

**Notes from Albany Briefing**

**January 28, 2019**

**Welcome**

*Senator Pamela Helming, Ranking Member, Legislative Commission on Rural Resources* Senator Helming reflected on her past two years as Chair of the LCRR and encouraged members to contribute ‘success stories’ to the quarterly *Rural Futures* newsletter.

**Panelist Presentations**

*Jill Kasow, Legislative Commission of Rural Resources*

The Assembly (yellow book) and Senate (blue book) have done preliminary analyses of the proposed Executive Budget. Legislators have scheduled a series of Hearings that run from late January to mid-February. Actual negotiations begin in March. The change in party leadership of the Senate is significant. Fortunately, many experienced staff members have been hired by the new Senate leaders.

*Karen Roach & Jim Clancy, Healthcare Association of NYS*

Issues of concern:

* Elimination of Population Health Improvement Program
* Funding for Critical Access and Sole Community Hospitals
* Doctors Across New York [75 slots planned]
* Commission on Universal Access [single payor]
* Staff Enhancement Study [nurse/staff : patient ratios]

Our timing is good. Don’t be disappointed if meeting with Staff.

*Lacey Clarke, Community Health Care Association of NYS*

High Priority:

* Immigration issues
* High number of undocumented residents choosing not to enroll in health plans
* Health Centers need increased funding for uncompensated care [$54.4m+$20m]
* Migrant farm worker flat funded at $4m

Supports:

* Rural perinatal telehealth
* PHIP
* Doctors Across NY
* DSRIP regulatory waiver extensions

*Glenn Liebman, Mental Health Association of NYS*

High Priority:

Human Services 2.9% COLA for all personnel [direct care and others] delayed for 10 of 11 years. Impacts the entire human services sector.

Suicide Prevention:

* School mental health education
* Resource Center for school districts
* FarmNet

*Harvey Rosenthal, NY Association Psychiatric Rehabilitation Services*

NYAPRS mission is to change the focus of the mental health system to one that embraces wellness and peer support rather than illness and institutional confinement.

High Priority:

* Criminal justice reform
* People with mental illness over-represented in correctional system
* Humane Alternatives to Long Term Solitary Confinement [HALT]
* Expand Crisis Intervention Teams [trained police] to additional Counties
* Start Medicaid enrollment one month prior to prison/jail release

State Budget:

* Peer support & certification training
* Reinvestment of funds released from institutional closures
* County funding
* Supportive housing
* Rent stabilization

*Steve Kroll, NYS Volunteer Ambulance & Rescue Association*

The Emergency Services Council advises the Governor. Good ‘pre-hospital’ care reduces the total cost of healthcare. Note: EMS was not a goal option in DSRIP; it should have been.

High Priority:

Raise awareness that rural EMS is unravelling.

* Support volunteerism to slow the transition to a paid workforce
  + Tax credits
  + Health insurance
* Increase insurance reimbursement
  + Increase reimbursement amounts to cover true costs
    - Medicaid, Medicare & private insurance
  + Pay directly [resources are diverted to collect payments from patients]
* Designate ‘critical access’ ambulance services similar to Critical Access Hospitals
  + Provide financial support to low volume, low population communities

*Rob Wingate, NYS Area Health Education Centers*

Federal program designed to address health professional shortages [HPSA] operates nine Centers in New York. HRSA provides about one third and NYSDOH provides about two-thirds of funding. Focus is on ‘pipeline’ activities for high school students, continuing education for licensed/certified professionals and experiential opportunities for professionals in training. Small staff focused on collaboration with regional partners.

State Budget:

* ‘flat funding’ for SFY 2020
* Seeking restoration of 20% cut implemented in SFY 2017

*Barry Brogan, North Country Behavioral Health Network*

On behalf of Substance Use Disorder providers, the Governor’s Opioid Task proposal appears to redirect funds from existing OASAS programs and providers rather than adding ‘new money’.

State Budget:

* We need funding for education and prevention
* Legalization of recreational marijuana creates greater challenges

**Discussion Topic**

*Non-emergency Transportation*

A lively discussion took place that included NYSARH members around the room.

* HCBS for HARP-eligible people will pay for some rides
* Medicaid Policy has devasted rural public transportation by moving Medicaid-funded rides to cabs instead of buses; can this be changed?
* LCRR studied the transportation issue and did outreach with Counties; recommendations to increase funding have not been addressed by the Executive
* NYS DOT did a study that has not been released
* Can regulations be changed to allow ambulance/EMS to deliver to sites other than Emergency Departments such as a doctor’s office or urgent care center?

Many thanks to Barry Brogan for pulling together a diverse panel with significant expertise and passion for the issues. We learned a lot.