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Public Forum on the Establishment of a Health Insurance Exchange in New York State

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Thank you for the opportunity to speak with you today regarding the important and exciting considerations associated with establishing a Health Insurance Exchange in New York State and the integral role that primary care and Federally Qualified Health Centers (FQHCs) currently play in providing a safety net for uninsured individuals and families.

My name is Edwin T. Graham and I am the Vice President of Policy for the Community Health Care Association of New York State (CHCANYS), the State's association of community, migrant and homeless health centers.

Today, community, migrant and homeless FQHCs provide high-quality, affordable and accessible primary and preventive health care for more than 1.4 million New Yorkers at over 470 sites in urban, rural and suburban communities. Our community health centers provide comprehensive primary care including: family medicine; pediatrics; obstetrics and gynecology; dental; laboratory; mental health; substance abuse and pharmacy services. Over 90% of New York's FQHCs utilize electronic health records (EHR). Further, more than 30% of these FQHCs are NCQA designated Patient Centered Medical Homes (PCMH), with the remainder in process of being certified. Thus, FQHCs are a critical element of New York's primary care system.

In the aggregate, New York State's FQHCs are among the largest organized provider systems of primary care for uninsured individuals and those insured by government programs, including Medicaid. Statewide, 28% of the patients seen in FQHCs are uninsured. At some community health centers, the uninsured population exceeds 50% and at a small number of centers, in excess of 70% of patients are uninsured. Clearly, FQHCs are the main health care safety net for New York's uninsured.

Health Insurance Exchanges provide the structure and tremendous opportunity for uninsured individuals who are not receiving primary care to obtain coverage, receive quality care and realize improved health outcomes at a reduced cost. Savings to the health care delivery system arise, at a minimum, from reduced ER utilization, reduced

hospitalizations, and from better, more coordinated pharmaceutical management and overall care management.

In recognition of the important role that FQHCs play, the federal legislation requires all FQHCs in applicable regions to be included as the safety net providers in any Health Insurance Exchange. This clearly makes sense. This federal requirement relating to the adequacy of provider networks takes into consideration the important role of FQHCs in each of the communities served.

We recognize that real progress toward our goal of greater access to high-quality, affordable primary care for all New Yorkers will only be accomplished through the thoughtful implementation of reforms such as the Health Insurance Exchange. As New York State's Primary Care Association, CHCANYS is pleased to support and lead the Health Insurance Exchange effort together with our partners throughout the health care delivery system.

In closing, primary care and FQHCs are a reform cornerstone for improving the health of New Yorkers. Consistent with current practices and federal legislation, it is important that:

- **all provider networks available through New York State's Health Insurance Exchange insurers include FQHCs.**
- **to ensure that consumers have local access to information regarding Health Insurance Exchange plan options and related resources.**

Patients of all payer types who received their primary care at FQHCs stay healthy – FQHCs prevent unnecessary hospitalizations, reduce ER visits and avoid the use of other high-cost care. Moreover, the importance of health centers to their communities never wanes and, in fact, only increases in difficult economic times such as these.

CHCANYS proudly serves as the voice for New York State's primary care safety net and Federally Qualified Health Centers. We stand ready to work in partnership with other sectors of our complex health care delivery system to do a better job of coordinating care and meeting the needs of New Yorkers while reducing and containing health care costs.

I thank you for the opportunity to share our perspective with you today.

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