



Suburban hospitals are stressed operationally and financially as we enter the third year of the pandemic. The ranks of the healthcare workforce have been depleted by retirements and burnout. The strain of managing multiple surges of the virus in 2021 was compounded by the critical public health role that hospitals and health systems undertook - providing the boots on the ground for the state’s mass vaccination and testing efforts, while simultaneously treating record numbers of patients with COVID and other urgent needs.

We welcome the significant investments in the healthcare system, particularly in workforce development, that Governor Hochul proposed in the Executive Budget. However, healthcare institutions are badly in need of additional investments after more than a decade of flat reimbursement rates paired with explosive growth in the Medicaid program. Like patients whose health conditions worsened during the pandemic because they put off seeking treatment, hospitals are suffering the consequences of deferred care.

**Medicaid math doesn’t work**

Medicaid enrollment growth, 2011 - 2021	<b>61.4%</b>
Percentage of the cost of providing care reimbursed by Medicaid, on average	<b>67%</b>
Hospital employees’ growth in wages, 2011-2021	<b>30.2%</b>
<b>Increase in Medicaid rates, 2011 - 2021</b>	<b>0%</b>

**Invest in the healthcare workforce by investing in Medicaid**

The COVID-19 pandemic exposed how fragile our healthcare system is. The Legislature has a rare opportunity to change this trajectory. We urge you to:

- ✓ **Use federal healthcare funding for healthcare investments, not the Rainy Day Fund.**
- ✓ **Restore the 1.5 percent Medicaid cut from 2020.**
- ✓ **Provide a Medicaid increase on par with inflation and restore the annual Medicaid trend factor going forward.**
- ✓ **Maintain support for distressed and safety net providers.**
- ✓ **Reform the Medicaid global cap to reflect current enrollment and projected demographic and enrollment changes.**

Every year since 2008, state budgets have eliminated the annual Medicaid adjustment that was designed to keep reimbursement rates in line with inflation. **Hospitals are getting paid less to treat Medicaid patients than they were 14 years ago.**

Medicaid enrollment has grown by more than 60% in the past decade and now covers more than a third of the state’s residents, but only reimburses hospitals at, on average, 67% of the cost of providing care. As they face a tight labor market with high retirement rates expected, nonprofit hospitals will have little or no operating margins to invest in their workforce. We support and appreciate the proposed \$3,000 bonus for frontline workers, but these heroes need more than a shot in the arm - they need sustained investment in New York’s healthcare system.

**Close coverage gaps**

New York has been among the most successful states in the country at providing access to health insurance -- approximately 95 percent of New Yorkers have health coverage. The Suburban Hospital Alliance firmly supports access to affordable coverage for all.

Our focus now should be on ensuring that the remaining 5 percent of the population has access to affordable coverage. We support the following measures to close the coverage gap:

- ✓ **Expand eligibility for the Essential Plan up to 250% of FPL and cover individuals with chronic conditions**
- ✓ **Waive Child Health Plus monthly premiums**
- ✓ **Expand Medicaid coverage to one year postpartum**
- ✓ **Provide a coverage option for undocumented residents.**



## Address today’s urgent workforce needs and prepare the workforce of the future

The Suburban Hospital Alliance appreciates the comprehensive, multiyear workforce investments proposed in the Executive Budget, and is pleased to see the governor’s support for making permanent many of the workforce waivers that have been in place during the health emergency. After nearly two years, hospitals have demonstrated that they can operate safely and effectively with these flexibilities in place.

- ✓ **Healthcare worker bonuses**
- ✓ **Increase training capacity**
- ✓ **Incentivize students to go into high-need professions**
- ✓ **Nurse and physician loan forgiveness for practice in underserved areas**
- ✓ **Join interstate compacts and establish provisional licensure for out-of-state clinicians**
- ✓ **Expand scope of practice**
- ✓ **Modernize EMS**

### Bonuses for healthcare heroes

Suburban hospitals applaud the governor’s commitment to rewarding frontline healthcare workers with a \$3,000 retention bonus, which recognizes both the extraordinary sacrifices these individuals have made over the past two years but also encourages them to stay on the job at a time when the health sector faces acute workforce shortages.

We urge the Legislature to:

- Ensure the cap on eligibility is sufficient to cover all frontline workers. Salaries in the suburban regions are higher than in other parts of the state given the higher cost of living.
- Provide maximum flexibility in the definition of frontline workers. Every member of a hospital team makes a contribution to the care of patients, regardless of whether or not they work at the bedside.

### Scope of practice

We support the scope of practice expansions included in the Executive Budget, including those that would:

- Allow pharmacists to order and administer certain tests and direct limited services laboratories
- Allow experienced nurse practitioners to operate independently
- Expand professionals who are allowed to collect a patient specimen for COVID-19 or flu testing
- Authorize physicians and nurse practitioners to issue non-patient specific orders for COVID-19, flu or RSV testing, vaccines and specimen collection
- Establish a universal model for training long-term care aides to work across caregiver roles and settings.
- Allow emergency medical technicians to provide services within their scope of practice in any setting, and provide flexibility for new models of EMS care.

We also urge the Legislature to give permanent authorization to nurses to initiate EKGs, blood glucose tests, laboratory tests, intravenous lines and pre-procedure pregnancy testing, where clinically indicated.

### Recruiting clinicians to New York

Pandemic waivers have allowed clinicians licensed in other states to work in New York, but the usefulness of these provisions has been limited by the 30-day term of executive orders. Healthcare institutions need the flexibility to bring medical professionals to New York quickly to address the current staffing crisis, for future emergencies and in areas with persistent staffing shortages. Our state also needs a more expeditious process to be competitive in the recruitment of out-of-state talent. For these reasons, the Suburban Hospital Alliance supports the following proposals:

- Join the Interstate Medical Licensure Compact
- Join the Interstate Nurse Licensure Compact
- Establish temporary practice permits for professionals in high-need specialties who are licensed in good standing in another state

### Grow the healthcare workforce

The workforce shortage is not just a pandemic problem, it’s a long-term crisis. We support proposals in the Executive Budget to increase the corps of healthcare workers by 20 percent, including:

- ✓ **Establish a Nurses Across NY program and expand the Doctors Across NY initiative.**
- ✓ **Provide financial support to students who commit to high-demand professions**
- ✓ **Establish a Workforce Innovation Center in DOH to facilitate new education and training models.**