

End Block Granting for Public Health Programs and Restore Funding to These Already Woefully Underfunded Programs

Policy Request

We urge the Legislature to:

Support public health programs as individual appropriations and maintain funding levels to ensure access to health care for all residents of this state.

Background

The 2013–2014 Executive Budget puts New York State's public health programs at risk. The budget does not clearly allocate funding on a program-by-program basis, but instead allocates public health programs into six areas and broadens the authority to the Commissioner of the Department of Health to review, allocate and change funding after the passage of the budget. Funds will be distributed within six broad areas or "buckets," which used to comprise 89 programs at a total funding level of \$395 million.

- The total funding allocation for the 89 programs for 2013–2014 has been reduced by about 10% to \$355.2 million. The **proposed competitive process jeopardizes all public health** funding, including Migrant Health Care, Doctors Across New York programs, School-Based Health Center grants, and numerous other essential public health programs.
- The sum total of funds provided in the **block grant amounts to a 10% cut over current funding appropriations**, forcing programs to compete against each other for funding at a time of great need.
- The proposal gives **unprecedented discretion to the Commissioner of Health** as to the level of funding each of these programs will receive, leaving community providers with little certainty for the future.
- Many of these programs provide tremendous benefit to New York State and are critical to health care restructuring efforts to advance the "triple aim" of better care, improved health and reduced cost.

Continue Funding for Community Health Centers Serving Migrant and Seasonal Farm Workers and Their Families

- Continue funding at previous fiscal year levels (FY 12–13: \$430,000) for Migrant Health Care programs across New York State.
- Migrant Health Care funding allows health centers and other eligible providers to care for over 18,000 migratory and seasonal agricultural workers and their families, who are integral to New York State's agribusiness.
- Over 23% of migratory and seasonal agricultural worker families have total family income levels below the national poverty guidelines.

Protect Funding for Doctors Across New York

- New York State recruitment and retention programs under Doctors Across New York (DANY) are and have been crucial mechanisms to help underserved communities and facilities with shortages of health care providers recruit and retain clinical providers.
- The Physician Practice Support and Physician Loan Repayment programs offered through DANY provide incentives to physicians who practice in medically underserved areas.
- Filling existing provider vacancies at FQHCs could increase capacity to serve hundreds of thousands more patients, making workforce issues a top priority.
- Expanding the State's existing provider recruitment and retention programs to fill existing FQHC provider vacancies could produce 720,000 more visits for more than 155,000 patients.

Secure Funding for School-Based Health Centers

- Continue level funding for School-Based Health Centers (SBHCs) at last year's level of \$21,738,317.
- SBHCs provide students with easy access to physical, mental health, dental, and health promotion/ preventative services.
- Located in some of New York's poorest urban and rural communities, SBHCs provide comprehensive primary and preventive health care for children who face barriers trying to access primary care in their communities, helping to prevent unnecessary emergency room visits.
- The investments in SBHCs are essential to New York's primary care health system. In most cases, **students don't need to miss school to get the help they need**. School-Based Health Centers provide easily accessible services to students directly where they are in school.