



Urgent Health Actions For 2021

Coverage

Half of New Yorkers say that they cannot afford medical care even with insurance and another 5 percent of New Yorkers, 1 million people, have no coverage at all.

- New York should enact the New York Health Act (S3577a/A5248a) to cover everyone.
- **RIGHT NOW: Pass S2549/A1585 to ensure that immigrants affected by COVID-19 have health insurance.** Immigrants are the largest group of uninsured New Yorkers and have been hit hard by the pandemic physically and financially. S2549/A1585 would allow income-eligible immigrants to enroll in the Essential Plan if they are barred from other coverage due to their status, for a cost of \$13 million to the state.
- New York should explore state premium subsidies for people buying individual private coverage, which is still unaffordable for many. For example, in Albany, a person earning \$35,000 would have to spend \$1,800 a year on premiums and still have a deductible of \$4,700.
- A state-level individual mandate would generate \$270 million and could help pay for these reforms and bring down costs for everyone.

Equity

Hospital building projects and closures are regulated by the state through the certificate of need process, but decisions are made without considering community need. The result is less access to care for communities with lower incomes or more people of color. For example, Queens has just 1.5 hospital beds for every 1,000 residents, while Manhattan has 6.4. **Pass S1451/A191 to add a health equity assessment to all certificate of need applications.**

Medical Debt

Almost 50,000 New Yorkers have been sued by New York's charitable hospitals in the past five years, including 4,000 people sued during the pandemic. **Pass the Patient Medical Debt Protection Act (S2521/A3470) to eliminate unfair billing and litigation practices:**

- Require hospitals to provide patients with one itemized bill that includes all services from all providers.
- Reduce the interest rate on medical debt judgements to the U.S. Treasury Rate from the current commercial 9 percent rate.
- Require all hospitals to use a modernized uniform hospital financial assistance form that is consistent with ACA rules.
- Hold patients harmless for surprise out-of-network bills resulting from plan or provider misinformation.
- Bar uninsured patients from being charged for facility fees.
- Standardize patient financial liability waiver forms.
- Bar hospitals from using contracts to stop insurance carriers from reporting cost data to the state.

Consumer Assistance

New Yorkers need consumer assistance programs to help them enroll in coverage and use our complex health care system.

- Navigators have helped over 300,000 New Yorkers enroll since 2013 without ever receiving a cost-of-living increase. New York should **increase Navigator funding from \$27.2 million to \$32 million to maintain service levels and create a \$5 million grant program to fund community-based organizations to conduct outreach in communities with high rates of uninsured people.**
- The Community Health Advocates (CHA) program provides post-enrollment assistance and has saved New Yorkers millions of dollars. New York should **maintain funding for CHA at \$3.9 million** in 2021.
- The Community Health Access to Addiction or Mental Healthcare Project (CHAMP) provides post-enrollment assistance to people experiencing mental health or substance use emergencies. New York should **maintain CHAMP funding at \$1.5 million** in 2021.