

**VETERANS AND SENIORS COMMITTEE  
OF THE  
SUFFOLK COUNTY LEGISLATURE  
MINUTES**

A meeting of the Veterans and Seniors Committee of the Suffolk County Legislature was held in the Rose Y. Caracappa Legislative Auditorium of the William H. Rogers Legislature Building, 725 Veterans Memorial Highway, Smithtown, New York, on May 21, 2015.

**Members Present:**

Legislator Steven Stern - Chairman  
Legislator Tom Barraga - Vice-Chair  
Legislator Sarah Anker  
Legislator Al Krupski  
Legislator Tom Muratore

**Also In Attendance:**

Jason Rosenberg - Chief Deputy Clerk  
George Nolan - Counsel to the Legislature  
Debbie Harris - Aide to Legislator Stern  
Bill Shilling - Aide to Majority Leader  
Tom Ronayne - Director of Veteran's Services  
Holly Rhodes-Teague - Director of Office for the Aging  
Rick Brand - Newsday  
All Other Interested Parties

**Minutes Taken and Transcribed By:**

Gabrielle Severs - Court Stenographer

*(\*The meeting was called to order at 12:41 p.m. \*)*

**CHAIRMAN STERN:**

Okay. Good afternoon, everyone, and welcome to the committee on Vets and Seniors. I'm going to ask everybody to please rise and join us in the Pledge of Allegiance led by Legislator Muratore.

(\*Salutation\*)

Please remain standing and join us in a moment of silence as we keep all of our brave women and men fighting for our freedoms overseas in our thoughts and prayers, particularly as we come into this weekend where we recognize so many that have made the ultimate sacrifice for our great nation as we observe Memorial Day.

(\*Moment of Silence Observed\*)

Thank you.

**MR. RICHBERG:**

Mr. Chairman, we have no cards.

**CHAIRMAN STERN:**

Thank you, Mr. Clerk. Thank you, again, everybody for joining us today. We have a special guest with us today joining us at the Veterans and Seniors Committee. John Cochran, who is the deputy director of the executive division of the New York State Division for the Aging. This is a year where -- periodically the White House -- the federal government holds a White House conference on aging, and that is a major effort going on across the country, and so here to discuss New York State's role in that effort and what's going on at the state level as it regards our older neighbors, Mr. Cochran has very generously accepted the invitation to come spend some time with us today. Welcome.

**MR. COCHRAN:**

Thank you, County Legislator Stern. It's a pleasure to be here with you all today. Again, I'm John Cochran with the state Office for Aging. I came down from Albany to join you today, and on behalf of Director Crossdale and the governor, it's an absolute delight to be able to speak to you about some of the things that we have going on up in Albany and the efforts that we're making to inform the White House Conference For the Aging, which has been underway for the last couple months.

And, County Legislator Stern, thank you for taking the time and joining us earlier this -- I think it was the end of March when you came out to our gathering where we had, I'd say, about 75 people in the room who have joined us for the day to talk about how New York State could help provide some information, provide input into the White House Conference For Aging process.

With that, I wanted to start out, though, with the basic premise that we're looking at that White House Conference For the Aging as an opportunity to think through about how we can modernize the aging network, how we can create an enhanced innovation about what is a system that has remained pretty much unchanged in terms of the way it operates. The State Office For Aging is the designated unit by the federal government in New York State to receive Older American Act dollars. NYSOA, for the New York State Office for Aging, receives about \$77 million in funding through the federal government that is directed to us through the Older Americans Act through the executive budget, which is then, as we know, are reviewed by the legislature. There's about \$130 million that comes to us through the state government, and then when you combine the local resources that counties like Suffolk County contribute and across the state when you add it all up, there's \$204

million total that our local county partners are contributing. And in Suffolk County, you have an excellent Office For Aging director in Holly Rhodes-Teague. She is an asset, and she is considered to be one of our leaders in the aging world, and as a county partner, we value everything that she's been doing, and we value her expertise and all that she brings to the table.

So when you look at our total operating budget and you talk about the contributions that are being made locally, we're looking at total budget of about \$411 million, and I know in terms of context of the state budget, that is not a lot of money, but we think that the money that we do get, the resources that we do have in our system, we use incredibly efficiently. We are incredibly proud of the fact that we are successfully working with individuals who are at high functional need, and what I put in your packet, in the blue packet that was distributed -- I'm assuming everyone's got one; right, everybody?

So if you take a look here, you can see in one of the documents, I laid out NYSOA funding so you can see the resources that are coming in, the different things that we're doing with it, and then when you file through it, you'll see that the types of services we're funding and the profile -- for example, I'm assuming everyone knows about the home delivery meal program. It's probably one of our most political and probably most popular programs. The average age of an individual receiving a home-delivered meal is 81, and when you look at the individuals who are receiving meals, quite a few of them have very high levels of functional impairment, meaning that they're very close to requiring nursing home care or are potentially in need of nursing home care. But for the fact that they're getting a home-delivered meal and potentially some support services, they're able to live independently.

Now, we all know the cost of living in a nursing home or residential setting is very high and we're very proud of the fact that through services provided at the local level and here again The Suffolk County Office For the Aging that there's been a great deal of success in keeping individuals in their homes. I wanted to point out that the mission of the New York State Office for Aging is to help people live independently in the community for as long as possible. That premise has evolved because of, one, an understanding that's where people want to be. As people age, they want to be able to stay in their homes. They want to be amongst their family and friends, and by design, our program, our network, the programs that we funded are designed to assist in helping that happen and facilitating that.

One of the things that is part of our conversations around the White House Conference for Aging that we've been talking about is understanding that older adults are significantly contributing to our communities, and one of the things that we've been doing statewide is digging into the, shall we say, the economics of aging because what we understand is that sometimes the dialogue around what older adults are contributing to our communities is overlooked. It's overshadowed by the thought older people are constantly using up resources. They're a significant drain on society. We hear those comments. We hear it all the time. We realize that some people do have that view of an older adult, as they're potentially working with a family member who's older and struggling to stay home that, you know, you get the calls late. It can be very draining. It can be very emotional. It can be very, shall we say, inconvenient sometimes, but the reality is that when you take a look at older adults in totality and what they're contributing, in Suffolk County, it's interesting when you look at the total number of Social Security dollars that flow annually into Suffolk County, \$4.47 billion annually flows into this county as a result of Social Security number payments.

Total personal income generated in the county based on some information that we were able to obtain shows about \$54 billion is the personal income generated total in the county, but when you break out where that money is being generated and you break it out by age bracket, we're looking at 65-plus contribute \$8.6 billion when you combine Social Security, savings, and pension dollars

that are flowing through their accounts; and when you take the 45 to 64 group, that's total about 28.3 billion. So when you calculate and you think through, what do older adults bring to a community, well, they bring economic value and they bring economic stability into a community, pension checks, Social Security checks, they flow every month.

Those dollars come into people's accounts that money then flows into a community for basic services that people need to live independently, whether it be -- I think about my own mom. She's over in Setauket. We were talking this morning about the things that she needs to do to the house. Well, she's going to pay someone to do work in the house: paint, for example, work on the some of the shingles in the front of the house. I live up in Albany; I can't come down and take care of those things all the time anymore. Basically, this is same plate that older adults around the state are engaged in, and so what we like to think about as part of thinking through an innovative way to think about what older adults are doing in the state is that to get people to recognize and as policymakers to recognize that you want older adults to stay in communities, you want them to be there because it's a stable source of economic development for communities.

Typically, older adults tend to utilize local businesses because they feel an alliance. They know people in those businesses. They tend to use them at a higher rate. They would go out of their way to support a local business. In upstate New York, when you look at some of the people in some of the areas, when you look at the demographics, older adults are the primary population. They are the primary economic drivers in communities. In Suffolk County, we know that there are a lot of older people. They contribute significantly. It's just something that we ask that people process as part of a policy debate, and as you're shaping the dialogue around, seeking to garner the support of your fellow colleagues in the legislature as part of your process of engaging at the local level and when you go to a senior center and recognizing older people not only for their niceness and the fact that they voted at higher rates than other age groups but that they are contributing significantly.

The other interesting thing about older adults is that homeownership rates, age 60-plus, 83 percent of older adults own their own homes. No mortgages -- 60 percent of those don't have a mortgage, so basically these people are living in the community, they're paying their real property tax dollars, most of them don't have kids in the school or are caring for a grandchild that is living in their home, so when you think about that, that's just another interesting little aspect.

The other thing is that older adults contribute significantly through their volunteerism and service. In Suffolk County, there's a calculation that was done by the National Corporation for National and Community Service, which calculated there are about 970,971 hours, to be exact, that volunteers who are older are contributing to service providers around the county. And when you value that, it's about 27 million in economic value if you were to pay these individuals for the time that they contribute to their community, whether as a mentor, working with another older adult in volunteering to do a home-delivered meal, or whether it be in any of the capacities that older adults often engage in at the local level.

So with that being said, what we've been trying to do is to work in the basic premise of value that older adults are contributing significantly to the economic value and to the economic success of New York and that we want older people to stay in this state. We want them to stay in their communities. We want them to be able to live independently because we know that they are a primary economic driver in their community.

Now, the White House Conference for Aging, that's something I know that Legislator Stern asked me to talk about today is that I think it's important to understand the overview of what some of the things are that we're trying to articulate and we're trying to get people to understand the value of older adults, to understand the reality of older adults and what they bring to a community, and to

also understand that in Suffolk County, there's about \$17.8 million that goes through our process in Albany that is used by your county by the County Office for Aging to provide services across the county, and they will be serving individuals from across the county to aggressively work with them through your local towns to provide services to individuals.

So it's good to know that there's a good investment being made by the county, by the state in Suffolk County to be able to provide services to individuals and that to help facilitate that, we know that Holly is doing a fantastic (indiscernible) job for you guys.

Now, specifically around the White House Conference For Aging, I wanted to point out in your packet is a document that lays out the process that we've engaged in to solicit feedback and input from individuals across the state. This is something that we put together to articulate and to provide detail to folks so that they understood exactly what we're doing. We've partnered up with the organization that is -- represents the county offices for the aging across the state. Laura Cameron is the executive director of the Association on Aging in New York, and that's a -- again, that's a trade group that represents the county offices for the aging, and working with them and working with AARP as partners, we've successfully, we believe, engaged in a process that helps us facilitate input from across the state from a variety of stakeholders in some of the key areas that the White House Conference and the president are looking for feedback on. The White House Conference for Aging is a conference that's held each decade, and it's been done since 1960, and it's done to advance and identify actions to improve the quality of life for older adults. The 2015 conference is an opportunity, we believe, to look ahead to reshape the issues and the way service is delivered and also to help reshape the dialogue on aging in the country. We know again the conversation around Social Security, we know the conversation around resources being provided to help older adults is sometimes framed within the context of people taking rather than giving, and it's important to realize that we want individuals to remain in their communities where their economic value, their economic contributions, and their service is being recognized.

In 2015 marks the 50 anniversary of Medicare, Medicaid, and the Older Americans Act as well as the 80 anniversary of Social Security. Now we know with the passage of Medicare and we know with the passage of Medicaid, that has so greatly enhanced the lifespan of older people in this country. It's unbelievable the success that the Medicare program and Medicaid had in terms of changing the dynamics and changing the healthcare of the country. Now, when we look back at Medicare and the formation of Medicare, it was often considered to be a potential vehicle for creating what was a large system of providing healthcare services, and the Older Americans Act was considered a process of providing community-based services that would help prevent people from acquiring higher levels of service needs that were being provided through a medical system.

So recognizing that and recognizing the importance of these key programs and their interrelationship, basically we're looking to help reshape and reform some of these basic programs. In the 2015 White House Conference for Aging, we were committed -- NYSOFA was committed to hosting a series of events around the state to seek broad public engagement, and we work closely with our stakeholders in pulling this together. White House Conference issues that were selected basically were being focused on during a series of White House Conference listening sessions that were held in -- that began in July of 2014 and will continue until the conference in July of this year, 2015. Director Crossdale and some staff will be attending the Boston regional event on May 28 -- that's coming up -- and be providing some comments, not officially written, not an official written statement at this point, but we'll be providing feedback in terms of how that process has been -- the information that we receive and how we've been able to inform that process.

So basically the themes of the White House Conference for Aging, one was retirement security, how do we enhance healthy aging, how do we better provide long-term care supports and services, and

the fourth one was around elder justice. So how did we provide input, and how are we collecting input? Well, we're providing input to a national website and then we had our own process established that where we have a survey tool that's gone live that the Association on Aging in New York is hosting, and we also hosted five regional forums in March, and you can see the website that we set up, and you can see all the details. So, again, our process included a survey, five regional forums that were held in -- Legislator Stern participated in the one on Long Island, and we are continuing to get ongoing comments from individuals as we're going forward, and it's been very successful. I think we're over 1,000 comments. We had 600 people show up at our public forums across the state, and we're very, very excited about how that is playing out.

So with that being said -- am I getting the hook?

**CHAIRMAN STERN:**

No, no.

**MR. COCHRAN:**

Oh, okay, okay.

**CHAIRMAN STERN:**

But I do have a question. Is the common period still open, and, if so, when does that end?

**MR. COCHRAN:**

I think we are entering the closed phase, which was in the end of April -- in mid-April, but we are continuing to look to our website as a place for people if they wish to continue to provide us comments and reflections.

**CHAIRMAN STERN:**

And that would be an opportunity that goes through when?

**MR. COCHRAN:**

We're taking comments probably right up to the day we head to Boston.

**CHAIRMAN STERN:**

Very good.

**MR. COCHRAN:**

But at this point, let me walk through some of the general themes that are starting to emerge as we continue our dialogue, and this is not in your packet, but I just wanted to walk you through because, again, this is a draft for our purposes as we're trying to, again, distill and understand all the different elements of what people are trying to relay to us. In New York, the White House Conference is taking on a much higher level of importance for New York in 2015 for, you know, several reasons, and the big one is demographics. In New York, age 60 and older make up 25 percent of our population, and in '14, the state's 62 counties that there are a lot of folks who are aging. We need to have a process where we can start thinking through how we can more effectively help communities, and we like to use the catch phrase "the communities help address the challenges and also understand the opportunities" of an aging population, and when we talk about opportunities, we understand the economic contributions that older people make that there are opportunities to think through and try to work with older people to understand the contributions that they can make to their communities and also the challenges. The systems that we have in place are not going to be able to meet the demand of the aging population going forward. We need to retool our systems. We need to work through our systems and better understand how we can more effectively work with individuals. And we're talking about not only services, we're also talking about community design.

I don't know if any of you have heard the phrase "a livable community," but there's been quite a bit of debate. I know in Port Jefferson, there was some activity around the little community premise, and I know Huntington, Northport, and a couple of other places, and I know the Suffolk County Executive has signed on to the premise that he would like to seek to have the county become a designated World Health Organization age-friendly community working through AARP and others in that process.

So there's some exciting things happening in your county that are helping facilitate what we think are one of the goals of the White House Conference, and that is creating inclusion. So as we're going through, we're looking to improve the quality of life for older New Yorkers, and we're looking to provide input into how the federal government is providing resources in terms of to basically fund innovation, to fund change, and to help improve how we at the state office and then hope the county office of the aging, our local county partners, best engage to help improve the lives of people who are aging in our state.

So as we're going forward, the process is played out where we've engaged in a series of hearings or shall we say "discussions" with the general public at forums. We have our survey. We continue to get comments back from individual to some of the topics and issue areas that we've identified, and we've asked people to explore with us, and as we're going through that process, we've basically identified, you know, the key areas for us at this point in some of the themes, the major themes again is retirement security; we're talking about healthy aging; we talk about again long-term care, service and support and elder justice. We've got list upon list of things that people would like to see happen, and, you know, it's been interesting as we're trying to go through the retirement security issues have become very, very front and center.

I don't know if anybody caught any of the activities up in Albany yesterday, but AARP released a survey of their members, and they titled the event High Anxiety, High Anxiety Retirement Stress. Basically what they've uncovered is that there is a tremendous number of individuals who are completely and totally unprepared for retirement. This has evolved as a result of, shall we say, the reduction in the availability of pensions. It's a result of a change in, some would say, cultural influences where people -- where we had a culture of savings at one point where that's no longer the case. And so what's happening is that we have a group of Generation Xers -- we go baby boomers, generation X -- that we have a significant number of individuals who are going to be approaching retirement or preparing to think through what they might do in retirement and they don't have the money for it. They're going to be living -- a lot of people are viewing Social Security number as their primary vehicle for support, and as we know, \$16,000 a year ain't gonna do it. It's very difficult. It's a challenge, and it's very challenging, and it creates a lot of anxiety and stress. So yesterday AARP was calling on the state to start engaging in a process to think through how we might be able to offer a state-sponsored private sector retirement plan or retirement vehicle for individuals where individuals could auto-enroll. They would have the ability to automatically contribute to -- through their place of work. When you engage in the questioning of an individual, why don't you invest, why don't you save; well, it's not easy to do. Well, you need to save. Well, it's not easy to do. Well, if you had the ability to contribute through your workplace, would you do it? Yes.

So it's interesting. So we're kind of engaged at the state level in what is an interesting conversation with stakeholders about how do you proceed and how do you engage in this dialogue, and if the county legislature and any of your colleagues have any ideas or thoughts about how such innovation might play out or seek to encourage our brethren at the state level to continue to try to advance the issue or think about the issue, it would be appreciated because we do know it's a tremendous issue and it's a tremendous challenge, and it's created quite a bit of, shall we say, unsettling impact on individuals who are, shall we say, young old. I mean, I'm 52. I'm lucky. Hopefully, I'll get

enough time in the system where I'll have a public pension, I will be set, it will be good, but I know a lot of people out there who do not have access to a public pension through their place of employment, and as they're aging, they're getting very, very concerned, so it's just an interesting event that played out yesterday, and I encourage anybody, if you have the chance, to put in "High Anxiety Retirement AARP," and you should get the hit. You should get it through Google, and it was very, very telling, and very, shall we say, fascinating.

**CHAIRMAN STERN:**

John, before you continue, we'll take a question from Legislator Barraga.

**LEG. BARRAGA:**

Just a couple of things, John.

**MR. COCHRAN:**

Sure.

**LEG. BARRAGA:**

So this is a -- what you're calling for, AARP is calling for, like, a separate retirement system that people can contribute to?

**MR. COCHRAN:**

Well, what they're seeking is to facilitate a process, and potentially at the state level, that would provide individuals who are working in a private sector employment setting with the ability of that employer to contribute to a retirement structure that would be akin to what we're currently doing for college. Basically, right now the state is sponsoring a system --

**LEG. BARRAGA:**

The 529 program.

**MR. COCHRAN:**

Yeah, which is incredibly, incredibly popular. That program has proven to be a tremendous success. And what AARP is looking to help facilitate is, you know, can something like that be made available for individuals in the private sector; so in other words, you own a small business, you're willing to go through the process of engaging through your payroll process, through your payroll vendor, the ability for people to contribute directly. Maybe that's an option. I'm not saying I know what the answer is. I do know that some other states are exploring these types of things, but that's what AARP was focusing on. I know in Suffolk County you have Will Stoner. I don't know if he's still out here, Will Stoner. I mean, Will's a real trendsetter when it comes to these types of issues, and I know he was one of your -- one of the folks who had done lots of work with the county executive around the livable community World Health Organization initiative so, you know, I'm sure he would be more than willing to engage with you or talk to you about any of these types of things, and he, I'm sure, will be more than happy to do so.

But it's a very interesting little quandary that, as we've engaged in our conversations around the White House Conference for Aging that the retirement security issue became front and center, and then as the conversations have been playing out, all of a sudden this data comes out, which provide a very, very, shall we say, hearty body of information to engage in a good policy debate or a good policy discussion.

**LEG. BARRAGA:**

My concern over the years with dealing with senior citizens, most of the time, they're able to survive even after they retire, just about meet their fixed expenses. Many of them own their own homes,

but whatever savings they have, and for those who have saved, you know, several hundreds of thousands of dollars, as soon as they become ill, if they require a nursing home or at-home care, you know, Medicare doesn't really cover that, and then, you know, they don't qualify for Medicaid. So the bottom line is that, you know, they actually have to go into their savings, all the savings, including the sale of a house is just about depleted before they get any help from the State of New York. So it just seems that it's unfortunate that a better system has to be put in place to protect elderly seniors against that kind of fiscal catastrophe.

**MR. COCHRAN:**

It's impoverishment, and basically from a policy perspective, it's something, based on my understanding around the conversations around the managed long-term care and Medicaid reform, it's one of the key issues that keeps getting put on the table, and the system that we have in place facilitates that. We have a process where individuals are, you know, their options are limited. One of the things that the state has engaged in is encouraging individuals to purchase long-term care insurance. How many people here have long-term care insurance? Me too. So we're all gambling, and it's very interesting, so I had this conversation -- my father passed away three years, and I was talking with my mom a couple weeks ago. She's thinking of going to Jefferson Ferry, beautiful self-insurance model. Basically you pay for your long-term care, you enter, takes great care of you, it's a great system, but people do not believe they're going to require long-term care. My father used to talk about it all the time. He died two weeks, healthy as a horse, he died, gone. He gambled. He won. Will we all be as lucky? I don't know. I hope. Maybe, maybe not. I have long-term care insurance. I'm hedging my bets.

Now one of the interesting things about long-term care insurance is that the industry has assumptions that there will be people dropping the policy, so basically the rates are kind of, you know, calculated based on an assumption that people will buy into the program, they will enjoy the program, they will be -- they will feel good that they have the policy, but often people stop making payments for whatever reason: change in economic standing of the household, a change in something where all of a sudden they drop the policy. Long-term care insurance, people buy it, they don't drop it, because there's an understanding about if you've gone through the process of buying long-term care, you've gone through the underlying process, you're not going to let that policy go because the value of that policy is so great.

But the key element to think through for us is that people do not believe that they will require long-term care, that they will gamble and they will be successful, so it's just an interesting thing for all of us, and as a society, the premise that we should be contributing to long-term care and having engaged in a conversation at the federal level where, if you remember, part of the dialogue at the national level was creating an insurance model that would help pay for long-term care through payroll deduction. Basically, support for that in Congress, they took it out. People want to gamble. It's just interesting as a society, as a state.

**LEG. BARRAGA:**

The real problem with the New York State partnership for long-term care is it's a wonderful program, and it's a great program if you're in your 40s and 50s when the premium is extremely low. Now, those premiums have not changed. The problem is when you're dealing with people 65, 68, 70, and 72 who are in good health, and if you tell them about the long-term care insurance, the premiums are just prohibitive. If something could be done to lower the premiums for older seniors, more people would get the long-term care policy.

**MR. COCHRAN:**

Well, the interest conundrum is that people -- when engagement has been made on this public policy point, people do not want to have to think nor do they want to invest in thinking about having

to contribute to a system that will finance their long-term care. So as a universe of people, we've invested in the Medicaid system, and we have supported the system; although people might kvetch about it, we might express concern about it, we spend \$12 billion a year on long-term care in the State of New York, and a lot of that is nursing-home based, but we've accepted it, and the system works. Now is it a good system?

**LEG. BARRAGA:**

Well, really, frankly, it's not a good system.

**MR. COCHRAN:**

Well.

**LEG. BARRAGA:**

As long as you have a situation in New York State where you have spousal refusal, it's not a good system.

**MR. COCHRAN:**

Well, you know what? Spousal refusal exists, but your court system has the ability to go off --

**LEG. BARRAGA:**

You know, they really don't have the ability.

**MR. COCHRAN:**

They do.

**LEG. BARRAGA:**

They don't have the energy, the commitment, the staff to go after these people who refuse to pay for their spouses, and it's a big problem.

**MR. COCHRAN:**

I understand the problem, but you have a court process that facilitates that, and to me one of the challenges of this discussion is the willingness of a court-appointed individual or an elected judge engaging in a conversation about going after a grandmother's assets.

**LEG. BARRAGA:**

I think one of the things that if New York State could only take a look at this long-term care insurance and come up with some sort of methodology to reduce the premiums for people who are in the 65-to-75 category, you would have a lot more people buying long-term care insurance. Right now, they can't afford 6- and 7- and \$8,000 a year in premiums.

**MR. COCHRAN:**

Absolutely. The only way to do it is to basically distribute the cost, to risk share, and until we can make a decision politically about the importance of contributing to long-term care, that conversation and that very, very point that you've made is going to go unresolved because the policy, the underwriting principles associated with long-term care are such that the costs are extremely, extremely high. When you're paying 110,000, 115,000 -- what is it in Suffolk County now, 140 or something?

**LEG. BARRAGA:**

It's 160,000.

**MR. COCHRAN:**

160 down in Long Island now, average long-term care costs for a nursing home stay.

**LEG. BARRAGA:**

So you can see how fast someone's savings are completely destroyed.

**MR. COCHRAN:**

Absolutely. But again, it's about risk sharing, and as a group, as a society, are we willing to engage in a dialogue about risk sharing to pay for long-term care, and the answer has been no. Congress overturned an initiative that was designed to help start that process, and at a state level, we engaged in the same conversation around the partnership: Is there a way to facilitate and encourage a greater level of buying? Because the more people buying that policy, the rates stake go down. People aren't buying them because people want to gamble, and collectively you and I are the only ones who are hedging our best. I mean, everybody -- we're all gambling.

So it's just kind of an interesting -- it's just kind of an interesting thought process, and as a state, as a country -- as a country, we made a decision not to do that. I'm amazed by that. I'm befuddled by that.

**LEG. BARRAGA:**

It's a very interesting conversation.

**MR. COCHRAN:**

It is. It's a great conversation.

**LEG. BARRAGA:**

It's a very interesting conversation because you know when you think about all of us, you know, you work your entire life, you save, you own your own home, you have savings, stocks, bonds, everything you put together, you, in reality, want to give it to your children. You know, when you pass on, you want to -- but yet, if you get ill and you wind up in a nursing home or at-home care, you can be there four or five, everything you've worked for -- all the savings that you've had, it's dissipated, it's gone; and yet, the long-term care insurance, especially the New York State partnership, is there to protect you. For three years, the insurance company pays and after that you automatically qualify for Medicaid. Joe Smith could have millions of dollars in the bank. Everything he's earned up to that point stays in the bank. It doesn't go back to the nursing home or at-home care. It isn't all blown. And it's just a shame that we -- and we're one of the few states that have this kind of a policy. It really developed under Mario Cuomo, but it's just that when you're trying to convince people, even when I've -- and I've spent a quite a bit of time over the years trying to convince somebody 67, 68, as soon as they see the premium, they take the philosophy, Well, I'll die in bed.

**MR. COCHRAN:**

You do.

**LEG. BARRAGA:**

Nobody dies in bed anymore. We kind of linger on, and we linger, we need help and assistance, and everything we've earned is dissipated. It just goes out the window.

**CHAIRMAN STERN:**

Two issues with purchasing that kind of policy: One, as Legislator Barraga points out, you have to be young enough and healthy enough to get it in the first place, and of course you have to be able

to afford it. The young enough and healthy enough is always going to be an issue, but as to the gambling aspect of it and how consumers don't want to and they're not willing to take that gamble because it's very much like car insurance. You want to have it because, God forbid, you are in the car accident, you want to have insurance, but it really is a use-it-or-lose-it type of a policy. If you never got sick, if you never needed that kind of care, then for a very expensive proposition, that can go on for many, many years and paying those kinds of premiums, you would have lost the gamble, as you point out.

But the private sector is now starting to take notice of that. They know that it's a tough sell, especially at that price and many of the insurance companies that are still in that market to begin with, as so many have dropped out over the years because it's been so difficult, that they are now developing what consumers want, which is these hybrid policies to take out much of the gamble, much of the risk, and so there are insurance policies now that will have this long-term care component to it. If you get sick, if you need the care, then there will be a long-term care component to it. If you never wound up needing, then at the end of the day, there is a life insurance aspect to it so ultimately there is something to pass to the next generation.

Now, from a consumer standpoint what you're saying is the -- is market forces now starting to change the offerings to make it a little more acceptable to the private marketplace whereas before you had too many people who are just not willing to lay out that kind of a cost on an going basis if it literally was going to be a use-it-or-lose-it situation. So there's a long way to go, but at least the private sector is starting to recognize that.

**LEG. BARRAGA:**

I always push the partnership because it's the only plan, regardless of what an insurance company may offer you, where after three years you automatically qualify Medicaid. No other plan gives you that.

**MR. COCHRAN:**

That's a very rich policy, but it all goes back to the general premise of risk sharing, and as a society are we willing to engage in a process where we're going to ask everybody to contribute to ensure that long-term care will be an option that remains affordable; and as of today, we have not made that decision, and actually, we have taken -- we have made specific decisions that generated out of the federal level that says, No, we're not going to do that. As a person who has engaged in the policy discussions around long-term care, who has engaged in developing an understanding of the system, to think that this is how we're going to finance long-term care is incredibly surprising.

But, you know, I'm assuming at some point, the cart will catch up with the horse. Something's got to happen because this system --

**LEG. BARRAGA:**

Usually when I ask the question in a room of a group, this topic comes up, Who has the New York State partnership for long-term care, or any sort of long-term care insurance, the only hand that goes up is mine? It's the first time in many years another hand went up, which is you, but you're part of that Albany system. You're familiar with the plan, with the program. You know a good program when you see it.

Unfortunately what we didn't do when we first came up with this plan, we didn't do a good marketing job, and then we marketed it to the wrong people. We marketed to a bunch of people 70, 75 years of age, too old.

**MR. COCHRAN:**

I was the market.

**LEG. BARRAGA:**

Well, the real market is those, like Steve Stern, in their 40s, young people where the premium is low and the premium never changed. I mean, I got it when I was 50 years old. My premium is \$1200 a year to protect myself from \$160,000 in a nursing home, having to lay it out every month, every year.

**MR. COCHRAN:**

Well, I hate to have dwelled on the topic, but, I mean, it was just so interesting as the retirement security element of the White House Conference and the feedback that we're getting kind of started to -- it's starting to overshadow a lot of our dialogue, and it's just part of the reality of it because that's the real nuts and bolts. The services we provide, you know, people have encouraged some suggestions in terms of innovation. One of the challenges that the aging network is that it's a primarily -- there's a lot of dollars that are invested to provide direct service, but there's also a significant volunteer element to our system. For example, home-delivered meals programs across the state. We have hundreds of people who volunteer to go out and drive and drop a meal off at an individual's home who is homebound. And it's a good model, it works, but from the premise of success and insuring continuation of that model, is it fair to assume that we will always be able to depend on this system being a volunteer, kind of, based system.

The other thing in terms of services and supports is also thinking through the premise of professionalization of our workforce. A lot of case managers, a lot of our folks who are out there that many of us -- you know, for example, myself, I live in Albany, my mom is down here on Long Island. If anything was to ever happen to her, what would I do? Well, I'd call Holly. I'd talk to her. We'd talk. My mother won't be qualified probably because of the income in the house and the value of our home and some of the assets that we got after the passing of my father and life insurance. So we would explore securing a -- probably a private case manager, an individual who could help facilitate her transition if necessary and thinking through how we might be able to work with those individuals and identify who those learned individuals are, who are those beacons in our community that can help with that process because right now, there is no, shall we say, standardization of certification or standardization of understanding of who those learned people are.

The other area's also around financial security -- I'm sorry, sir; I just wanted to finish this thought -- financial security, because one of the things that we often here about, and, again, on a personal level, my father passes. What happens? Life insurance policy gets paid. What happens after that? I swear to God, her phone blew up with financial advisors looking to provide her with assistance. Now, if you follow the issue of financial exploitation of older adults, there is some significant areas of improvement that could be made to enhance the financial security industry's accountability for individuals who are working with older adults. There is nothing out there that basically is designed to hold or basically provide an individual who's serving older adults or working with older adults -- there's nothing out there that provides the individual, the consumer, with an understanding of who these people are. Who are the people that you can trust? Who can be held accountable? How would that process play out?

So those are two areas when we talk about services and we talk about approaches that we're using to help individuals that also have been brought to light and people have asked us to take a further look at it as we're developing our recommendations.

Sir, I'm sorry for -- do you have a question?

**CHAIRMAN STERN:**

Legislator Krupski.

**LEG. KRUPSKI:**

Thank you. Just a -- thank you for your insight in so many different areas. I just wanted to go back, and I don't need a response, but I appreciate your insight when you started talking about the value of older seniors in the community. My town is the oldest town in the county.

**MR. COCHRAN:**

What town is that, sir?

**LEG. KRUPSKI:**

Southold.

**MR. COCHRAN:**

You've got a great senior center. I was out there.

**LEG. KRUPSKI:**

It's very well-run. We have a great population, and as far as you said, you know, one of the big values, like what you said, are people who volunteer their time.

**MR. COCHRAN:**

Sure.

**LEG. KRUPSKI:**

And you can't put a price tag on it because they have the expertise that you couldn't get if you pay people.

**MR. COCHRAN:**

You put a value on it, and that's part of the dialogue here is that there is an appreciation and when you start assigning a value to it, people start appreciating even more, and that's one of the things that we're looking to do. I'm sorry for interrupting.

**LEG. KRUPSKI:**

Sure. Thank you for that. We do value all that. It's a big part of our society out there.

**MR. COCHRAN:**

Sure. No, absolutely. We've been using the phrase that older adults represent the thread that is helping maintain the social fabric of communities. I mean, that's a nice talking point that we're often using because again older volunteers, whether it be mentoring, whether it be engaging in helping a fellow older adult by helping them get a home-delivered meal and delivering a meal, telephoning, whatever. It's just kind of an interesting approach and an interesting way of expressing an appreciation for what they bring to the table.

Anything else?

**LEG. BARRAGA:**

Thank you.

**LEG. KRUPSKI:**

Thank you.

**MR. COCHRAN:**

It was a delight to be here. Thank you.

**CHAIRMAN STERN:**

All right. Well, thank you. Thanks so much for being with us and for the information that you've shared with us and the materials I believe all of my colleagues have, and we'll make sure that copies are distributed to all of the legislators because those that are not on the committee, I know, will also have a deep interest in the information.

**MR. COCHRAN:**

I'd call everyone's attention to this documents. It's probably one of the more valuable documents or value in terms of the information that's available, and it's called the New York State's Resource Guide For Older New Yorkers, and this provides kind of some insight in terms of what caregiving is all about and how a caregiver's experiences can be enhanced and how we can help guide caregivers, plus we all also have a "tip for caregivers". Feel free to distribute this one-pager to people that come into your office and helps to provide some guidance. I know Holly has some of this information as well.

It's important to realize that the success of our long-term care system would be, shall we say, severely limited if it were not for caregivers. The bulk of care in New York State is not provided by professional caregivers. It's not provided through home care agencies or through a nursing home or facility. It's provided by family members; family members sucking up on a daily basis to assist an older adult relative live independently or stay in their home. So whatever you can do to get information out and support them, it's a great thing. I know Holly has a lot of things, and there will be a significant investment in Suffolk County to assist your system evolving to provide information and assistance to the people to the tune of -- it's in here somewhere. I'm sorry. Ah, damn. Where's that number? I apologize. I don't have that number. But the balanced-incentive payment program will provide resources -- I'm sorry, \$473,000 will be coming to Suffolk County to support your information and assistance program, which will be designed to assist individuals to obtain information about their long-term options.

One of the key phrases we use is that making a decision about long-term care is probably one of the more costly or the most costly expense that you will ever have in your family's history. It exceeds college. It often exceeds investments in education, but yet there is no formal process. There is no formal procedures out there to ensure that people, when they're making decisions about long-term care, are making good decisions about long-term care. And that's just another important little nuance, and again, through that significant contribution or investment in Suffolk County's information and assistance protocols that hopefully will provide that kind of guidance to the residents of the county. We're very hopeful that that will be a tremendous assistance to everybody.

**CHAIRMAN STERN:**

Thank you.

**MR. COCHRAN:**

All righty. Thank you.

**LEG. BARRAGA:**

That was great trip back to the wonderful world of Albany.

**MR. COCHRAN:**

Thank you, sir. So we good? Anything? Okay. Thank you.

**CHAIRMAN STERN:**

Okay. Director Ronayne is with us today. Director.

**DIRECTOR RONAYNE:**

Thank you, Mr. Chairman. I have, honestly, I have very little to report on to you this morning, and I know that you are on a time crunch today, so with your permission, I did e-mail an invitation on behalf of the Vietnam Veterans of America to each of the committee members earlier today. With your permission, I will halt my report until my next appearance before you, unless you have any specific questions, and that will allow you to get on to your next --

**CHAIRMAN STERN:**

Yes, next time. Thank you.

**DIRECTOR RONAYNE:**

Thank you.

**CHAIRMAN STERN:**

We are adjourned.

*(\*The meeting was adjourned at 1:35 p.m. \*)*