

## FY 2026-27 Budget: Health & Mental Hygiene — Assembly & Senate One-House Comparison

Compares the Assembly one-house bill (A. 10007-B, March 2026) and Senate one-house bill (S. 9007-A, March 2026) against the Governor's FY 2026-27 Executive Budget (HMH Article VII). Based on bill text and available summary materials; Senate positions for certain rows are preliminary pending full S9007-A review.

Legend: ✓ Accepted ~ Modified + New (Assembly/Senate) X Omitted

MEDICAID / ESSENTIAL PLAN					
Topic	Governor's Proposal	Assembly Position	Asm. Status	Senate Position	Sen. Status
<b>Medicaid Global Cap [Part A]</b>	Extend the statutory authorization for the Medicaid Global Cap through March 31, 2028.	Assembly accepts.	✓ Accepted	Senate repeals the Medicaid global cap entirely.	Omitted
<b>Miscellaneous Public Health Savings [Part E]</b>	Repeal non-core public health programs within the Department of Health (DOH), including the Enhanced Quality of Adult Living (EQUAL) program, the Tick-Borne Disease Program, and the Enriched Housing program.  Eliminate a requirement for DOH to audit the number of working hours for hospital residents, as this is duplicative of federal requirements.	Assembly intentionally omits.	Omitted	Senate intentionally omits.	Omitted
<b>Medicare Coinsurance for Crossover Claims [Part M, §1]</b>	Remove the guarantee of full Medicare coinsurance payments on crossover claims for ambulance services and psychologists	Assembly intentionally omits.	Omitted	Senate intentionally omits.	Omitted
<b>Essential Plan Contingency Fund [Assembly Part Z — new]</b>	N/A	Assembly adds Part Z. Establishes a \$2.4B Essential Plan Contingency Fund in State Finance Law outside of the Medicaid Global Cap (new section 99-uu).	+ New	N/A	Omitted
<b>Applied Behavior Analysis (ABA) Services — Center of Excellence Requirement [Part M, §10]</b>	Require that ABA services be recommended by a provider designated as an ABA Center of Excellence by the commissioner of health.	Assembly intentionally omits.	Omitted	Senate intentionally omits.	Omitted
<b>Biomarker Precision Medical Testing Coverage [Part M, §12]</b>	Clarify Medicaid coverage requirements for biomarker precision medical testing, including the criteria that establish medical necessity.	Assembly modifies the provision by removing certain evidentiary criteria used to determine medical necessity, expanding eligibility for biomarker precision medical testing.	~ Modified	Senate intentionally omits.	Omitted

<b>Continuous Medicaid/CHIP Eligibility Through Age 6 [Part M, §13]</b>	Repeal continuous eligibility for Medicaid and CHIP through age six and consolidate into a single 12-month continuous eligibility rule for all children under 19.	Assembly intentionally omits.	<b>Omitted</b>	Senate intentionally omits.	<b>Omitted</b>
<b>Healthcare Stability Fund Investments [Part O]</b>	Additional investments in the Healthcare Stability Fund to:  Increase Medicaid payments for hospitals and nursing homes by up to \$1.5 billion in FY 2027 and \$1 billion annually thereafter, subject to federal financial participation.  Increase the aggregate Medicaid payments for federally qualified health centers (FQHCs) and diagnostic and treatment centers (D&TCs) to \$60 million annually beginning April 1, 2026. [from 30-Day Amendments]	Assembly doubles the ongoing Medicaid payment pool for FQHCs and Article 28 diagnostic and treatment centers from \$40 million to \$80 million starting in FY2026-27.  Assembly increases the additional Medicaid payment pool for hospitals and nursing homes from \$1.5 billion to \$2.342 billion in FY2026-27, adds a transitional \$1.142 billion in FY2027-28, and matches the Governor's \$1 billion ongoing baseline thereafter.	<b>~ Modified</b>	Senate accepts with the following modifications:  <ul style="list-style-type: none"> <li>• Increase Medicaid payments by up to \$810 million for hospitals and \$540 million for nursing homes for FY 2027.</li> <li>• Increase the aggregate Medicaid payments for FQHCs and D&amp;TCs by up to \$100 million annually beginning April 1, 2026.</li> <li>• Increase Medicaid payments for certified home health agencies (CHHAs) by up to \$50 million for FY 2027.</li> </ul>	<b>~ Modified</b>
<b>Quality Incentive Program (QIP) / Quality Pools [Part O]</b>	\$50 million allocated from Healthcare Stability Fund for quality pools (partial restoration from pre-2025 levels).	Allocates \$100 million for quality pools from the \$4B HSF distribution; unclear if all \$100M is designated solely for QIP.	<b>~ Modified</b>	No explicit modification proposed; presumed to maintain Governor's \$50M baseline.	<b>✓ Accepted</b>
<b>NYC Public Health Reimbursement Equity &amp; Medicaid Management [Part T]</b>	Repeal the Distressed Provider Assistance Account  Increase New York City General Public Health Work (GPHW) reimbursement from 20% to 36%. [Executive Budget 30-Day Amendments]	Assembly accepts.	<b>✓ Accepted</b>	Senate accepts.	<b>✓ Accepted</b>
<b>School-Based Health Centers Medicaid Coverage [Assembly Part V / Senate Part BB]</b>	N/A	Assembly adds Part V. Amends SSL section 364-j to permanently keep school-based health center services out of Medicaid managed care.	<b>+ New</b>	Adds Part BB to extend the Medicaid managed care carve-out for services provided in school-based health centers (SBHCs).	<b>+ New</b>

<b>HOSPITALS</b>					
<b>Topic</b>	<b>Governor's Proposal</b>	<b>Assembly Position</b>	<b>Asm. Status</b>	<b>Senate Position</b>	<b>Sen. Status</b>

<b>Hospital at Home / Community Paramedicine [Part K]</b>	Expand mobile integrated and community paramedicine programs, extend the community paramedicine demonstration to eight years, authorize physicians and CNPs to issue non-patient-specific immunization orders for EMS practitioners, and permit hospitals to provide certain off-site acute care services including in patient residences.	Assembly intentionally omits.	<b>Omitted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Hospital/Plan Contract Termination Continuity [Part M, §11]</b>	Extend the continuity period following hospital/plan contract termination or non-renewal from two months to 120 days and authorize DOH to review consumer communications during the 60 days prior to termination.	Assembly intentionally omits.	<b>Omitted</b>	Senate accepts with modifications, retaining the 120-day hospital–plan contract continuation requirement and also authorizing joint DOH and DFS review of communications and requiring public notice for hospital–plan contract disputes.	~ <b>Modified</b>
<b>Hospital Capital Rate Add-On [Assembly Part Y — new]</b>	N/A	Assembly adds Part Y. Amends PHL section 2807-c to establish a hospital capital rate add-on reconciling capital-related inpatient expense rates between budget and actual expenses for general hospitals.	<b>+ New</b>	N/A	<b>Omitted</b>

## LONG-TERM CARE

Topic	Governor's Proposal	Assembly Position	Asm. Status	Senate Position	Sen. Status
<b>Nursing Home Capital Rate Restorations [Part L, §1]</b>	Restore 10% reduction to the nursing home capital rate component.	Assembly modifies to allow both the 5% and 10% reductions to expire March 31, 2026.	~ <b>Modified</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Medicaid Premiums for Certain Eligibles [Part L, §2]</b>	Replace flat \$25/\$50 monthly Medicaid premiums with income-based premiums of up to 3% of net earned income and 7.5% of net unearned income for individuals at or above 150% of the federal poverty line.	Assembly intentionally omits.	<b>Omitted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Elimination of Adult Home Programs [Part S]</b>	Eliminate the Adult Home Advocacy and Adult Home Resident Council program.	Assembly intentionally omits.	<b>Omitted</b>	Senate intentionally omits.	<b>Omitted</b>
<b>OPWDD IRA Closure/Transfer Extension [Assembly Part W / Senate Part Z]</b>	N/A	Assembly adds Part W to extend the requirement that OPWDD notify the Senate, Assembly, and Labor Unions within 45 days regarding the closure or transfer of	<b>+ New</b>	Senate adds Part Z to extend the requirement that OPWDD notify the Senate, Assembly, and Labor Unions within 45 days regarding the closure or transfer of state-	<b>+ New</b>

		state-operated individualized residential alternatives (IRAs) through March 31, 2028.		operated individualized residential alternatives (IRAs) through March 31, 2028.	
<b>OPWDD Care Demonstration Program Extension [Assembly Part X / Senate Part AA]</b>	N/A	Assembly adds Part X. Extends the OPWDD care demonstration program through March 31, 2028.	+ New	Senate adds Part AA to extend the OPWDD Care Demonstration program through March 31, 2028.	+ New
<b>Upstate Nursing Home Regional Collaborative Programs [Senate Part GG — new]</b>	N/A	N/A	Omitted	Senate adds Part GG to authorize DOH to approve collaborative programs established by not-for-profit and public SNFs in the five upstate nursing home regions to improve nursing home efficiency, staffing, and quality of care.	+ New
<b>Nursing Home Diversion and Transition Services [Senate Part HH — new]</b>	N/A	N/A	Omitted	Senate adds Part HH to extend the Medicaid managed care carve-out for Nursing Home Diversion and Transition (NHTD) 1915(c) waiver services by removing the January 1, 2027 sunset.	+ New

**WORKFORCE**

Topic	Governor's Proposal	Assembly Position	Asm. Status	Senate Position	Sen. Status
<b>Scope of Practice Expansions [Part N]</b>	Expand scope of practice for medical assistants, certified medication aides, nurse practitioners, physician assistants, and others.  Transfer physician licensing oversight from SED to DOH.	Assembly intentionally omits.	Omitted	Senate intentionally omits.	Omitted
<b>Temporary Health Care Staffing Agencies [Part J]</b>	Strengthen oversight of temporary health care staffing agencies, including expanding the definition to cover app-based platforms and subcontracting arrangements, prohibiting non-compete and liquidated damages clauses, and expanding quarterly reporting and contract requirements.  Add profit margin cap authority for DOH and prohibits agencies from charging workers placement fees.	Assembly accepts most provisions but intentionally omits the Governor's proposed DOH profit margin cap authority and worker placement fee prohibition.	~ Modified	Senate accepts.	✓ Accepted

<b>Targeted Inflationary Increase [Part P]</b>	Budget includes the customary one-time “Targeted Inflationary Increase (TII)” at a rate of 1.7 percent for eligible mental hygiene and other human services program for FY 2027. Eligible programs include those funded, licensed, or certified by OMH, OPWDD, OASAS, OCFS, OTDA, and SOFA.	Assembly increases the TII to 4.0 percent and requires 2.3 percent of the increase to be spent on non-executive level staff wage increases.	~ Modified	Senate increases the TII to 4.0 percent and requires 1.3 percent of the increase to be spent on non-executive level staff wage increases. Senate also adds certain DOH and the Office of Victim Services programs to those covered by the TII.	~ Modified
<b>Ambulatory Behavioral Health APG Fee Extensions [Assembly Part U / Senate Part U]</b>	Extend the requirement that behavioral health services be reimbursed at government/APG rates through March 31, 2031. [30-Day Amendments]	Assembly accepts.	✓ Accepted	Senate accepts.	✓ Accepted
<b>Recovery Ready Workplace Act [Senate Part CC — new]</b>	N/A	N/A	Omitted	Senate adds Part CC to establishes a Recovery Ready Workplace Program within OASAS to certify and support employers that implement workplace policies promoting substance use disorder prevention, treatment access, and recovery support.	+ New

#### BEHAVIORAL HEALTH

Topic	Governor's Proposal	Assembly Position	Asm. Status	Senate Position	Sen. Status
<b>Integrated Behavioral Health Services / Single License [Part Q]</b>	Authorize OMH and OASAS to issue a joint integrated behavioral health services license to providers delivering both mental health and addiction services.	Assembly intentionally omits.	Omitted	Senate accepts.	✓ Accepted
<b>Substance-Related &amp; Addictive Disorder Insurance Coverage [Part R]</b>	Extend insurance parity protections to gambling disorder and other substance-related and addictive disorders.	Assembly intentionally omits.	Omitted	Senate accepts.	✓ Accepted
<b>SUD Outpatient Cost Sharing Limits [Senate Part DD — new]</b>	N/A	N/A	Omitted	Senate adds Part DD to limit cost-sharing fees for outpatient substance use disorder treatment programs.	+ New

#### OTHER PROVISIONS / EXTENDERS

Topic	Governor's Proposal	Assembly Position	Asm. Status	Senate Position	Sen. Status
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<b>Essential Health Services — Cancer, Dental and Vision Benefits [Part M, §2-3]</b>	Replace and redefine the definition of "health care services" to require coverage of and access to NCI-designated cancer centers within a plan's service area at no less than the Medicaid fee-for-service rate and make dental and vision benefits permanent.	Assembly intentionally omits.	<b>Omitted</b>	Senate accepts with modifiers, retaining dental and vision benefits and adding services and supports for individuals with functional limitations or chronic illness (subject to federal approval).	<b>~ Modified</b>
<b>Investor-Backed Healthcare Transactions [Part H]</b>	Require written notice at least 30 days before closing a material transaction; require preliminary and full cost and market impact review by DOH; authorize DOH to collect fees to offset review costs; require 5-year post-closing reporting.	Assembly intentionally omits.	<b>Omitted</b>	Senate accepts.	<b>✓ Accepted</b>
<b>Medical Indemnity Fund Reimbursement [Part I]</b>	Set Medical Indemnity Fund (MIF) reimbursement at 100% of Medicare (or 100% of Medicaid if no Medicare rate), with DOH authority to set rates where neither exists; excludes private duty nursing and home/vehicle modifications.	Assembly intentionally omits.	<b>Omitted</b>	Senate modifies Part I by establishing an MIF ombudsperson and advisory panel to assist claimants and review MIF operations, instead of adopting the Executive Budget's proposed reimbursement rate methodology changes.	<b>~ Modified</b>
<b>Medicaid Inspector General Audit Standards [Senate Parts EE &amp; LL — new]</b>	N/A	N/A	<b>Omitted</b>	Senate adds Part EE to limits the Office Medicaid Inspector General (OMIG) audit recoveries when documentation rules change after claims are submitted by prohibiting extrapolation and restricting recoupment to reviewed claims unless fraud or ineligible services are involved.  Senate adds Part LL that establishes new OMIG Medicaid audit standards, including use of rules in effect at the time of service, limits on extrapolation for minor errors, and enhanced transparency and documentation requirements.	<b>+ New</b>
<b>Medicaid Managed Care Authorization [Part B, §1-2]</b>	Extend the authorization for the statewide Medicaid managed care program and related managed care demonstration programs through FY 2032.	Assembly accepts but shortens. Extends through March 31, 2029.	<b>~ Modified</b>	Senate accepts.	<b>✓ Accepted</b>
<b>OPMC Funds [Part B, §4]</b>	Governor removes the statutory sunset on the use of Office of Professional Medical Conduct (OPMC) funds for activities related to the Patient Health Information and Quality Improvement Act, effectively making the authorization permanent.	Assembly retains sunset, extends to end of FY 2029.	<b>~ Modified</b>	Senate retains sunset, extends to end of FY 2029.	<b>~ Modified</b>

<b>DOH Supplemental Drug Rebate Authority [Part B, §10-11]</b>	Extend DOH authority to negotiate supplemental rebates for certain drug classes through FY 2029; extend related statutory sunset through FY 2032.	Assembly accepts.	✓ <b>Accepted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Statewide General Hospital Quality and Sole Community Pools / Capital-Related Inpatient Expenses Extension [Part B, §12]</b>	Extend statutory authority for statewide hospital quality and sole community pools supporting Medicaid financing arrangements, including the NYC Health + Hospitals Upper Payment Limit (UPL) conversion, through FY 2029.	Assembly accepts.	✓ <b>Accepted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Adult Homes / Enriched Housing Services for Non-Residents [Part B, §13]</b>	Extend authorization for services for non-residents in adult homes, residences for adults, and enriched housing programs through July 2029.	Assembly accepts.	✓ <b>Accepted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Voluntary Indigent Care Pool / DSH Fund [Part B, §15]</b>	Extend distribution methodologies for the voluntary indigent care pool and Disproportionate Share Hospital (DSH) fund through December 2029.	Assembly accepts	✓ <b>Accepted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>DSRIP Promising Practices [Part B, §16]</b>	Extend regulatory flexibility for certain Delivery System Reform Incentive Payment (DSRIP) program promising practices through FY 2028.	Assembly accepts.	✓ <b>Accepted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Pharmacist-Directed Lab / Testing Flexibilities [Part B, §17]</b>	Permanently extend pharmacist-directed lab and testing flexibilities.	Assembly extends the authorization through July 1, 2028.	~ <b>Modified</b>	Senate accepts.	✓ <b>Accepted</b>
<b>Physician Assistant Practice Standards [Part B, §19]</b>	Permanently authorizes physician assistant authority to issue non-patient specific orders for routine COVID-19 and influenza testing.	Assembly extends the authorization through July 1, 2028.	~ <b>Modified</b>	Senate accepts.	✓ <b>Accepted</b>
<b>SHIN-NY and SPARCS [Part B, §5]</b>	Extend the statutory authorization for the Statewide Health Information Network of New York (SHIN-NY) and the Statewide Planning and Research Cooperative System (SPARCS) through FY 2029.	Assembly accepts.	✓ <b>Accepted</b>	Senate accepts.	✓ <b>Accepted</b>
<b>HCRA Extension [Part C]</b>	Extend HCRA provisions including pool allocations, GME distributions, hospital payment	Assembly accepts.	✓ <b>Accepted</b>	Senate accepts.	✓ <b>Accepted</b>

	provisions, and assessments on covered lives through FY 2029.				
<b>Hospital Excess Liability Pool (HELP) Program Extension [Part D]</b>	Extend the Physician's Excess Medical Malpractice program.	Assembly accepts extension but omits the new physician/dentist premium cost-sharing requirement.	~ Modified	Senate accepts.	✓ Accepted
<b>Affordable Drug Manufacturing Act [Senate Part V — new]</b>	N/A	N/A	Omitted	Senate adds Part V to enact the New York Affordable Drug Manufacturing Act to authorize the state to support and facilitate the manufacture of affordable generic drugs.	+ New
<b>340B Anti-Discrimination Act [Senate Part W — new]</b>	N/A	N/A	Omitted	Senate adds Part W to establish the 340B Prescription Drug Anti-Discrimination Act to prohibit drug manufacturers from restricting or discriminating against 340B covered entities.	+ New
<b>Abortion Clinical Training Program [Senate Part X — new]</b>	N/A	N/A	Omitted	Senate adds Part X to enact the New York State Abortion Clinical Training Program Act to support clinical training for abortion care providers.	+ New
<b>Drug Treatment &amp; Public Education Fund [Senate Part Y — new]</b>	N/A	N/A	Omitted	Senate adds Part Y. Amends State Finance Law to modify the New York State drug treatment and public education fund.	+ New
<b>Reproductive Health Care Consent [Senate Part FF — new]</b>	N/A	N/A	Omitted	Senate adds Part FF. Amends PHL section 2504 to provide that any person may consent for reproductive health care, including abortion and contraception, for themselves.	+ New
<b>Gender-Affirming Care Access Program [Senate Part KK — new]</b>	N/A	N/A	Omitted	Senate adds Part KK to establish a gender-affirming care access program to provide funding to gender-affirming care providers.	+ New
<b>Telehealth Expansion [Senate Part MM — new]</b>	N/A	N/A	Omitted	Senate adds Part MM to extend telehealth reimbursement provisions through April 1, 2028 and clarify in-person-rate telehealth reimbursement for Article 16, 31, and 32 providers and FQHCs.	+ New

<b>Food Security Reporting [Senate Part II — new]</b>	N/A	N/A	<b>Omitted</b>	Senate adds Part II to require DOH to collect and publicly report annual county-level food insecurity data through the Behavioral Risk Factor Surveillance System survey.	<b>+ New</b>
<b>Office for the Aging Annual Report [Senate Part JJ — new]</b>	N/A	N/A	<b>Omitted</b>	Senate adds Part JJ to require the State Office for the Aging (SOFA) to make an annual report on all state budget expenditures on behalf of the senior population.	<b>+ New</b>

**Quality Incentive Program (QIP) / Quality Pools [Part O]**

\$50 million allocated from Healthcare Stability Fund for quality pools (partial restoration from pre-2025 levels).

Allocates \$100 million for quality pools from the \$4B HSF distribution. Note: bill language says "pools" (plural); unclear if all \$100M is designated solely for QIP.

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**Modified**

No explicit modification proposed; presumed to maintain Governor's \$50M baseline.

✓  
**Accepted**