPNY advocates for health care professionals who provide preceptor instruction to students (S4451 Ashby / A2331 McDonald).** Establishes the New York state “Preceptor Stipend Program” to be administered by the office of the professions, under which qualified preceptor clinicians shall receive a \$5,000 stipend; provides for such funds to be distributed from the Office of the Professions account.
- **NPNY supports increasing awareness and access to human milk banks (INT 0167 Farias). A Local Law to amend the administrative code of the city of New York, in relation to requiring the establishment of a municipal human milk bank.** This would require the Department of Health and Mental Hygiene, or another agency or entity designated by the mayor, to take all necessary steps to obtain any required licenses or approvals to establish and operate a human milk bank. The human milk bank would collect, process, store, and distribute breast milk for infants and children.
- **Increased funding for the higher education workforce in the sciences and healthcare workforce including:** Nursing, Nurse Practitioners, Pharmacy, Midwifery, Physician Assistants, CRNA’s, Social Workers, Occupational Therapists, Speech Language Pathologists, and predominantly female professions, historically with unequal pay
- **Affordable Housing.** The lack of affordable housing in many areas of the state contribute to the healthcare workforce shortage and ability to not retain individuals, even prior to the start of COVID-19 pandemic in NY in March, 2020. We would like to continue discussions regarding the cause and effect of locum tenens, travel staff, per diem, and compact licenses.
- **Telehealth coverage and payment parity including behavioral and mental health services.** Telehealth is a way to deliver care. It was an excellent tool for people to receive continuity of care with existing providers whom they had



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established trusting and high quality and therapeutic relationships with throughout the height of the pandemic. Numerous NPs and our patients experienced interruption of providing and receiving care with the nuance of living in the tri-state area and increased relocation. We request additional opportunities to discuss various solutions and stakeholders.

- **Adequate funding for school-based health centers (SBHCs).** SBHCs provide high quality care and is cost effective. SBHCs are staffed by RNs, NPs, PAs, MDs, and social workers. SBHCs reduce inappropriate emergency room use, reduce Medicaid expenditures, improve school attendance, resulting in more willingness by students to seek mental health counseling for depression and suicide attempts and to seek information on pregnancy prevention. In 2018, the Governor signed off on creating a personal income tax check-off box for donations to the school-based health centers fund. It is clear state funding needs to increase to support our children.
- In addition, **NPNY strongly supports removing the sunset clause in 2026 for advanced practice nurses including Nurse Practitioners full practice authority (FPA) in New York State for all practicing NPs.** The Nurse Practitioner Modernization Act (NPMA) enacted in 2022 limited less experienced NPs with under 3600 hours to have collaborative relationships solely with physicians, and not with nurse practitioners. This omission is counter-intuitive. The NPMA in 2014 and enacted in 2015, provided career-long collaborative relationships for which attestations are required. The bill would sunset on 6/2021, but was enacted in 2022.

The American Association of Nurse Practitioners, National Academy of Medicine, (formerly called the Institute of Medicine), National Council of State Boards of Nursing, Federal Trade Commission and National Governors Association affirm **clear evidence** that nurse practitioners provide safe, high quality care with high patient satisfaction. ¹

¹ The IOM-established in 1970 as the health arm of the National Academy of Sciences-provides expert advice to policy makers and the public.

FED. TRADE COMMISSION STAFF, POLICY PERSPECTIVES: COMPETITION AND THE REGULATION OF ADVANCED PRACTICE NURSES (2014). [FTC STAFF POLICY PAPER]

National Governors Association, *The Role of Nurse Practitioners in Meeting Increasing Demand for Primary Care* (Dec. 20, 2012), <http://www.nga.org/cms/home/nga-center-for-best-practices/center-divisions/page-healthdivision/col2-content>



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In conclusion, the need for a multi-pronged approach for recovery efforts of our workforce, increasing affordable and high quality healthcare access is imperative. Now is the time to come together on a multidisciplinary approach to health care delivery. NPNY is optimistic that New York and its elected officials will continue to be **proactive** in preparing for the future of healthcare delivery for all New Yorkers. NPNY looks forward to working with the Legislature to identify and promote top priorities in the State Budget for SFY 2025-26. Please don't hesitate to reach out to me, Audrey Hoover, President ahoov26@gmail.com and Rachael Lerner, Past President rachael.lerner@gmail.com.