

Economic Crisis Coverage

2009-2010 HCFANY Legislative Agenda

In these difficult economic times, more New Yorkers than ever will need affordable health care for all. After 9/11, the federal government and New York State joined forces to offer “Disaster Relief Medicaid” for hundreds of thousands of affected New Yorkers. A similar program is needed for today’s crisis. We are on the verge of the biggest economic downturn since 9/11. Displaced workers will have no jobs and no coverage. *There is no “bail out” for them.*



50% of uninsured adults in New York work a full-time job but do not get health insurance from their employer.

Economic Crisis Coverage would help state and local government to effectively help New Yorkers in need by radically streamlining the eligibility and retention process for public insurance programs. Government may then focus its precious resources on providing job- and other economic supports for the needy and displaced. In addition, Federal matching funds can also help ease the State’s fiscal burden.

Governor Paterson should call a special session or pass an early budget that guarantees health coverage for New Yorkers who need it. By implementing the following program:

✓ **Institute EZ pass eligibility for public insurance**

- **Eliminate face-to-face applications**

New York is one of a few states that still require “face-to-face” interviews, which is costly for local districts and poses a barrier to enrollment for New Yorkers who need coverage. New York should fast-track accepting applications by mail, fax, or telephone.

- **Eliminate the asset test for adults**

The asset test for adults is administratively cumbersome and rarely disqualifies people for

coverage. New York should join the 21 other states who have eliminated this condition of eligibility. This will not apply to long term care.

- **Eliminate finger-imaging**

People who need health care are not criminals. New York State should immediately drop its “finger-printing” requirement for adult Medicaid applications.

- **Eliminate documentation of income and residency at application**

Requiring applicants to provide documentation proof is just another bureaucratic obstacle to enrollment. The State should extend self-attestation at application as they have already done at renewal.

- **Institute paperless applications through new State Enrollment Center**

The State should use the new “Enrollment Center” to efficiently process applications for health coverage for displaced workers over the phone and internet.

✓ **Suspend renewal applications for people already covered by public insurance**

Right now there are no new jobs out there. People who have proven their eligibility should remain eligible for

two years to save precious resources at the State and local level for newly displaced workers.

✓ **Request federal financial support**

Federal matching funds (FMAP) should be requested for all federally-funded, or “matched,” public insurance programs. The Governor should urge the federal government to immediately adopt the State’s pending request to guarantee continuous health coverage to approved adult beneficiaries for 12 months.

✓ **Extend COBRA coverage to 36 months**

The current 18 month COBRA health coverage protection for termination of employment or reduction of hours should be doubled. Like California’s Cal-COBRA program, this would give displaced workers and their families more time under their existing health coverage while new coverage is secured.

“I was an administrative assistant earning \$45,000 a year [before being laid-off]. I could not afford to buy COBRA...I had to stop purchasing my medicine for glaucoma and going to the doctor.”

- Sandra, a newly uninsured woman from the Bronx.

Moving Towards Health Care for All

The Health Care For All New York Campaign believes that New York must begin laying the groundwork for extending affordable quality health care for all New Yorkers even before the State finalizes its strategy. The State Departments of Health and Insurance should take immediate steps to develop a legislative framework for those components which we believe will be part of any State reform proposal.

✓Expand Family Health Plus to 200% of the federal poverty level (FPL)

HCFANY urges the expansion of Family Health Plus up to 200% of net FPL (roughly 230% gross) for singles, childless couples, and parents.

Currently, only pregnant women are eligible for coverage at this 200% of FPL. This would permit New York to align all adults with the statewide Prenatal Care Assistance Program (PCAP) level and have two income eligibility rates: one for adults and one for children.

✓Convert HealthyNY individuals/sole proprietors into Family Health Plus buy-in up to 250% of FPL

The State should convert individuals from high-cost HealthyNY plans to free Family Health Plus coverage for those up to 230% gross FPL and allow people between 230-250% gross FPL to buy-in to the Family Health Plus program.

This proposal will be budget neutral, because Family Health Plus premiums are cheaper, receive federal matching funds, and the balance could be funded by the current HealthyNY “stop loss” or reinsurance pool for individuals/sole proprietors.

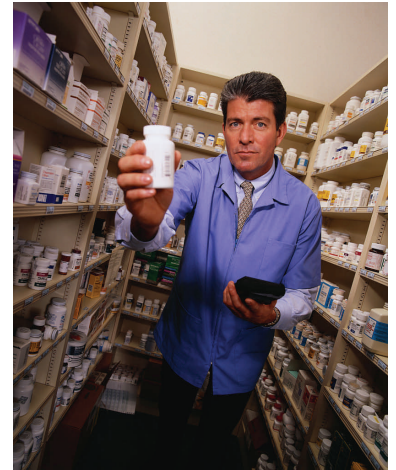
✓EPIC expansion

HCFANY urges the State to open up the EPIC program to individuals under age 65 who are deemed disabled by the Social Security administration. This will allow them to receive the same gap-filling prescription coverage as seniors dependent on Medicare.

This EPIC expansion would cost \$10 million in the first year, up to \$100 million when fully implemented (roughly year five—State says it could be \$200 million).

✓Reduce racial disparities in health care coverage and outcomes

HCFANY will be working hard this year to ensure that the State Departments of Health and Insurance include key measures that help reduce racial disparities in access to care and in health outcomes.



25% of New Yorkers did not fill a needed prescription or skipped doses due to a lack of money or insurance.

Be part of the solution!
Join Health Care For All New York by going to:
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