

Good afternoon, my name is Darryl Ng and I am the Director of Government Affairs for the Community Health Care Association of New York State (CHCANYS). CHCANYS is New York's primary care association and the statewide association of community health centers. I'd like to thank the City Council for the opportunity to testify at its Hearing on New York City's Response to H1N1 and Assessing Influenza Preparedness. CHCANYS is here today to voice our strong support for the New York City Department of Health and Mental Hygiene's (DOHMH) past and ongoing efforts related to H1N1 and to encourage a continuation and expansion of its focus on linking community health centers to city emergency planners.

Community Health Centers (CHCs) are nonprofit health care practices that provide high quality and cost-effective primary care to anyone seeking care regardless of ability to pay. They operate in underserved communities in all five boroughs and also bring health care services wherever needy patients, including homeless persons and migrant workers, need them. In New York City, 35 federally qualified community health centers provide care to over 700,000 individuals in approximately 200 sites. Together, New York City's community health centers comprise one of the most comprehensive primary care networks in the five boroughs. These centers provide high quality, comprehensive, community-based primary care to New Yorkers living in some of the poorest communities in New York City. Community health centers provide a "one-stop" approach to care that has produced outstanding health outcomes for their patients, especially those with chronic diseases.

Because they are run by and serve their communities, community health centers play an important role in emergency preparedness and response. In recognition of their critical role, DOHMH has developed a strong and effective partnership with CHCANYS to reach out to our member centers and other primary care centers to respond to the recent H1N1 outbreak.

The Community Health Care Association of New York State (CHCANYS) has represented the community health centers of New York for nearly 40 years. CHCANYS works to increase access for those who would otherwise go without care through advocacy and education and also creates major new programs and initiatives that showcase community health centers as centers of excellence. CHCANYS works to ensure that all New Yorkers have medical homes.

Primary care is and should be at the forefront of a public health response to pandemics, with CHCs caring for people who would not go to a hospital ER for treatment for a flu-like illness. Community health centers also alleviate the burden a pandemic places on hospital emergency rooms by treating other patients who are not seriously ill enough to require acute care. Add to this the ability of community health centers to reach medically underserved communities and it becomes clear that these centers are an integral part of a public health response to pandemic.

When H1N1 was discovered to be affecting local communities, DOHMH recognized the importance of primary care and community health centers. DOHMH reached out to CHCANYS to relay important information in email alerts, conduct outreach to gain participation for primary care-specific conference calls, and learn from the centers what issues they faced and what assistance might be needed. When DOHMH needed data on changes in patient volume the health centers were experiencing, they turned to CHCANYS to reach out to the centers to collect

it. CHCANYS worked closely with our partners at the Primary Care Development Corporation (PCDC) to collect, analyze and report on the responses.

Prior to the outbreak of H1N1, CHCANYS' Emergency Preparedness Program was working with the DOHMH on community health centers' inclusion in the City's Pandemic Antiviral Allocation Plan. CHCANYS worked with DOHMH to identify and assess the capabilities and needs of community health centers to receive antiviral supplies from the City in the event that the Strategic National Stockpile would be released.

With the onset of H1N1 in New York City, however, the Antiviral Allocation Plan immediately became an urgent priority. The DOHMH led a speedy and thoughtful response to this potential crisis. Our original goal of distributing a cooperative agreement for health centers to review by the end of June became a distribution of the agreement for immediate signature. Community health centers responded positively and so far, twenty-six will participate in the City's Pandemic Antiviral Allocation Plan.

As we continue to address H1N1 issues on a daily basis, we are planning for the fall flu season, which some fear may bring a return of more virulent strain of H1N1. While we have come a long way in a short time due to the strong and steady leadership of the DOHMH, additional and critical planning must occur as the clock is ticking toward the fall. We look forward to our continuing close partnership with the DOHMH in this process.

Thank you.