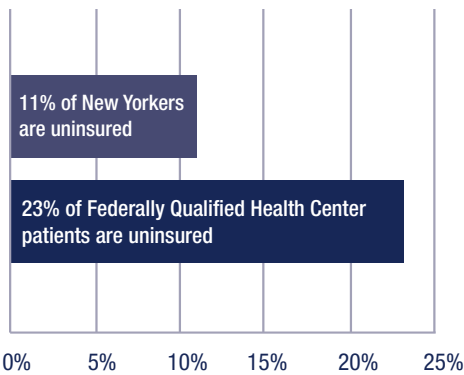


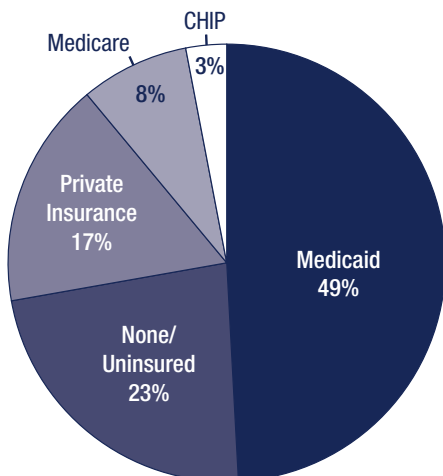
► Maintain the Executive Budget’s Proposed \$54.4 Million for the Diagnostic and Treatment Center (D&TC) Uncompensated Care Pool

FQHCs Serve Those Most in Need:

FQHCs are the statewide primary care safety net for New York’s uninsured.



A majority of FQHC patients are Medicaid beneficiaries or are uninsured.



The Diagnostic and Treatment Center Uncompensated Care Pool (D&TC UCP) provides funding to Federally Qualified Health Centers (FQHC) for services provided to uninsured patients. FQHCs are New York State’s primary care safety net, but they are struggling under the fiscal constraints of providing care to the uninsured because of the low reimbursement they receive for serving these patients. According to their mission and mandate, FQHCs are only located in designated underserved communities and they provide access to primary health care regardless of insurance status or ability to pay.

Though FQHCs try hard to ensure that eligible people are enrolled in coverage, **23% of health center patients are uninsured—a 6.5% increase over the past five years—and the number of uninsured patients is as high as 50% at some health centers.** With the implementation of the New York State of Health (NYSOH), FQHCs will continue to play a critical role in caring for newly-insured patients while simultaneously serving as the primary care safety net for uninsured.

When Massachusetts implemented its health insurance individual mandate, the proportion of uninsured residents served by health centers rose from 22% to 36% in the first year. If New York’s health centers experience a similar rise in their uninsured numbers, they will be faced with an insupportable indigent care funding shortfall. Accordingly, continued funding for the D&TC Uncompensated Care Pool is critical.

The D&TC Uncompensated Care Pool uses a simple, transparent formula to assess the “uncompensated care need” of each FQHC. Put simply, “need” is calculated by multiplying the number of “self-pay” or uninsured visits by that facility’s Medicaid rate. From that amount, any money that the facility received to offset the visits (i.e., if the patients paid anything for the visits) is subtracted to come up with a nominal figure representing “need” or losses. The more uninsured care a center provides, the greater proportion of the pool the center receives.

FQHCs are medical homes, offering a comprehensive model of care that is associated with demonstrated improved outcomes and reduced costs that is available to all. FQHCs serve both insured and uninsured patients. Uninsured patients gain access to quality care by paying according to a sliding fee scale based on income and family size.