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Written testimony submitted via email to the New York State Joint Legislative Hearing on Health/Medicaid

The National Center for Healthy Housing (NCHH) respectfully submits this testimony to express serious concern regarding the proposed elimination of the New York State Department of Health's Healthy Neighborhoods Program (HNP) in the Executive Budget.

Since its inception in 1985, HNP has served as a cornerstone of New York State's public health prevention efforts, helping protect children, older adults, and families by addressing housing-related health hazards before they result in avoidable illness, injury, or healthcare utilization. For 40 years, the Healthy Neighborhoods Program has quietly done what policymakers across the country now say they want: to improve health, reduce avoidable healthcare costs, and make homes safer—before people get sick or injured. At a time when states across the country are actively seeking effective, evidence-based approaches to improve health outcomes while managing healthcare costs, New York risks dismantling one of the nation's most established and rigorously evaluated healthy housing programs.

What the Healthy Neighborhoods Program Does

The Healthy Neighborhoods Program is a housing-based public health intervention that works directly with households to identify and reduce environmental health risks in the home. Through in-home assessments, education, referrals, and practical, low-cost interventions, local health departments and partner organizations address multiple hazards, including:

- Asthma triggers and indoor air quality concerns,
- Childhood lead exposure risks, and
- Home safety and injury hazards.

HNP is currently implemented in 17 counties and New York City, reaching residents across urban, suburban, and rural communities. The program is prevention-focused, community-based, and designed to complement—rather than replace—clinical care and other public health services.

The proposed Executive Budget removes the state's core appropriation for HNP (approximately \$1.45 million annually), which serves as the backbone of the program and helps leverage additional federal and local funding. Eliminating this state investment would effectively dismantle the program statewide.

Evidence of Effectiveness and Return on Investment

The Healthy Neighborhoods Program is not an untested or experimental initiative. Its impact has been documented through multiple rigorous evaluations conducted over time and across diverse communities.

NCHH has conducted three independent, peer-reviewed evaluations of the Healthy Neighborhoods Program, including:

- A large-scale, multisite evaluation examining program implementation and outcomes across urban, suburban, and rural communities;
- A cost-benefit analysis focused on residents with asthma; and
- An evaluation of asthma-related outcomes among both children and adults.

Together, these studies demonstrate that HNP improves housing conditions, reduces exposure to asthma triggers and other health hazards, and is associated with meaningful improvements in asthma-related health outcomes, including reduced symptoms and decreased healthcare utilization.

In our four-year evaluation period alone, the Healthy Neighborhoods Program reached approximately **29,000 homes and more than 82,000 residents across New York State**, demonstrating the scale at which the program operates. In a cost-benefit analysis focused on residents with asthma, NCHH found that the program generated a **positive return on investment ranging from approximately \$2 to more than \$3.50 for every dollar invested**, based solely on asthma-related outcomes and avoided healthcare utilization. Importantly, this estimate reflects only a portion of the program's total value; it does not account for the additional benefits associated with improvements in indoor air quality, lead exposure prevention, injury reduction, fire safety, carbon monoxide exposure, radon risk reduction, or broader quality-of-life impacts for households.

It is rare to find a state-run healthy housing program with this length of operation, this breadth of reach, and this level of evaluation demonstrating such significant impact.

Importantly, these findings are not limited to a single pilot or population. The evidence shows that HNP functions effectively across multiple local contexts (from some of the most densely populated areas of the state to some of the most rural), demonstrating its scalability, durability, and relevance to communities with varying housing conditions and health needs. Beyond the quantitative findings, HNP has enabled families to live in safer homes, reduced preventable health crises, and helped residents—particularly children and older adults—remain healthier in the places where they live.

Why the Program Is Not Duplicative

There may be questions about whether the Healthy Neighborhoods Program duplicates existing lead initiatives or proposed Medicaid-funded asthma and injury prevention

services. This is an appropriate and expected line of questioning; however, characterizing HNP as “duplicative” does not reflect how the program is designed, how it operates, or the populations it serves.

HNP addresses multiple housing-related health risks through a single, integrated, in-home approach. Its scope includes indoor air quality, asthma triggers, lead exposure prevention, fire safety, carbon monoxide, radon, and injury hazards. While some programs provide more intensive remediation for specific hazards, HNP is uniquely designed to identify and reduce a broad range of risks that often co-occur in the same homes and affect health cumulatively.

HNP complements—rather than duplicates—other programs that target specific outcomes or populations, including New York State’s childhood lead poisoning prevention programs and existing and proposed Medicaid-funded asthma services. In practice, HNP has consistently served as a referral source for these programs, helped expand their reach, and functioned as a platform for launching and testing new and innovative public health interventions.

HNP also serves households that are structurally excluded from Medicaid-funded home-based services, which are typically tied to individual eligibility and specific diagnoses. As a result, households may lack access to prevention services if a resident does not meet diagnostic criteria, if the eligible enrollee is not the person experiencing the housing-related health risk, or if services are narrowly tailored to a single diagnosis and miss opportunities to prevent other harms affecting the household as a whole.

Finally, while the New York Health Equity Reform (NYHER) 1115 Waiver represents an important expansion of services and addresses some housing-related needs that HNP does not—including, in some cases, more extensive remediation for specific populations—it is not yet fully implemented and is not designed to replace HNP’s broader prevention role. HNP reaches a wider range of households and addresses key healthy housing risks, such as radon, carbon monoxide exposure, and fire safety, that are not included in the NYHER Waiver.

New York State should be congratulated for the important and forward-looking work planned under the NYHER Waiver. These efforts build on the strong foundation laid by the Healthy Neighborhoods Program, but now is not the time to dismantle that foundation.

Consequences of Elimination

Eliminating the Healthy Neighborhoods Program would have consequences that extend well beyond the loss of a single line item in the state budget.

Doing so would dismantle a long-standing prevention infrastructure, disrupt local capacity and workforce expertise, and sever trusted relationships between public health agencies

and the communities they serve. Rebuilding this infrastructure in the future would be far more costly and time-consuming than maintaining it now.

Eliminating the Healthy Neighborhoods Program would dismantle prevention infrastructure that has protected New Yorkers' health for four decades—at exactly the wrong moment.

At a time when housing-related health risks are increasing—and when states are under pressure to find cost-effective, upstream solutions—removing a program with demonstrated outcomes and return on investment is inconsistent with both the evidence and the stated goals of health system transformation.

Conclusion and Request

The National Center for Healthy Housing urges the Legislature to restore funding for the Healthy Neighborhoods Program in the final budget and to maintain New York State's commitment to evidence-based, prevention-focused public health interventions.

HNP represents a rare convergence of longevity, rigor, and impact. Preserving this program is not simply about protecting a legacy initiative; it is about safeguarding a proven approach to improving health, reducing avoidable healthcare costs, and making homes safer for New Yorkers across the state.

Thank you for the opportunity to submit this testimony and for your consideration of the importance of the Healthy Neighborhoods Program.

Respectfully submitted,

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About the National Center for Healthy Housing

The National Center for Healthy Housing (NCHH) is a national nonprofit dedicated to securing healthy homes for all. Since 1992, NCHH has served as a highly regarded and credible change agent, successfully integrating healthy housing advocacy, research, and capacity building under one roof to reduce health disparities nationwide. Over the last three decades NCHH has managed over 100 multidisciplinary projects, worked with a broad array of federal, state, and local agencies, universities, community groups, and private research institutions, and published and contributed to over 150 articles and reports on environmental health and housing issues.