



MONDAY ALERT

New York State Alliance *for* Retired Americans

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February 10, 2025

NYSARA Mourns the Loss of a Union Giant

By Barbara Waldmann, President NYC Chapter of NYSARA

With deep sadness the New York City Chapter of NYSARA reports the loss of Donald Singer, a cherished member of their Executive Board, on January 15, 2025. Donald served for many years as its delegate to the New York City Central Labor Council and was involved in many activities, including the yearly Labor Day Parade in September and the Shirtwaist Fire Memorial Commemoration in March. Being a long time “Snowbird”, he was also an active member in the Florida Alliance for Retired Americans (FLARA) and a leader of its political priorities in the Sunshine State.

Donald’s roots in the union movement ran deep. He served as the President of the Council of School Supervisors and Administrators of the City of New York (CSA) from 1989-2000. He then became the full time Executive Vice President of the National Union, the American Federation of School Administrators (AFSA). Donald’s activism was legendary. Donald holds the distinction of being the only President to be arrested for disorderly conduct while demonstrating against the NYC Board of Education. As a culminating recognition at its convention last November, the Union presented him with the Peter S. O’Brien Award, its highest honor.

In retirement Donald's commitment continued. It was a privilege to work with him in furthering the objectives of The Alliance for Retired Americans. His extensive union leadership, his knowledge of labor history and his personal integrity contributed to the vital impact that he had on both the NYC Chapter and FLARA.

NYSARA To Lobby on Age Strong New York State Advocacy Day

New York's older population continues to grow and now encompasses 25% of the State's population is over 60 years old. Our systems and policies have not kept pace with the needs for care, affordable housing, consistent food and nutrition, and community infrastructure. Older adults remain vital contributors to our communities through volunteerism, caregiving and civic participation. We need to invest in services for our aging populations. Too many older New Yorkers face unmet needs, with wait lists for services and decades of underfunding for non-Medicaid care forcing many into poverty so they can access long - term care. **Fact: 63% of older adults needing long term care services need to access Medicaid to get that long term care.**

NYSARA and its statewide partners call on the legislature and Governor to provide \$89 million to address immediate urgent needs of older New Yorker's. This is minor increase in a \$252 billion budget. We commend Governor Hochul for including \$45 million for waiting lists in the executive budget proposal but it is only a start; the aging service network needs across the board budget support. Older adults - who contribute **\$72 billion** annually in state and local taxes, while NYS office for the aging's budget is .08% of the budget, - must have services that enable them to age with dignity, autonomy and respect. The governor's rallying cry for this year is "your family is my fight": the fight for older adults IS the fight for families. On Tuesday

February 11, 2025 NYSARA will join its statewide partners in lobbying on behalf of seniors across New York State.

We're asking for an **\$89 million dollar** investment in services with a focus on housing, food, and community support, for New York's older adults.

This means...

\$53 million to eliminate waiting lists for aging services. Right now, thousands of older adults are waiting for case management, transportation, and meals they desperately need. This money would fix those gaps. This is in the governor's proposed budget, we urge you to accept the appropriation as it is written.

\$44 million for core services inflation and COLA. The people who work with older adults are underpaid and leaving for better-paying jobs. Without enough staff, providers can't keep up with demand, leaving seniors without the help they need. Inflation has increased the costs of food, gas, and other budget line items.

\$2 million for on-site services in affordable senior housing. A modest investment of \$10 million State funds over five years (\$2 million/year) would allow Resident Assistants to serve 1,600 or more older adults in affordable housing annually, promoting their general wellness and helping them continue to age independently. Housing with services reduces ER visits, hospitalizations, and Medicaid costs.

\$875,000 for Elder Abuse Prevention Programs. These critical programs protect older adults from scams and abuse. They provide support to victims and prevent financial exploitation

\$15 million for Guardianship Reform. This would ensure vulnerable

older adults have someone to advocate for them, expanding access to guardianship programs across the state.

\$3 million for Medicare Counseling, Legal Services, and Patients' Rights. These programs help older adults save on healthcare costs and know their rights.

NYSARA urges you, its members, to contact your State Senator and Assemblyperson and make it clear these budget items are critical to you the older adult population of New York. In addition revising tier 5/6 and completing safe hospital and nursing home staffing as well as maintenance of health benefits for retirees at the level they had at their retirement.

Medicaid Work Requirement Continues to be a Bad Idea

By Lindsey Copeland and our Friends at Medicare Rights

Amid reports that lawmakers are considering changes to limit Medicaid spending and access as part of a broader legislative package early this year, [an updated analysis](#) from KFF offers context to one controversial policy: Medicaid work requirements.

Proponents' Arguments for Medicaid Work Requirements

Proponents of work requirements often [frame them](#) as “community engagement”—a way to “improve Medicaid enrollee health outcomes” or “make a positive and lasting difference in the health and wellness of our beneficiaries.” They [also claim](#) changes to eligibility rules are necessary because “individuals are sitting on the sidelines, missing out on the opportunity to learn new skills and participate in the economy.”

Most Medicaid-Covered Adults Already Working

But these arguments fall short. Work requirements are not effective or needed. There is no evidence they boost employment, and most people with Medicaid already work. KFF found that in 2023, the vast majority of adults covered by Medicaid (92%) were either working or unable to do so for reasons that qualified as exemptions under the prior Trump administration's policies, such as having caregiving responsibilities, illness or disability, and attending school.

Reporting Requirements Threaten Coverage

Yet, Medicaid access for qualified or exempted individuals could still be at risk if they struggle to leap the [administrative hurdles](#) associated with reporting their working or exempt status. We saw this under the first Trump administration when, for the first time in the history of the Medicaid program, CMS [allowed states](#) to impose [work and reporting requirements](#) as a condition of eligibility. Arkansas's policy went even further and [mandated consequences](#) for noncompliance, creating unnecessary red tape and causing over 18,000 people to lose coverage, many of whom were indeed Medicaid eligible.

Medicaid Remains a Target for Cuts at the State and Federal Levels

KFF explains this state level fight is ongoing: "Courts ultimately struck down many of the waiver approvals, including in Arkansas, and the Biden administration rescinded the remaining waivers, or they were withdrawn by the states. Currently, Georgia is the only state with a work requirement waiver in place (following a legal challenge to the Biden administration's move to rescind it); however, several other states are pursuing work requirement waivers, anticipating a change in policy by the incoming Trump administration."

At the federal level, Republican lawmakers have signaled plans to cut Medicaid in [budget reconciliation](#) legislation this year. While the contours

of any such proposals are not yet known, a draft [budget outline](#) from [House Republicans](#) offers some insight. It includes “implementing work requirements for able-bodied adults without dependents to qualify for Medicaid coverage, as included in the House-passed Limit, Save, Grow Act (H.R. 2811). Certain populations would be exempted, such as pregnant women, primary caregivers of dependents, individuals with disabilities or health-related barriers to employment, and full-time students.” H.R. 2811 is estimated to generate \$100 billion in savings over 10 years according to the [document and an analysis](#) by the nonpartisan Congressional Budget Office (CBO). Critically, the CBO analysis also concluded the bill would not increase employment, its purported aim, but it would decrease coverage—millions would lose Medicaid, and millions more would be at risk.

Medicare Rights Opposes Limiting Medicaid Coverage

Medicare Rights strongly opposes curtailing Medicaid coverage, including through work requirements. Our 2024 [Fact Sheet](#) on this issue found that “As with many health policies, the effect would be most pronounced on [people over 50](#) who often face significant challenges in meeting work requirements, often due to discrimination, and who may also have greater difficulty with compliance reporting. The health consequences of losing Medicaid for older adults can be [especially severe](#), and the economic consequences potentially devastating. [Self-reported health status](#)—a strong indicator of well-being—tends to decline with age and to be closely related to income status.

Take Action to Protect Medicaid

As Congress contemplates next steps on budget reconciliation, we need to send a clear message: ***Don't cut Medicaid!*** Join Medicare Rights and advocates across the country today, February 6, for a **National Day of Action to Defend Medicaid**.

- Use this call-in line (provided by SEIU) to reach your lawmakers: **866-426-2631**.
- Tell them to **oppose any Medicaid cuts**. Whether it's work requirements, eligibility changes, or reduced funding, a cut is a cut.
- A cut to Medicaid is a cut to Medicare. The programs work together to provide the services and supports people need.
- And the outcome from any cut is the same: older adults, people with disabilities, and their caregivers would **lose access to needed health and long-term care**.
- Medicaid is a lifeline for over 7 million older adults and 12 million people with Medicare. Slashing the program **would cause serious and lasting harm**.
- Be sure to **personalize your message!** [View this map](#) to learn what percentage of people in your Congressional district rely on Medicaid and share that number with your lawmakers. Additional resources to support your advocacy are available in this [Medicaid Defense](#)

Alliance Sues Treasury Department to Protect Americans' Personal and Financial Data

On Monday, the Alliance, the American Federation of Government Employees (AFGE) and the Service Employees International Union (SEIU) [sued the Department of Treasury](#) to block sharing of sensitive confidential data with the so-called Department of Government Efficiency (DOGE), run by **Elon Musk**.



The Department of Treasury maintains the sensitive personal and financial information of millions of Americans, and federal laws protect such data from improper disclosure and misuse, including by barring disclosure to individuals who lack a lawful and legitimate need for it.

Instead of protecting the private information of Americans as required by law, the complaint explains, Treasury Secretary Scott Bessent took punitive measures against officials who sought to protect that information from improper access and allowed DOGE full access to the data.

Judge **Colleen Kollar-Kotelly** [issued an interim order](#) on Wednesday that prevents Musk or others affiliated with DOGE from accessing the payment records while the case proceeds. The agreement [will remain in place](#) until February 24, when additional arguments will be considered.

“Retirees deserve to receive the benefits they earned and paid for without fear that their personal information could be compromised by Elon Musk and his lackeys,” said **Richard Fiesta**, Executive Director of the Alliance. “We urge the court to make a permanent ruling that stops this unlawful theft or disclosure of our data.”

Retirees Affected by WEP-GPO May Have to Wait a Year for Benefit Increases

The Social Security Administration (SSA) [estimates](#) that it could take more than a year for retirees to receive benefit increases mandated by the newly enacted Social Security Fairness Act, as Congress did not [allocate](#) additional funds for implementation of the law.

The Social Security Fairness Act repealed the Government Pension Offset (GPO) and Windfall Elimination Provision (WEP), which unfairly reduced Social Security benefits for public sector retirees who receive a public pension. More than 2.5 million retired federal, state, and local employees [are eligible](#) to receive up to \$600 more per month in Social Security benefits, calculated retroactively to 2024. The average monthly benefit increase is expected to be \$360.

SSA officials recommend that people with public pensions or survivors whose Social Security benefits are affected check to ensure that their correct name and address are on file. Retirees who never filed for Social Security because of the WEP-GPO provisions should complete an application online or in person, according to the agency.

A bipartisan group of 27 lawmakers [has called for](#) speedy implementation of the law.

“Thanks to the Social Security Fairness Act, public sector retirees will get the full benefits they are owed, even if it takes a little time. We appreciate SSA employees and their critical role in implementing this important legislation,” said **Robert Roach**, President of the Alliance. “Affected retirees can stay up-to-date on how the implementation process is progressing by visiting [ssa.gov](#).”

Pharmaceutical Industry Pushes for Drug Price Negotiation Pause

Pharmaceutical corporations, including Eli Lilly & Co. are reportedly [calling on](#) the Trump administration to pause Medicare drug price negotiation, which the government is required to do under the Inflation Reduction Act.

In January, Democratic U.S. Senators **Elizabeth Warren** (MA), **Ron Wyden** (OR), and **Bernie Sanders** (VT) [wrote](#) a letter to President Trump encouraging him to reject the pharmaceutical industry's request. They urged him to follow through on his past promises to lower drug costs and his previous support for drug negotiation by following the law and defending it in court.

If confirmed as Secretary of Health and Human Services **Robert F. Kennedy, Jr.** would be responsible for the drug price negotiation program. During his confirmation hearings, Kennedy [refused to](#) give assurances that he or the Trump administration would preserve the Inflation Reduction Act's drug pricing provisions and continue Medicare's ability to negotiate lower drug prices. When asked about a statement [released](#) by Centers for Medicare & Medicaid Services that said they aim to "improve the Negotiation Program," Kennedy simply [stated](#) that he will "comply with the law."

"This law helps millions of Americans and prevents pharmaceutical corporations from price-gouging," said **Joseph Peters, Jr.**, Secretary-Treasurer of the Alliance. "It is essential that President Trump resists drugmakers' efforts to pause drug price negotiation. His administration must follow the law and negotiate a fair deal for patients."



If President Trump follows the Inflation Reduction Act's schedule, Medicare [is set to](#) negotiate the top 10 most expensive drugs starting next year, and will ultimately negotiate lower drug prices for 20 prescription drugs by 2029.

The Alliance Joins the AFL-CIO in Celebrating Black History Month

Black workers have been a vital part of the labor movement for generations. This February, the AFL-CIO will highlight the important role that Black unionists played in the creation of unions, helping to gain critical workplace protections and fighting for civil rights across the country.

Throughout the month, the AFL-CIO will be showcasing the contributions of Black leaders and activists from across the labor movement. The profiles will be posted on the [AFL-CIO blog](#), on social media, and profiles for certain individuals will also be displayed in the lobby of the AFL-CIO headquarters in Washington, D.C.

“At a time when workers’ rights and civil rights are under attack, it’s more important than ever to remember the contributions of Black workers and acknowledge their critical role in the labor movement,” said President **Roach**.

KFF Health News: Across the South, Rural Health Care Has Become ‘Trendy.’ Medicaid Expansion Has Not.

By Lauren Sausser

WALHALLA, S.C. — Nestled in the foothills of the Blue Ridge Mountains, a small primary care clinic run by Clemson University draws patients from across the region. Many are Hispanic and uninsured, and some are willing to travel from other counties, bypassing closer health care providers, just to be seen by Michelle Deem, the clinic’s bilingual nurse practitioner.

“Patients who speak Spanish really prefer a Spanish-speaking provider,” Deem said. “I’ve gotten to know this community pretty well.”

Clemson doesn’t operate an academic medical center, nor does it run a medical school. Arguably, the public university is best known for its football program. Yet, with millions of dollars earmarked from the state legislature, it has expanded into delivering health care, with clinics in Walhalla and beyond. School leaders are attempting to address gaps in rural and underserved parts of a state where health outcomes routinely rank among the worst in the country.

