

**2018 NYSAC Legislative Conference
Standing Committee on Public Health and Mental Health
Resolution #2**

Resolution Supporting an End to Administrative Funding Cuts, an Increase in the Base Grant, Per Capita Rate, and State Aid Formula that Constitute Article 6 State Aid Reimbursement for Mandated General Public Health Work Undertaken by Local Health Departments as Population Health Partners of New York State

WHEREAS, the prevention and population health activities of county health departments and New York City are essential to the overall health of the state's residents and communities, and crucial to the success of the state's Medicaid Redesign Team efforts; and

WHEREAS, unhealthy community environments lead to incidents such as the discovery of PFOA in drinking water supplies in Rensselaer County and other areas of the state, which has presented significant disease risks to the residents of these communities; and

WHEREAS, New Yorkers can be, and have been, exposed to deadly communicable diseases such as Ebola, the harmful Zika virus, and other communicable diseases that may arrive from other nations via global travelers at any time; and

WHEREAS, stable and timely funding to support core public health services delivered by local health departments under Article 6 of the Public Health Law is necessary for the protection of all communities within New York State; and

WHEREAS, Article 6 of the Public Health Law currently provides a base grant of either a set amount or a per capita rate of local health department (LHD) expenditures on core public health services, and then State reimbursement for 36% of LHD costs beyond the base grant; and

WHEREAS, the state has reduced its annual appropriations for Article 6 Public Health spending by 40% over the last several years; and

WHEREAS, New York State does not allow local government to recover any of its necessary expenditures on fringe benefits for local health department personnel who provide core public health services mandated under Article 6; and

WHEREAS, in state fiscal year 2011-12, the State eliminated the allowance of state aid for so-called “optional services” by local health departments, such as early intervention administration, medical examiners, dental health services, some environmental health activities, certified home health agencies, and more; and

WHEREAS, the reduction and potential elimination of the revenue offset and other administrative actions leads to a reduction in the generation of fee and penalty revenue that, in turn, increases the need for local budget cuts, including staff reductions that compromise the capacity of local governments to ensure the provision of the core services necessary to protect the public’s health; and

WHEREAS, New York State Department of Health (DOH) has frequently applied changing and inconsistent standards in what it allows as state aid claims; and

WHEREAS, state agency administrative reductions to Article 6 State Aid reimbursement have a negative impact on the ability of local health departments to protect the public, including:

- enforcing regulations intended to reduce the incidence and risk of Legionnaire’s Disease;
- eliminating the HIV/AIDS epidemic;
- preventing and controlling the spread of communicable diseases;
- responding to the current heroin and opioid epidemic;
- ensuring the safety of the food we eat, the water we drink, and the air we breathe;
- ensuring the safety of New Yorkers in camps, beaches, and other recreational venues;
- preventing major causes of death and chronic disease such as heart disease, diabetes, asthma and cancer;
- monitoring and control of insect-borne diseases such as Lyme Disease, West Nile Virus, EEE and Zika;
- monitoring and responding to international health threats and emergencies, among other public health needs; and

WHEREAS, local health departments deserve respect for their dedication to public health and their expertise in population health; and

WHEREAS, local health departments require adequate state funding as key partners of the New York State Department of Health in population health efforts to achieve statewide goals set in the New York State Prevention Agenda; and

WHEREAS, the current limits on base grants and state aid, combined with increasing administrative cuts and disallowances, are creating a cascading negative fiscal impact on local health departments and eroding their local public health infrastructure; and

WHEREAS, New York State has imposed a cap on property taxes that further restricts the ability of local government to fund core public health services; and

WHEREAS, more than 50 of the State's 58 local Health Departments bear responsibility for ensuring access to Early Intervention (EI) services; and

WHEREAS, the State's NYEIS system and state fiscal agency takeover have been plagued with problems resulting in increased administration costs and lower reimbursements for counties; and

WHEREAS, this additional fiscal burden for EI has a negative impact on counties' ability to provide funding for core public health services.

NOW, THEREFORE, BE IT RESOLVED, that the New York State Association of Counties (NYSAC) calls on the Governor to reject the proposed funding pools and restore the proposed 20% reduction in funds and compensate, within the 2018-19 Executive Budget and subsequent budget years, for significant state funding cuts to local health departments since 2010 by taking the following steps in the Article 6 State Aid for General Public Health Work base grants and reimbursement rates:

1. Instruct the Division of Budget and NYSDOH to end administrative actions that will result in further erosion of state aid to local health departments;
2. Increase the base grants that ensure more of the public health services are eligible for 100 percent reimbursement of local expenditures: a) Increase the base grant to Full Service LHDs (i.e. those with environmental health units) from \$650,000 to \$750,000; b) Increase the base grant to Partial Service LHDs (i.e. those with environmental health units) from \$500,000 to \$550,000; c) Increase the per capita rate for the largest counties from 65 cents per resident to \$1.30.
3. Increase the beyond-base-grant state aid reimbursement rate from 36% to 38%.
4. Provide 100% reimbursement for the first full year of any new and/or significantly expanded mandates emerging from law, rule or regulation; and

BE IT FURTHER RESOLVED, that copies of this resolution shall be sent to member counties for their consideration; and

BE IT FURTHER RESOLVED, NYSAC shall forward copies of this resolution to Governor Andrew M. Cuomo, the New York State Legislature, the New York State Department of Health, and all those deemed necessary and proper.