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**TESTIMONY OF
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**PRESENTED TO THE
NEW YORK STATE SENATE FINANCE COMMITTEE
AND
NEW YORK STATE ASSEMBLY COMMITTEE ON WAYS AND MEANS**

**REGARDING THE
NEW YORK STATE EXECUTIVE BUDGET PROPOSALS FOR MENTAL HEALTH
STATE FISCAL YEAR FISCAL YEAR 2026-2027**

FEBRUARY 4, 2026

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Summary of Recommendations

- 1. Build and fund a comprehensive workforce strategy across Human Services**
- 2. Enact an Aggressive Red Tape Agenda to Improve Services, Reduce Cost and Support Growth**
- 3. Enact Mental Health First Aid and Related Community Based Services to Promote Mental Health Awareness and Long Term Health including improved oversight of parity laws**

Introduction

“Under Article XVII - Social Welfare. Section 1 - Public relief and care. The aid, care and support of the needy are public concerns and shall be provided by the state and by such of its subdivisions, and in such manner and by such means, as the legislature may from time to time determine.”

Governor Hochul’s FY 2027 Executive Budget, unveiled in January 2026, proposes a \$260 billion spending plan—a 0.7% increase in an economy where the CPI has risen by 2.7% in the past year—focused on maintaining a "Stronger, Safer, and Affordable New York" without raising income taxes. The plan manages a \$10.3 billion drop in federal funds, sustains \$14.6 billion in reserves, and invests in economic development, childcare, and healthcare.

Key Budget Highlights (FY 2027)

- **Total Spending:** \$260 billion (all funds).
- **Economic Development:** \$400 million for NY Works Economic Development Fund, \$25 million for a Semiconductor Chip Design Center, and \$100 million for a Quantum Research and Innovation Hub at SUNY Stony Brook.
- **Childcare & Education:** Continued investment in childcare, including \$500 million for a universal two-year-old care program in NYC and aiming for universal pre-K for four-year-olds statewide by 2028.
- **Healthcare:** Proposes \$35.5 billion for Medicaid, focusing on long-term sustainability.
- **Public Safety & Infrastructure:** \$7.9 billion for MTA operating aid, \$7.6 billion for the DOT capital plan, and funds for the Pave Our Potholes program.
- **Taxpayer Relief:** Maintains no income tax increases and supports a \$14.6 billion reserve fund to ensure stability.

The challenge is to pass a fair, balanced and forward-thinking budget that addresses the needs of all New Yorkers and meeting the Constitutional requirement.

Good afternoon. My name is William Gettman, and I am the CEO of Northern Rivers Family of Services located in the Capital Region.

About Northern Rivers Family of Services

Northern Rivers Family of Services was established in 2012 through affiliation with longstanding family services agencies Northeast Parent & Child Society and Parsons Child & Family Center. In 2019, we affiliated with Unlimited Potential, whose operations began in Saratoga Springs. Together, the 1,400-strong workforce of Northern Rivers and member agencies serve more than 19,000 children and families in 41 upstate counties each year, with \$88 million invested through more than 60 social services and child welfare programs. Northern Rivers builds a strong, successful, and healthy future for our children, families, and communities through quality services, collaboration, and innovative leadership. Our program areas include:

- Residential and community-based child welfare programming including foster care, preventive services, postadoption services, and evidence-based home visiting programs;
- Educational services for 400 students including early learning, pre-K, and Early Head Start, as well as accredited 853 schools (elementary, middle, and high school);
- Community-based child welfare and crisis services programs for children and adults including mobile crisis, school-based services, and licensed mental health clinic programs; and
- Community-based waiver programs for children and adults including health home services.

I would like to thank Chair Liz Krueger and Chair Gary Pretlow, Human Services Committee Chairs, and members of the Assembly Ways and Means and Senate Finance Committees for this opportunity to testify on the Governors Executive Budget for State Fiscal Year Fiscal year 2026-2027. As has been stated many times:

The budget is not just a collection of numbers.

but an expression of our values and aspirations.

While Northern Rivers Family of Services is grateful for many of the measures the Governor Hochul proposes, we believe adjustments to the budget need to be made to make New York state a great place to live, raise a family, and operate a business. Our testimony recommends changes and suggestions for the final budget. Unless the proposed Executive Budget is adjusted to adequately support the Human Services sector and the children, adults, and families we serve each day, New York state will not reach its goals. Without support and opportunity for ALL New Yorkers, we will not be truly successful.

One lesson from the past years is that the needs of children and families don't fit neatly into budget codes, state agency silos, or generic diagnoses. Our Human Services sector provides mental health, child welfare prevention, and residential, educational and another vital services-based on the needs of the child, family, and complicated trauma faculties. As best practices have

evolved and providers have evolved with them, the regulatory system designed to provide needed oversight has not evolved at the same pace, causing friction and inefficiency.

Our budget for the coming year must provide cross-discipline solutions. Undeniably, child welfare professionals provide mental health services, outpatient mental health professionals provide family stability and positive functioning, and residential care agencies provide specialized education.

1. Build and fund a Comprehensive Workforce Strategy across Human Services

New bold ideas and innovation require the skills and expertise of a strong workforce. The recommendations in the proposed budget require recruitment and retention of thousands of individuals across every county, borough, and neighborhood. We need nurses, direct-care staff, medical professionals, cooks, drivers, case managers, peers, teachers, aides, and many more. **The proposed state budget includes a 1.7% human services investment effective April 1, 2026. While we appreciate the partial investment, the CPI as calculated by the federal government is 2.7%.**

The 2.7% investment should be enacted through the cost-of-living-adjustment (“COLA”) mechanism, which also must be amended to be inclusive of all State-contracted human services programs, including contracts held by DCJS, DOH, NYSED, NYSOFA, OASAS, OCFS, OMH, OPDV, OPWDD, OTDA, and OVS. Critical programs such as crime victim services, independent living centers, supportive housing, preventive services, and rape crisis counselors were erroneously excluded from the previous COLAs and are essential to meet the human services needs of New York’s adults, children, and families. Too often in the past, employees in one program under an agency have been included in COLAs while those in another program were excluded; sometimes performing similar work under different oversight bodies. This has proved to be destabilizing for many providers.

We strongly support including prevention workers and health home care managers in the Human Services COLA as proposed in S.1580 (Persaud) /A.2590 (Hevesi)

This is a critical mechanism to ensure that providers have the necessary resources to keep up with the true cost of providing services and supports. Agencies that are providing these services, cannot be expected to subsidize the government while collaborating to keep New Yorkers afloat by providing them with mental and behavioral health, developmental disabilities, supportive housing, youth and child services, foster care, aging services, and a whole host of services for New Yorkers from all walks of life.

When adequate investment into the sector is not in the budget or only partially funded, providers must choose between giving workers well-deserved increases or paying the increased costs of utilities and rent. This investment will assist programs in covering some of the cost of inflation and increased costs, that went unaddressed in the rates last year. Some examples of increased costs include:

- Health insurance cost increases;

- Costs associated with staff recruitment efforts given high vacancy rates and unabated turnover rates in the field;
- Price increases for food, utilities, and maintenance.
- Insurance increases that greatly exceed the CPI

With over 800,000 human services workers across the State, many of whom are women and people of color, a 2.7% investment will be particularly impactful and alleviate the financial strain many have faced while working in the sector. This inequitable system has forced nonprofits to operate with significantly less resources and reduces the possibility of staff earning wages and benefits equivalent to comparable positions in either government or the private sector. 22% of human services workers depended on SNAP benefits to make ends meet. Their wages are 30% less than what government employees earn for the same role. These workers continue to serve their communities through times of crises while dealing with inflationary pressure and chronically underfunded government contracts. It is time for New York State to show up for them and their organizations by making a meaningful investment.

We deeply appreciate your consideration of this urgent request for a 2.7% investment and adding programs that have previously been left out of the COLA statute to encompass ALL human services programs this year and going forward. We are eager to collaborate with you to address this oversight and ensure that these vital programs are continuously supported

At the same time, New York State needs a coherent workforce recruitment and retention strategy. The proposed budget contains many solid ideas, yet they are scattered in various agency budgets. We need to compile these ideas to build a Human Services workforce plan.

The turnover rate for front line staff in New York's foster care programs is 49%; turnover for caseworkers in New York's family foster care, prevention, and residential foster care programs is 24%. The state must invest in this workforce to turn the tide from family's current reality of beginning therapeutic work again and again, too often, each time a new caseworker starts with them. Each budget year that New York does not invest in creating career pathways for child welfare professionals and in raising their salaries to retain them in the field is another year that New York wastes the opportunity to make a real difference in achieving positive outcomes for children-promoting family stability, reducing lengths of stay in foster care, and achieving lasting permanency for children.

Who is the Human Services Workforce?

Women comprise an astonishing 81% of the Human Services and direct-care workforce in New York. This equates to 268,900+ skilled, well-educated workers who are paid significantly less than women in New York's private sector, leading to increased staff turnover and jeopardizing the quality of service.

Not-for-Profit Organizations Are an Economic Engine

New York's not-for-profit workforce is not only hard-working, but is also an economic engine. Across New York State, 1 in 6 workers are employed by a not-for-profit organization. These workers contribute billions to the state's economic health, including the payment of income,

sales, and property taxes. Beyond the direct economic impact, the not-for-profit workforce allows all New Yorkers to stay employed, avert costly medical costs, and educate our youth. A strong not-for-profit sector, with a viable direct-care staff, creates additional economic growth and allows New York State to attract new business investments and companies.

Toward that end, we recommend additional retention and policy strategies:

- We urge your support for increases to the NYS Child Welfare Worker Incentive Scholarship Program and the NYS Child Welfare Worker Loan Forgiveness Incentive Program, increasing funding to \$1 million each.
- We support the Loan Forgiveness Program for Mental Health Clinicians Serving Children and urge broad application across the child welfare sector.
- These programs provide an incentive to current and prospective employees to work in the critical field of child welfare, and support the education and training needed to provide quality care. Investments in these programs are critical, as one of the very few programs that support our prevention workforce.

2. Create Enact an Aggressive Red Tape Agenda to Improve Services, Reduce Cost and Support Growth

As of 2024, the [New York Codes, Rules, and Regulations \(NYCRR\)](#) contains over 300,095 individual restrictions and nearly 18 million words, making New York the second most regulated state in the U.S. These regulations span numerous areas, with the highest concentration in environmental protection, health services, and transportation.

Key Details on NYS Regulations:

- Total Restrictions: 300,095 (2023 data).
- Ranking: 2nd most regulated state in the U.S., behind California.
- Volume: Approximately 17,899,233 words.
- Top Sectors:
 - Environmental Protection/Utilities: 49,477 restrictions.
 - Health Services: 42,473 restrictions.
 - Transportation: 34,365 restrictions.

- Structure: The regulations are organized into 23 titles, covering everything from agency-specific rules to industry-specific requirements, such as [Department of Environmental Conservation regulations](#).

The regulations are compiled in the [NYCRR](#), which is managed by the New York State Department of State.

In the face of current and future federal reductions and policy changes there is a critical need to streamline, modernize and simplify the delivery of services to all New Yorkers. As the budget has become a policy document, we propose a series of 9 Cut the Red Tape recommendations for implementation for the coming fiscal year. These recommendations are designed to move to a solutions-focused system that challenges old thinking, operates under a realistic understanding of risk, and empowers the organizations and professionals that New York trusts to care for our most vulnerable residents to use their expertise to provide top-quality, innovative care.

Each of the 9 Recommendations:

- Drives the modernization of the delivery of human services
- Improves client interaction
- Reduces costs
- Maximizes the use of technology and
- Provides common-sense updates to processes that evolved without central oversight

2. Enact Mental Health First and Invest in Related Community Based Services to Promote Mental Health Awareness and Long Term Health Including Parity Reform

We are incredibly supportive of many of the Governor's initiatives especially around teen mental health first aid. We truly believe that training will be a generational initiative that will change the lives of young people and help eradicate the stigma of mental health issues. We are also supportive of the Governor's--First Responder Behavioral Health Center of Excellence. This will create a peer to peer and innovative practice model for our first responders. It is desperately needed and we applaud the Governor for including it in the budget.

In addition we recommend the following investments to support community based mental health service delivery.

- **Raise Reimbursement Rates Across Peer Support Services.** Align peer support reimbursement rates across all programs, including CFTSS, with the 150% rate increase provided for offsite peer services under the Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS) Program.
- **Create a \$5m scholarship program for students pursuing mental health practitioner degrees, including graduate education.** Similar to the “Nurses for Our Future” Scholarship program. Scholarships would enable students who might otherwise be unable to attend college at all to pursue degrees in muchneeded professions, which is critical to creating a representative diverse workforce, and including Masters level education would support more diversity in supervisory roles.
- **Expand Non-Medicaid funding for family peer support by adding \$5.5M in flexible Aid to Localities funding under program code 1650 to allow for flexible approaches to supporting families and young people regardless of their insurance**

Lastly we recommend and encourage a fresh look at parity under current NYS rules and practice. Governor Hochul has said, the mental health crisis is the “defining issue of our time.” We urge the State to strengthen and enhance implementation and compliance with the federal and state behavioral health parity laws. These laws require insurers and health plans to cover mental health and substance use disorder care at the same level of access and benefits as physical health services, and not impose financial requirements or treatment limitations that are more stringent than those for physical conditions Specific recommendations include:

- **Strengthening Enforcement - Parity enforcement needs to be a priority of the respective agencies responsible for the oversight and delivery of services, care and treatment** Toward that end, DFS in cooperation with OMH, DoH and Oasas should provide transparent information on trends, open complaints and other critical metrics to allow elected officials and the public to understand the current state of affairs. Transparency is critical to ensure that consumers receive appropriate support and service.
- **Close Gaps with Federal Law/Regulations – We support legislation that would codify additional protections to ensure insurers and health plans comply with the federal and state parity laws.** This includes codifying additional protections into state law from the 2024 federal [final regulations](#) that were put on hold. This includes meaningful coverage for mental health and substance use disorders, additional data reporting and testing to ensure equitable treatment, prohibiting use of outdated data or evidence to deny care and bar local governments from opting out of parity compliance. (S8426, Brouk/A8839, Simon).

Network Adequacy – We urge vigorous enforcement of the New York State Department of Financial Services (DFS) and New York State Department of Health regulations requiring insurers and health plans to maintain adequate network, which includes ensuring appointments within ten days for outpatient provider or seven days following discharge

from hospital or emergency room. The regulations also provide the ability to go out-of-network if there is not an in-network provider able to meet the wait time standards.

Conclusion

In closing, we urge the Legislature to negotiate a budget with the Governor that ensures New York remains committed to the programs that produce positive outcomes for our most vulnerable children, individuals, and families; one that ultimately saves the state money on more expensive interventions such as foster care, unnecessary medical care, homeless shelters, and the juvenile justice system. We strongly encourage the Legislature to support the need of the not-for-profit Human Services sector. Failure to fund an increase for not-for-profit Human Services agencies will have a significant negative impact on the ability of individuals and families to receive services and ultimately on the physical, mental, and financial health of New York State as a whole.

Simply stated, we recommend investments in our vital not-for-profit Human Services organizations and communities that yield positive outcomes for all New Yorkers. We must make New York state a great place to live, a great place to raise a family, and a great place to operate a business. Thank you for the opportunity to testify.



LESS RED TAPE. BETTER RESULTS.

Alongside nine cost-saving solutions to make New York's human services system more efficient, we're respectfully asking the state to invest in the people who make those solutions work.

INVEST IN NEW YORK'S HUMAN SERVICES WORKFORCE: FUND A 2.7% TARGETED INFLATIONARY INCREASE IN FY 2026



WHY IT MATTERS

- **1 in 9 New Yorkers** work in human services. These essential workers—predominantly women and people of color—are the backbone of our care infrastructure, supporting children, families, older adults, and individuals with disabilities every day.
- **Turnover and vacancies are at crisis levels.** Direct Support Professional (DSP) turnover averages **35% statewide**, and in child welfare, rates reach **42–57%**. Each departure disrupts care, delays progress, and forces families to start over.
- **Nonprofit wages trail far behind.** A BA-level caseworker in a nonprofit earns about **\$46,000**, compared to **\$61,000** in a state position—a \$15,000 gap. Many direct care workers make only a few dollars above minimum wage, despite providing life-saving services.
- The proposed **2.7% Targeted Inflationary Increase** aligns with the **2025 Consumer Price Index (CPI)** rate, ensuring that funding keeps pace with inflation and prevents further erosion of nonprofit purchasing power.



WHAT THE 2.7% TARGETED INFLATIONARY INCREASE WILL DO

- **Stabilize the workforce.** Regular increases allow nonprofits to offer predictable raises that help retain qualified staff and reduce costly turnover.
- **Protect service capacity.** Without an increase, agencies are forced to freeze hiring, cut hours, or reduce programs—limiting access for vulnerable New Yorkers.
- **Save taxpayer dollars.** High turnover costs the state millions in retraining and lost continuity. A modest 2.7% increase is a cost-effective way to maintain experienced staff and consistent care.



EQUITY AND DIGNITY FOR FRONTLINE WORKERS

- **Poverty-level wages persist.** Nearly **60%** of nonprofit human services workers earn around **\$36,000/year**, close to the federal poverty threshold for a family of two.
- **Workers face food and housing insecurity.** **Half** of DSPs report experiencing these challenges while caring for others.
- **Education and debt burden.** Many positions require advanced degrees, yet loan repayment is nearly impossible on current nonprofit wages.



A SMART, NECESSARY INVESTMENT

Human services providers are essential partners in New York's safety net. A 2.7% targeted inflationary increase is a modest but necessary step to keep skilled staff, sustain quality care, and uphold the state's commitment to equity and fiscal responsibility.

Together, these proposals give lawmakers a clear path to strengthen New York's human services system—by cutting waste where it exists and investing where it matters most: **in people.**



LESS RED TAPE. BETTER RESULTS.

9 RECOMMENDATIONS TO CUT COSTS, REDUCE DELAYS, AND STRENGTHEN CARE IN NY'S HUMAN SERVICE SECTOR

1 PROBLEM: DUPLICATIVE EMPLOYEE CLEARANCE PROCESS

While background checks are essential for safety, New York's current process is antiquated, duplicative, expensive, and slow. Individuals often undergo multiple, non-transferable background checks across agencies, including the Justice Center, OCFS, DOH, OMH, OPWDD, and NYSED, each requiring redundant submissions and reviews.



SOLUTION:

Develop a "Portable Clearance Passport" model that is recognized across state systems, reducing repetitive checks and administrative cost.

IMPACT:

- Eliminates redundant processes and costs.
- Accelerates hiring and workforce onboarding.
- Increases service capacity and system efficiency.

2 PROBLEM: REPETITIVE AND TRAUMATIZING EVALUATION STEPS

New York State's Health Home Care Management and Foster Care evaluations are burdened by duplication across OMH, DOH, OCFS, SED, and managed care systems.

Families are repeatedly assessed and asked for the same information, while care managers reenter identical data into multiple platforms. This redundancy creates frustration for families, administrative burden for providers, and fragmented plans of care, undermining the program's goal of delivering streamlined, coordinated, person-centered services.



SOLUTION:

To address the repetitive and traumatizing evaluation process, New York State should adopt a standardized core assessment recognized across OMH, DOH, OCFS, SED, and managed care systems. This should be paired with enhanced data integration and interoperability to reduce redundant data entry and improve information sharing. By implementing cross-agency recognition of assessments and unifying care planning requirements, families would no longer need to repeat their stories, and providers could deliver more coordinated, person-centered care. Achieving this will require policy and regulatory alignment to support consistency and collaboration across all systems.



IMPACT:

- Administrative efficiency yielding leaner administrative processes.
- System simplification resulting in error reduction, lower costs, and fraud / abuse mitigation.
- Downstream cost avoidance.

3 PROBLEM: BURDENSOME LICENSING AND RENEWAL REQUIREMENTS

Licensing, re-designation, and recertification processes are lengthy and resource-intensive for both agencies and regulators. Many programs are licensed by multiple agencies, creating redundant reviews and lost productivity.



SOLUTION:

Implement a performance-based review model that allows high-performing agencies to use truncated or virtual renewal processes and extended licensure periods (up to five years). Encourage inter-agency recognition of performance data to avoid duplicative reviews.

IMPACT:

- Reduces travel and administrative costs.
- Mitigates productivity loss.
- Streamlines oversight while maintaining accountability.

4 PROBLEM: SCARCITY OF LICENSED WORKFORCE

Workforce challenges have driven costs for program implementation higher, at a rate that outpaces non-licensed workforce costs significantly. This shortage yields higher expenses, extended wait times, and administrative burdens pertaining to supervision.



SOLUTION:

Introduce credentialed mental health support specialists and expand scope of practice to allow BA / BS / BSW level providers to address items of less significant acuity within the system of care as it relates to the mental health epidemic.

Establish a waiver for positions to modify scope of practice for BA / BS / BSW level providers.

IMPACT:

- Cost mitigation.
- Expanded access to timely services.
- Relieves pressure on licensed workforce.

5 PROBLEM: BURDENSOME OPERATION REQUIREMENTS

Increased regulation regarding licensure requirements for service provision roles have narrowed applicant pools to an untenable degree to maintain programming. Provider agencies are often unable to find candidates who satisfy criteria and once found the salary requirements to sustain these roles are incompatible with current state rate structures.



SOLUTION:

Engage in Regulatory Relief practices.

Examples include:

- Standardize and require MCO's to have consistent credentialing, billing, and prior authorization requirements.
- Modification of the requirement for MD sign off on all restraints to allow for NP sign off in lieu of MD.
- Reduce the requirement which mandates Mobile Crisis programs to ensure licensed providers are available to facilitate all assessments and allow for non-licensed staff to facilitate telephonic / remote assessment upon outreach.
- Expand use of peer workforce to address system gaps.

IMPACT:

- Cost mitigation.
- Expanded access to timely services.

6 PROBLEM: ANTIQUATED AUDIT PROCESS

Current in-person audits are valuable for accountability but impose disproportionate administrative burdens on providers. Agencies often undergo duplicative reviews from OMH, DOH, OCFS, and Medicaid, diverting staff from direct care and creating conflicting interpretations and redundant corrective action plans.



SOLUTION:

Modernize the in-person audit process by adopting a risk-based approach that prioritizes higher-risk providers, leveraging shared data across oversight agencies to eliminate duplicative reviews, and standardizing audit criteria to ensure consistency.

Additionally, incorporating technology-enabled documentation, AI, and remote audit options where appropriate can streamline preparation and reduce disruption to service delivery.

IMPACT:

- Preserves accountability while reducing burden.
- Strengthens efficiency and consistency.
- Enables earlier, scalable fraud detection.



7 **PROBLEM:** **INEFFICIENT PROFESSIONAL LICENSURE PROCESS**

Currently, licensing, and license renewals, are at frequencies which drive high utilization of NY state resources. Given the current time periods there are significant delays with issuing of licenses which impact access to care and the availability of licensed professionals in the workforce.



SOLUTION:

Extension of the licensure period for professionals regulated by the New York State Education Department (SED), Office of the Professions, could be fiscally advantageous both for the state and for licensees.

IMPACT:

- Administrative cost savings.
- Improved efficiency.
- Revenue neutrality if renewal fees adjust proportionally.

8 **PROBLEM:** **INSUFFICIENT USE OF TELEHEALTH**

Despite proven success, barriers remain to fully utilizing telehealth for mental health and substance use treatment. Outdated regulations and reimbursement limits constrain its potential.



SOLUTION:

Review OMH's regulations regarding use of telehealth and remove any barriers that inhibit its use and reimbursement.

IMPACT:

- Expands access in underserved and rural areas.
- Reduces facility and infrastructure costs.
- Lowers missed appointments and emergency visits.

9 **PROBLEM:** **LIMITED WAIVER AUTHORITY**

Currently NYS OMH has waiver authority regarding specific requirements. Pursuant to 14 NYCRR Part §501.3, the Commissioner is authorized to grant a waiver of an OMH regulation that is not otherwise required by State or Federal law. Under the regulation, the Commissioner is permitted to grant a waiver of regulatory requirement under the following conditions:

"(i) the rights, health and safety of clients would not be diminished; (ii) the best interests of clients would be served; (iii) the benefits of waiving the requirement outweigh the public interest in meeting the requirement; and (iv) the purpose of the request is to implement/test deemed appropriate by the Commissioner."



SOLUTION:

Extend waiver authority to OCFS, OPWDD, and OASAS Commissioners, enabling innovation and local adaptation while maintaining quality standards.

IMPACT:

- Encourages innovative, efficient programming.
- Allows flexible, community-based service models.
- Maintains program integrity and accountability.



NORTHERNRIVERS

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