

# Community Health Care Association of New York State

# 2011-12 New York State Budget Priorities

Community, migrant and homeless Federally Qualified Heath Centers (FQHCs) provide highquality, affordable and accessible primary and preventive health care for more than 1.4 million New Yorkers at over 470 sites in urban, rural and suburban communities. FQHCs are the backbone of New York's primary care system and health care safety net.

The fiscal challenges faced by New York State are unprecedented and impact every area of health care and all New York residents. We thank our State elected officials and government leaders for leading the design of fundamental health system reforms designed to reduce costs while improving health status and quality of care.

The Community Health Care Association of New York State (CHCANYS) works to ensure that all New Yorkers, and particularly those living in underserved communities, have access to highquality, community based health care services by promoting policy priorities focused on these goals. With this in mind, New York's FQHCs and CHCANYS proudly support the following policy proposals:

- Implementation of the approved recommendations of the Medicaid Redesign Team (MRT).
- Approval of the Executive Budget's proposed \$54.4 million for Diagnostic and Treatment Centers (D&TC) Indigent Care Pool.
- Approval of the Executive Budget's proposed \$430,000 for continued funding for community health centers serving migrant and seasonal farm workers and their families.

#### Implement the Approved Recommendations of the Medicaid Redesign Team

The Community Health Care Association of New York State commends the work of the Medicaid Redesign Team (MRT) and is extremely encouraged by the outcomes that will protect the most vulnerable people in the State and move the health system toward greater investment in high-quality, cost effective primary care. While making the necessary reductions in Medicaid spending, several of these reforms will produce better quality healthcare for the patients who need it most. What is more, with its recommendations, the Team has taken a significant step forward in the implementation of health care reform.

We recognize that any real progress towards our goals of greater access to high quality affordable primary care for all New Yorkers will only be accomplished through the thoughtful implementation of these reforms. As New York State's Primary Care Association, CHCANYS stands ready to lead this effort alongside our partners inside and outside of the health system.

The plan recognizes that primary and preventive care is critical to reforming New York's healthcare system, and proposes the right kinds of initiatives to make the system work. CHCANYS authored several of the proposals considered by the Team, including two of the approved primary care proposals:

• Expanding Access to Patient-Centered Medical Homes (PCMH) for New Yorkers.

Patient Centered Medical Homes are proven to improve health status, quality of care and reduced overall costs. Investment in comprehensive coordination of primary and preventive care results in reduced hospitalizations and lengths of stay, avoidance of unnecessary ER visits, and improved medication management. This provision of the MRT recommendations enables coordination and streamlining of regulatory and operating requirements in order to facilitate the rapid expansion and development of PCMH's for New Yorkers.

• Creating an Office of Patient-Centered Primary Care Initiatives.

We applaud the creation of a dedicated office for primary care which assures that New York takes advantage of the opportunities under the Affordable Care Act (ACA). It gives providers and stakeholders a single point of contact at the Department of Health to help reduce regulatory barriers, promote the expansion of primary care and provide leadership on addressing workforce shortages.

New York could have chosen a different path – one that sought draconian cuts, pushed people out of Medicaid coverage, and eliminated essential services. Instead, unlike many states facing serious budget concerns, New York is choosing to protect its most vulnerable populations by refusing to eliminate benefits or reduce eligibility.

## Maintain the Indigent Care Pool for Diagnostic and Treatment Centers

On average, 28% of FQHC patients in New York are uninsured, and at some centers, more than 50% of all patients are uninsured. The Diagnostic & Treatment Center Indigent Care Pool provides funding to health centers for services provided to uninsured patients. This Pool is vital to ensuring that FQHCs are able to continue to serve as the primary care safety net for uninsured New Yorkers.

## Migrant Worker Health Care Funding

Migrant and seasonal farm workers are integral to New York State's agribusiness. Yet three in five farm workers live below the federal poverty level, and farm work ranks as the third most hazardous occupation in the nation, behind mining and construction. New York's migrant health care centers keep farm workers healthy by providing primary and preventive health care services, including culturally competent outreach, interpretation, transportation, health education and dental care. FQHC migrant health programs proudly serve this special population that is at high risk for injury and illness.