



2016 Budget and Legislative Priorities

Indigent Care Funding

- \$54.4 Million in contingency funding to fill the gap created by the potential loss of 2015 Federal Indigent Care Funding
 - The 2016 Executive Budget includes \$54.4 million for the D&TC Uncompensated Care Pool but the authorization for the federal match expired in 2014 and, as of today, FQHCs have still not received more than half of their 2015 indigent care funding.
 - o 25% of health centers that receive indigent care funds are currently experiencing or will experience operational deficits in the immediate future if they do not receive the 2015 federal match.
 - On average, 18% of patients seen at FQHCs are uninsured, compared to 8% throughout New York State. At some FQHCs, more than 50% of patients are uninsured.

Investments in Community-Based Providers to Support Transformation Efforts

 Allocate \$49M of the proposed Health Care Facility Transformation Funding to Community Health Care Providers

A minimum of 25% the fund (\$49M) should be allocated to community healthcare providers to support their ongoing participation in transformation efforts.

 Create a \$88.5M Essential Community Health Care Provider Fund Exclusively for Community Healthcare Providers

This pool would have the same purpose as the Essential Provider Pool for hospitals included in last year's budget —to support capital and working capital needs of community healthcare providers in furtherance of healthcare transformation.

Existing Programs

- Appropriate \$430,000 for Migrant Health Care programs
 This would restore funding to previous fiscal year levels (FY 2012-13) for Migrant Health Care programs across New York State.
- Add \$20M to the Community Health Care Revolving Capital Fund Established in Last Year's Budget
 The \$19.5 M appropriated in last year's budget is not nearly enough meet the enormous demand for
 capital in the community-based healthcare sector.
- Maintain Support for Primary Care Service Corps and Doctors Across New York and Streamline the Application Process
- Add \$3.8M to School Based Health Center Program to Support Transition into Managed Care

Other Proposals

• Ensure Continuity of Care within Limited Service Clinics.