

**Addressing the Rising Costs for Seniors  
PA Senate Democratic Policy Committee Hearing  
Friday, June 12, 2026  
Testimony of Tara Zrinski, Northampton County Executive**

Chair, members of the Committee, thank you for the opportunity to speak today.

I want to begin with a simple question:

*Where is the dignity in aging?*

*Where is the dignity in aging in the Commonwealth of Pennsylvania?*

This is not just a question about programs or budgets. It is a question about what kind of Commonwealth we want to be.

For too long, we have tied a person's worth to their productivity. We measure value by a paycheck, a job title, or the years they spent in the workforce. But what happens when someone retires? What happens after a lifetime of raising families, serving in our military, teaching our children, building our communities, and caring for others?

**Does their value diminish when their working years end?**

Of course not.

And yet too often, the systems around older adults suggest otherwise. Across Pennsylvania, and in Northampton County, seniors are facing rising costs, shrinking resources, and real barriers to living with independence and dignity.

We all know there is an affordability crisis affecting older adults. Fixed incomes are being stretched further every year as housing costs, utility bills, prescription medications, and basic necessities continue to rise. At the same time, the resources available to support seniors are not keeping pace with the need.

Today, I want to talk about the impacts that budget cuts and budget flatlining (budgets without increases) are having on the Northampton County Area Agency on Aging, programs like Meals on Wheels, LANTA, the Authority that provides public transportation in our County, as well as the crisis facing our County Nursing Home, Gracedale, and property taxes.

**Area Agency on Aging**

First, our Northampton County Area Agency on Aging is a lifeline for thousands of older residents and their families. For more than 50 years, Pennsylvania's Area Agencies on Aging have helped older adults find services, assess needs, and stay connected to their

communities. That work is essential. But the demand keeps rising, and the funding does not.

In Northampton County, our Area Agency on Aging funding from the State has gone from \$6.6 million in 2023-2024 to \$6.2 million in 2024-2025, and now to \$5.7 million in 2026. Meanwhile, we are being told to base the allocation for the next State fiscal year off a 2018-2019 level, which would represent approximately \$1.0 Million additional reduction in funding. Costs go up. The senior population grows. But the support goes down. These kinds of cuts inevitably lead to reduction in services.

For example, due to funding shortfalls in State fiscal year 2025-2026, Northampton County recently had to shut down two of its Senior Centers, a place seniors can go to during the day for food and fellowship. At least one, and maybe more, closures are on the horizon (especially in light of the anticipated reductions in funding for 2026-2027),

Caregiving is another crisis point. Families are waiting for affordable support services that help older adults remain safely in their homes. Caregivers — many of whom are older adults themselves — are burned out, financially strained, and carrying too much on their own. The availability of the Community HealthChoices program and other programs that pay wages to family members to care for individuals with disabilities in their homes, including many seniors, is limited by strict eligibility standards that exclude many seniors.

And aging in place only works if we invest in it. Many homes were never designed for the realities of aging. Seniors need ramps, grab bars, stair lifts, better lighting, and bathroom modifications. For someone on a fixed income, those improvements are often out of reach. A staircase becomes a barrier. A bathroom becomes a hazard. A home that once represented stability becomes a source of stress.

## **Food Insecurity**

Food insecurity is just as urgent. No older adult who has spent a lifetime contributing to this Commonwealth should have to worry about where their next meal is coming from. But too many do. Meals on Wheels and senior centers are not extras. They are essential. They provide food and human connection. When waitlists grow, it is a warning sign that the system is failing.

Northampton County currently has a waitlist for seniors to have hot or cold meals delivered to their homes. These deliveries are not only fulfilling food security but also a life-line for seniors that are unable to leave their homes. They involve wellness checks and social interaction that breaks the loneliness and isolation of the days.

## **Transportation**

Transportation is no different. For many older adults, losing the ability to drive means losing access to doctors, groceries, social connection, and community life. Independence is not just about a roof over your head. It is about being able to live in your home, while still being able to access necessary services safely and with dignity. LANTA's budget was cut; and that threatens seniors who require the use of busses and LANTA vans to get to appointments. Our society is no longer structured so that a family member can take their loved ones to their medical appointments.

And when families can no longer keep a loved one at home, they face the staggering cost of nursing home care. Medicare does not pay for long-term custodial care. It only covers short-term skilled nursing rehabilitation. That leaves families exposed to enormous out-of-pocket costs, and it puts real pressure on county facilities like the Northampton County facility, known as Gracedale.

## **Nursing Home Care**

We cannot talk about aging in Pennsylvania without talking about nursing home care.

County nursing homes like Gracedale are essential, but they are also among the most difficult and financially demanding services a county can operate. County facilities are expected to care for some of the most medically complex, behaviorally challenging, and vulnerable residents in the system, residents no other facility will take — while also meeting strict staffing ratios, direct-care requirements, and per-patient-day standards.

The staffing challenge alone is overwhelming. Nursing homes are trying to recruit and retain licensed nurses, CNAs, and support staff while there is an ongoing workforce shortage in all of these fields that is already severe across Pennsylvania. State staffing ratio rules, while well intended, have made admission and operational decisions even harder for many facilities. County facilities are forced to do more with less, while still being held to exacting compliance standards that leave very little room for error.

Then there is the reimbursement problem. Medicaid is the payer of last resort for a large share of nursing home residents—for example, Gracedale's census is 74% Medicaid. But the reimbursement cycle is too slow and too restrictive to keep pace with real operating costs. That delay leaves facilities carrying the financial burden in the short term, and in the case of Gracedale that term is 12-18 months, often pushing Gracedale further into the red while it continues to provide care for the same individuals for which it has not been paid. That is a structural problem, not a management problem.

There is also a population of residents who create a different kind of challenge—people who are highly unstable, with mental disability, at risk of elopement, or otherwise need a level of security and behavioral support that even well-managed facilities struggle to provide. Yet they still need care. That leaves counties and nursing homes with an impossible question: what do we do when there are too few appropriate placements, too few secure options, and too many regulatory consequences if the wrong placement

fails? Facilities can jeopardize certification or licensure if they cannot safely manage these residents, but turning them away does not make the need disappear. And, while the current system of Medicaid reimbursement is intended to provide higher rates of reimbursement for residents with more needs, when 1-on-1 supervision of a resident is required for the protection of the resident, other residents and the staff, and when you have multiple residents requiring such services, the direct and ripple costs will exceed the reimbursement provided.

And through all of this, nursing homes are still expected to meet staffing-per-day requirements, fill every shift, and maintain quality standards in a system that is already stretched thin. It is exhausting, it is expensive, and it is unsustainable to keep asking county facilities to absorb more complexity without giving them the tools, staffing, or reimbursement they need to do it safely.

It should also be noted that nursing facilities age. The portion of Gracedale where most residents are housed was constructed between 1927 and 1951. It is showing considerable wear and tear, and yet there are few, if any, resources available to the County to undertake the major cost of rehabilitating or replacing the facility.

### **Property Tax Relief**

And then there is property tax.

For many seniors, property tax is the bill that determines whether they can stay in the home they worked a lifetime to pay for. That is why property tax relief must be stronger, broader, and more immediate.

A rebate months later is not enough when a Senior is looking at the next tax bill right now. We need relief that is practical and predictable. That means expanding rebate eligibility so more seniors are protected, raising income thresholds so modest fixed incomes are not left behind, and strengthening rebate amounts so the help actually matches the burden.

We should also be looking at targeted protections for longtime owner-occupants, especially seniors who have lived in their homes for decades. If someone has no realistic way to absorb a sudden increase, then the system should be designed to protect that stability, not threaten it.

And if reassessment is ever part of the conversation, it must come with real safeguards—phase-ins, caps, exemptions, or other tools that prevent seniors from being pushed out of the very homes they planned to age in.

This matters deeply in Northampton County, where we have not had a countywide reassessment since 1995. Seniors in our County understand exactly what is at stake. They are not afraid of fairness. They are afraid of being priced out of their homes.

That fear is real, and we should not dismiss it.

Property tax is essential revenue for counties because it is the primary local tool we have to fund mandated services and keep government functioning, yet counties are understandably cautious about conducting a reassessment because reassessments can hit seniors on fixed incomes hardest and threaten their ability to stay in their homes. At the same time, there are real reasons to do a reassessment — above all fairness and the need to accurately capture the growth and new development that has occurred since 1995 so the County is not leaving revenue on the table, even as it sits with few other ways to generate local income.

The truth is simple: property tax is one of the most destabilizing costs older adults face, and if we are serious about aging in place, then we have to do more than talk about it. We have to act.

### **Action Steps**

The challenge before us is only growing. Pennsylvania is one of the oldest states in the nation, and Northampton County is seeing the same shift. Every year, more residents reach retirement age. More families are navigating caregiving, transportation, food insecurity, and long-term care.

This is not temporary. It is a fundamental change in our population, and it demands a real response.

The question is not whether we can afford to invest in our seniors.  
The question is whether we can afford not to.

Every dollar invested in helping older adults remain healthy, safe, and independent saves costs elsewhere in the system. But more importantly, it preserves something even greater: dignity, choice, and quality of life.

Here are several action steps that we strongly urge you to push forward in the State Senate in connection with the budget negotiations for State fiscal year 2026-2027:

1. Provide additional state funding for Area Agencies on Aging and senior centers.
2. Expand the eligibility standards for the Community HealthChoices program so that more older adults can qualify, and provide the necessary additional funding to serve the individuals who qualify under the broader standards.
3. Build upon the Whole Homes program by adding funding for home improvements to enable seniors to safely stay in their homes.
4. Add funding for public transit, including services to seniors.
5. Fund training program scholarships for CNAs and licensed nurses wanting to serve in skilled nursing facilities (with a commitment on their part to serve for x period of time).

6. Require that reimbursements be delivered to skilled facilities by a date certain (within \_\_ number of days from delivery of a “clean” invoice), and fund an increase in reimbursements across all levels of care.
7. Create a capital investment fund that would provide low-interest financing to support new builds and other capital projects at nursing facilities, especially County nursing facilities.
8. Expand the eligibility standards for the State real estate tax rebate program, and shorten the time-frame for the payment of rebates.
9. Provide funding to Counties to assist with re-assessments, so that expenses associated with the re-assessment process do not “break the bank” for Counties, and do not adversely impact a county’s ability to provide ongoing services to older adults and others.
10. Pass enabling legislation that authorizes counties to phase in, ramp up and/or temporarily exclude low-income seniors from adverse re-assessments.
11. Pass enabling legislation that authorizes counties to raise additional revenues from sources beyond the limited number of current options.

As you think about these recommended action steps, I urge you to keep the following in mind:

- (i) Federal Medicaid cuts are on the way, and at least where we sit at the County level, there does not appear to be a lot of clarity as to what exactly those cuts will look like. Substantial cuts significantly impacting Gracedale could theoretically make it virtually impossible to keep Gracedale open. Where would our close to 500 residents go? The State is going to have to find a way to pick up some of the slack left by the Federal government or we could have a catastrophic older adult crisis on our collective hands.
- (ii) Funding can be used best by counties when it comes down with fewer restrictions attached. I am sure you all feel the same way about Federal funding when it comes down to the State. Counties know their communities and are well-positioned to know what needs there are and how best to meet them.

You have the power to pursue these actions. We respectfully, but urgently, ask you to do so. I and my staff are available to collaborate with you on any of these issues.

In closing, I return to the question I began with:

### **Where is the dignity in aging?**

The answer lies in the choices we make.

I urge the Pennsylvania Senate to make aging a real priority in this year’s budget and legislative agenda. We need sustained investments in Area Agencies on Aging, caregiver support, senior nutrition programs, transportation, home modifications, and the services that allow older adults to remain in their communities.

And we need to stop accepting a system where seniors are forced to live in fear of what the next bill, the next tax notice, or the next funding cut will bring.

The people we are talking about are not statistics. They are our parents, grandparents, neighbors, veterans, teachers, and friends. They built this Commonwealth.

Now it is our turn to protect them.

Let us build a Pennsylvania where growing older is not accompanied by fear and uncertainty, but by respect, stability, and dignity.