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Care for Indigent and Uninsured New Yorkers at Risk, Community Providers tell Legislature’s Fiscal Committees

*State depends on community providers but investment falls short*

Primary health care for New Yorkers in many communities will be put at risk unless the final state budget contains at least $20 million more for indigent care, advocates representing community-based providers told lawmakers today.

In testimony before the state Legislature’s fiscal committees, the Community Health Care Association of New York State (CHCANYS) said the additional funding would go to safety net providers statewide, including Federally Qualified Health Centers. FQHCs, also known as community health clinics, are non-profit, community run centers located in medically underserved areas that provide high-quality, cost effective primary care, including behavioral and oral health services, to anyone seeking it, regardless of their insurance status or ability to pay.

FQHCs serve two million New Yorkers annually – an increase of 35 percent since 2008 – with some 86 percent of patients near or below the poverty line. CHCANYS represents New York’s FQHCs, which operate more than 650 sites statewide.

“Increasing the funding by $20 million will maintain 2016 funding levels and mitigate undue financial harm to FQHCs and other safety net providers that serve high numbers of uninsured New Yorkers,” said CHCANYS Assistant Policy Director Lacey Clarke. “Without these additional dollars, many FQHCs may be forced to reduce staff, eliminate expansion plans and/or limit access precisely at a time when it is anticipated the numbers of uninsured may increase statewide, unnecessarily increasing reliance on more costly forms of care.

“In contrast to proposed appropriations that would benefit a single provider or one system, the additional $20 million would benefit the more than 80 safety net providers statewide who are committed to providing accessible community-based primary and behavioral health services to all New Yorkers, including those without insurance coverage,” she said.

Securing this funding is CHCANYS’ top budgetary priority this year. The full testimony may be accessed here:

http://www.chcanys.org/clientuploads/2017%20Advocacy/CHCANYS_1718_Budget_Testimony_FINAL.pdf
CHCANYS noted that while New York is relying on the work of the safety net healthcare providers that serve high-poverty communities to transform its healthcare delivery system and keep patients out of the emergency room, it has sent those providers only 6 percent of the $2.8 billion spent on this purpose in the last three years. The overwhelming lion’s share of the funds has gone to hospital networks, which have received even more state dollars when other hospital-only funding is factored in.

“We support New York’s efforts to transform the healthcare delivery system and are pleased the state recognizes the importance of expanding access to comprehensive, community-based care,” said Interim President and CEO Lisa Perry. “But meaningful, sustainable delivery system transformation will be achieved only if the state lives up to its own policy. New York needs to better fund the community healthcare providers whose work is at the center of the reimagined care delivery system.”

“While we are grateful that the administration has emphasized how community-based primary care is central to the state’s health care delivery system and payment reform efforts, the resources have not followed the stated policy,” Ms. Clarke said. “The state should ensure that FQHC and other community-based providers receive proportional resources to ensure the successful transformation of New York’s healthcare delivery system and continued access to high quality, cost efficient primary health services for all New Yorkers.”

New York State has embarked on an effort to reduce avoidable hospital use by 25% over five years. The effort relies upon thoughtful collaboration between large hospital networks and the community-based health organizations that serve the vulnerable populations more statistically likely to visit emergency rooms for treatment of chronic health conditions.

In addition, FQHCs face an uncertain funding future from the federal government, making New York State action even more critical.

“New York State should ensure that their budgetary decisions support FQHC’s financial viability and their ability to continue to provide high-quality, comprehensive, community-based primary care to all New Yorkers, a signature component of New York’s wide-ranging healthcare delivery system and payment reform initiatives,” Ms. Clarke said.

**About the Community Health Care Association of New York State (CHCANYS)**

CHCANYS’ mission is to ensure that all New Yorkers, including those who live in medically underserved communities, have continuous access to high quality community-based health care services, including a primary care home. CHCANYS serves as the voice of community health centers as leading providers of primary health care in New York State. For more information, visit [www.chcanys.org](http://www.chcanys.org).

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