

NEW YORK STATE HEALTH EQUITY & JUSTICE AGENDA FOR FISCAL YEAR 2022

Callen-Lorde is the global leader in LGBTQ healthcare. For more than 50 years, we have been transforming lives in LGBTQ communities through excellent comprehensive care, provided free of judgement and regardless of ability to pay. Callen-Lorde believes healthcare is a human right, and comprehensive, quality healthcare should be available to all.

In 2020 we faced an historic year with the global COVID-19 pandemic devastating our communities and stretching the scarce resources of our community health centers. And, we are in the midst of a national reckoning on racial justice on top of a divisive national political backdrop. Callen-Lorde's state budget and policy recommendations this year reflect the collective vision to recover and rebuild in New York State as well as a call for our state leaders to:

- Commit to racial equity in healthcare and public health
- Save and invest in our healthcare safety net
- Protect our communities from violence, over policing and discrimination
- Promote sexual health

BUDGET & POLICY PRIORITIES FY22



Reject Executive Budget Proposal and Reverse the Medicaid Carve Out

The state's plan to transition the Medicaid pharmacy benefit from Managed Carve to Fee-for-Service will eliminate the mechanism that enables safety net providers – like Callen-Lorde – to receive revenue generated by the federal drug discount program known as 340B.

340B resources are critical to achieving public health goals and are key to addressing health inequities based on race, poverty and marginalization. While the Department of Health has stated the carve-out will achieve \$87M in State savings in FY22, it will likely result in an approximately \$245M annual loss to the most vulnerable healthcare providers in the State: FQHCs, alone, stand to lose a collective \$100M per year. A survey of just 15 FQHCs and Ryan White clinics that provide HIV prevention and care found they would lose at least \$56M annually, and a small subset of hospitals reported that they would lose an additional \$87M in the first year.

Governor Cuomo's FY22 Executive Budget proposes a reinvestment funding pool in which the Department of Health will 'reinvest a portion of the savings from the Medicaid pharmacy carve-out – **\$102M** – directly to 340B providers, excluding hospitals, to offset 340B revenue losses in Managed Care and maintain critical services in the community'. The budget language does not outline a methodology to allocate these funds and it is not clear whether all 340B-covered entities would be covered with this funding. Reject this proposal and reverse – or at least delay – the carve-out.

Support [Gottfried A1671/ Rivera S2520A]

This bill will delay the pharmacy carve-out for 340B-covered entities and HIV Special Needs Plans.

For more information, please contact Kimberleigh Smith, Senior Director for Community Health Planning and Policy at ksmith@callen-lorde.org or 212-271-7184.

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Repeal Loitering for the Purposes of Prostitution [Paulin A3355/Hoylman S1351]

This state legislation would repeal N.Y. Penal Law § 240.37 (“Loitering for the purpose of engaging in a prostitution offense”). In addition, Callen-Lorde supports the full legislative platform for Decrim NY, including **A459/S4674**, state legislation that would vacate prior convictions for offenses resulting from sex trafficking, labor trafficking, and compelling prostitution and **A849/**, state legislation that would repeal decriminalize prostitution and certain prostitution-related offenses, and vacate prior convictions for offenses resulting from sex trafficking, labor trafficking and compelling prostitution.



Require Comprehensive Sexual Health Education in New York Public and Charter Schools [S2584 Brouk]

Many public-school districts across New York provide sex education that is inaccurate, incomplete, or biased – and some schools provide none. This legislation would require public schools to teach medically-accurate and inclusive K-12 comprehensive sex education that is age-appropriate and reflects national standards and best practices. Comprehensive sex education supports young people to make healthy decisions and have healthy relationships and is critical to the well-being and educational outcomes of young people.



Pass the New York Health Act

Over 1 million New Yorkers are currently uninsured and millions more are underinsured. At Callen-Lorde nearly one-third of our 18,000 patients are uninsured. The New York Health Act would implement a universal, single-payer health care plan that will cover all New Yorkers and eliminate co-pays, deductibles, and sky-rocketing premiums and include long-term care.



Require Reimbursement Parity for Telehealth [A.669 Rosenthal]

This bill allows for reimbursement parity for health care providers for telehealth, telephonic and in-person visits.



Require Medical Professionals to be trained in Sexual Health & LGBTQ Competency [A10380 Rosenthal]

This bill would establish requirements that medical professionals be trained on sexuality, gender identity, and other elements of sexual health.



Reject proposal to repeal prescriber prevails

Callen-Lorde opposes the Governor’s proposal to eliminate a prescriber’s right to make a final determination regarding the dispensing of prescription drugs in Medicaid. As an organization of front-line HIV and primary care providers, we support the ability of providers to determine the best course of treatment for their patients. On April 1, when the drug carve-out begins, the repeal will apply to all outpatient drugs and all drug classes.



Sustain Implementation of the Plan to End AIDS

Callen-Lorde has been caring for people living with HIV and AIDS since the beginning of the epidemic. Today we are the largest non-hospital-based HIV primary care center in New York and nearly a quarter of our patients are living with HIV. In 2014, Governor Cuomo announced a three-point plan to end AIDS as an epidemic in New York State by the end of 2020. Data from 2019 shows that NYS has achieved this historic milestone and has “bent the curve” one year ahead of schedule, with estimated new HIV infections falling below deaths among persons with diagnosed HIV for the first time. We must be cautious in celebrating too quickly. The COVID-19 pandemic may stall our progress. Finally, our focus must shift to address disparities to ensure these gains are realized equitably by all populations.