

State FY 2023-2024 Budget Priorities

Update CHC Medicaid rates to reflect increases in costs and ensure access in low-income communities.

- Health care delivered by CHCs is in high demand and growing, especially for dental and behavioral health services. Yet, CHCs struggle to meet demand due to cost pressures.
- CHCs' base reimbursement rate was set over twenty years ago reflecting costs in 1999 with only marginal increases over time.
- CHCs are excluded from the Governor's proposed initiatives to increase reimbursement in primary care, even though CHCs provide essential primary and preventive care to all New Yorkers, regardless of ability to pay, insurance, or immigration status.

Protect the 340B program; support an alternative to the pharmacy benefit carve out.

- If the carve out is implemented, CHCs will be forced to cut programs historically funded by 340B reinvestments, like school-based health centers, mobile dental care, and low-cost drugs for the uninsured.
- CHCANYS supports an alternative that would repeal the carve out while establishing many of the State's policy goals around capping drug pricing and increasing transparency in the Medicaid program.

Enhance health care workforce in medically underserved communities.

- Support full funding for existing healthcare workforce programs: Doctors Across New York, Nurses
 Across New York, Area Health Education Centers, Diversity in Medicine Program, and Ambulatory Care
 Training Program
- Support initiatives to alleviate healthcare workforce shortages, including New York State joining Interstate Medical and Nurse Licensure Compacts; temporary permits for out-of-state licensed providers who meet NYS licensure requirements; allowing Dentists to screen for HIV and Hepatitis C; and expanding the role of Physician Assistants in primary care.
- Support expanded Medicaid billing providers at CHCs, including LMHCs, LMFTs, CHWs, and Doulas.
- Adopt legislation authorizing nationally certified Medical Assistants to conduct limited healthcare tasks, including injections and immunizations, under provider supervision.
- Allow primary care clinics to deliver up to 49% of their total visit volume through behavioral health.

Ensure telehealth payment parity regardless of modality and patient/provider location.

• Expand flexibilities included in last year's enacted budget to ensure CHCs are paid their full rate regardless of patient and provider location.

Support programmatic funding for enhanced care management and expanded access to comprehensive primary care services.

- Support \$12M increase in Patient Centered Medical Home (PCMH) funding
- Restore \$100M cut to Health Homes program
- Diagnostic & Treatment Center Uncompensated Care Safety Net Pool \$54.4M
- School Based Health Centers \$8.3M
- Migrant & Seasonal Farm Workers Program \$406K
- Rural Health Access Networks \$9.4M
- Statewide Health Care Facility Transformation Grants, with set aside for community providers \$1B

Support Essential Plan Expansions but include <u>all</u> New Yorkers up to 250% FPL.

 Ensure undocumented immigrants are included in the State's expansion of the Essential Plan for New Yorkers up to 250% FPL.