

The SFY 2024-2025 budget must:

PROVIDE LOW- AND NO-COST RELIEF

New York's healthcare system is vast and complex. The challenges it faces require a multi-pronged approach that includes both fiscal support and sound policies that provide oversight while supporting and fostering quality care, innovation and a robust workforce.

The Executive budget includes meaningful proposals that would bolster the healthcare workforce, expand access to new models of care, hold commercial health insurers accountable and increase access to much-needed behavioral health services.

HANYS urges legislators to advance these proposals that would provide meaningful aid and direct relief to hospitals and nursing homes while imposing minimal to no state costs.

Invest in our healthcare workforce

Staffing flexibilities: Enact proposals that enable healthcare professionals to practice at the top of their credentials and training.

- Allow experienced physician assistants to practice independently.
- Authorize certified medication aides to administer routine and prefilled medications in residential healthcare facilities.
- Allow medical assistants under physician, physician assistant or certified nurse practitioner supervision to draw and administer immunizations to patients in an outpatient setting.
- Extend for two years amendments to the Nurse Practice Modernization Act, which allows experienced nurse practitioners to practice independently.

Interstate licensure compacts: Authorize New York state to join the 37 states that are part of the Interstate Medical Licensure Compact and the 41 states that participate in the Nurse Licensure Compact.

COVID-19 sick leave law repeal: With the enactment of the state's paid sick leave law and changes in quarantine requirements, this law is outdated and further exacerbates current healthcare workforce shortages. New York state remains one of very few jurisdictions where this requirement continues.

Ensure the right care in the right place to meet growing patient demand

EMS modernization: Advance policies that would strengthen and modernize the state's emergency medical services and allow hospitals and emergency medical technicians to provide more care to patients in their homes and communities.

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Hospital at Home: Allow hospitals to provide acute care in patients' homes and receive Medicaid reimbursement. Additionally, the proposal would expand the existing hospital-home care-physician collaborative program to include hospice and emergency medical services providers as part of a broader healthcare delivery collaborative program.

Reform payer policies to preserve and expand access to care

Telehealth payment parity: Make permanent New York's telehealth payment parity law, which is currently slated to expire April 1. Telehealth increases access to healthcare services for patients who face challenges receiving in-person care.

Liquidation of damages on health insurers: Increase managed care organization compliance with certain performance standards and contract obligations under state and federal regulations by authorizing DOH to recover up to \$25,000 in liquidated damages from MCOs that fail to meet these standards and contract obligations.

Ensure access to behavioral health services

Mental health parity: Increase penalties on health insurers that violate state and federal laws prohibiting them from imposing coverage limits on mental health or substance use disorder benefits that don't apply to medical and surgical benefits.

Commercial insurance minimum reimbursement rates: Require commercial insurers to reimburse outpatient behavioral health services at the Medicaid rate or higher. Commercial insurers often disregard parity laws by paying providers less for behavioral health services than for physical health services.

The final SFY 2024-2025 budget must stabilize our hospitals and nursing homes.

New Yorkers depend on these healthcare providers to be there when they need them. Unrelenting fiscal and workforce pressures are threatening that expectation. We urge state policymakers to:

- 1. Take meaningful steps to close the Medicaid payment gap.**
- 2. Reject the significant proposed Medicaid cuts to hospitals and nursing homes.**
- 3. Enact policies that provide workforce and other critically needed relief at little or no cost to the state.**