

Health Care for All New York: 2019 Post-Budget Agenda



Building Quality, Affordable Health Care for ALL New Yorkers

Health Care for All New York (HCFANY) is a statewide coalition of over 170 consumer advocacy organizations dedicated to securing quality, affordable health coverage for all New Yorkers.

Over 1.1 million New Yorkers are uninsured, and many more struggle to afford health care even with insurance. New York's enacted budget did little to nothing to provide relief. We urge the Governor and the Legislature to take steps to expand access to quality, affordable coverage.

Universal Coverage for All New Yorkers

A5248/S3577: The New York Health Act
New York is close to universal coverage, but arbitrary distinctions based on immigration status and income leave some people uncovered. Additionally, many New Yorkers who have insurance still cannot afford care and struggle with medical debt. A single-payer system that covers all residents through taxes, with no payment at point of service, would alleviate both problems.

Health Coverage for Immigrants

A5974/S3900: Expanded Essential Plan Eligibility

This bill would use the Essential Plan to provide coverage to New Yorkers who are currently excluded from the program because of their immigration status. The Essential Plan covers people who earn up to 200 percent of the Federal Poverty Level but excludes some immigrants. HCFANY estimates over 110,000 people could gain coverage in 2019 through such a program.

A3316/S1809: State Coverage for Threatened Immigrants

The Trump Administration is ending Temporary Protected Status for thousands of New Yorkers, many of whom have lived in New York for decades and made it their permanent home. This bill would ensure that those immigrants remain eligible for Medicaid in New York regardless of how the federal government treats them.

Affordable Care

A6677a/S5546: Target Indigent Care Funding to Safety-Net Institutions

The current Hospital Financial Assistance Law does not target indigent care pool funds (over a billion dollars annually) to the hospitals that serve the most uninsured and Medicaid populations. This bill would redistribute the funds to true safety net hospitals that provide the most care to people with Medicaid or who are uninsured.

A2969/S2849 and A3038/S2847: Prohibit Mid-Year Drug Formulary Changes

Health plans often change drug formularies in the middle of the contract year when consumers are locked into the contract. This significantly changes the product the consumer agreed to buy and current law provides consumers with no recourse. This bill would prohibit mid-contract formulary changes unless a generic equivalent becomes available. In that event the bill would require notice of new generics with enough time for consumers to adjust their treatment plans or appeal to continue their current medication if the generic is not suitable. A3038/S2847 also adds protections against unfair utilization review practices.

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A264b/S3171a: Subject Out-of-Network Emergency Room Charges to Independent Dispute Resolution

New York's surprise bill law protects consumers from out-of-network hospital emergency charges but does not subject those charges to the independent dispute resolution process established to negotiate disputes between plans and providers. That means health plans sometimes end up on the hook for excessive hospital charges, which get passed along to consumers in the form of higher premiums. This bill would fix the loophole.

A2836/S2087 and A2970/S1705: Require Transparency from Pharmacy Benefit Managers (PBMs)

PBMs are supposed to manage drug coverage and negotiate better prices than health plans can negotiate. However they need more regulation to ensure that they are not actually driving health care costs up. A2970/S1705 would require PBMs to disclose conflicts of interest and other important information to their contracted partners and to the Superintendent of Health. The bill would also result in a public annual report analyzing the effect PBMs have on prices and access. A2836/S2087 would accomplish many of the same goals but also require PBMs to become licensed.

Empowered Consumers

A7754/S5145: Codify an Independent Consumer Assistance Program into State Law

Consumers need an independent source of help when they have problems with their health insurance. This bill would codify the independent consumer assistance program

created by the Affordable Care Act into State law.

A4071/S870: Increase Consumers on the Public Health and Planning Council

The Public Health and Planning Council makes decisions that affect the cost and availability of care without providing enough opportunities for consumers to weigh in. This bill would add more members to represent the consumer perspective.

A1148/S1856: Require Community Advisory Boards at All Hospitals

Voluntary non-profit hospitals are required to have a community-service plan but they are not required to have community advisory boards. This bill would require all general hospitals to have a community advisory board to provide input as the hospitals develop their community service plans and provide ongoing insight into community needs and priorities.

HCFANY Steering Committee

Actors Fund
African Services Committee
Children's Defense Fund
Citizen Action of New York/Public Policy and Education Fund
Coalition for Asian American Children and Families
Community Service Society of New York
Consumers Union
Empire Justice Center
Make the Road New York
Medicare Rights Center
Metro New York Health Care for All
New Yorkers for Accessible Health Care Coverage/
Center for Independence of the Disabled
New York Immigration Coalition
Raising Women's Voices
Schuyler Center for Analysis and Advocacy
Young Invincibles