

**NYS 2019-20 Joint Legislative Budget Hearing on Health/Medicaid
Housing Works Testimony**

February 5, 2018

Thank you for the opportunity to present testimony to the Joint Budget Hearing on Health and Medicaid. My name is Charles King, and I am the President and CEO of Housing Works, a healing community of people living with and affected by HIV/AIDS. Founded in 1990, we are the largest community-based HIV service organization in the United States, and provide a range of integrated services for low-income New Yorkers with HIV/AIDS – from housing, to medical and behavioral care, to job training. Our mission is to end the dual crises of homelessness and AIDS through relentless advocacy, the provision of life saving services, and entrepreneurial businesses that sustain our efforts.

Housing Works is part of the End AIDS NY 2020 Community Coalition, a group of over 90 health care centers, hospitals, and community-based organizations across the State. I was proud to serve as the Community Co-Chair of the State's ETE Task Force, and Housing Works is fully committed to realizing the goals of our historic New York State plan to end our HIV/AIDS epidemic by the year 2020. And am also a proud member of the New York State Hepatitis C Elimination Task Force.

I am testifying here before you today because I believe that 2019 will be a historic year of legislative achievements for the NYS Senate and Assembly, but I would like warn the Legislature that you must bring the same energy and ambition to addressing the State's longstanding health crises.

Governor Cuomo's Executive Budget does not rise to this historic moment, and while the Governor has advanced some unique and groundbreaking initiatives, such as ending the HIV/AIDS epidemic and hepatitis C elimination, health care proposals in the Executive Budget fall tragically and dangerously short. We urge the Governor to make the following urgent changes to the health care proposals in the 30-day amendments to the Executive budget, and we call on the Legislature to rise to this historic occasion if he fails to do so.

First, I must give credit where credit is due. Housing Works and the End AIDS NY Community Coalition strongly support the Ending the Epidemic health systems investment included in Governor Cuomo's fiscal year 2019-20 Executive Budget, and urge the Senate and Assembly to support this initiative in the one-house budgets.

For the past 30 years, New York has been the epicenter of the national HIV/AIDS epidemic, with many tens of thousands of deaths due to this epidemic, and now thanks to the Ending the Epidemic plan we have now seen three consecutive years of record-breaking progress toward ending our epidemic. Preliminary New York State Department of Health (NYS DOH) 2017 HIV surveillance data also show record-breaking progress toward achieving our ETE goals. Unfortunately, however, the data also show that our progress is largely driven by NYC outcomes, while the rest of the State lags behind. While the number of new HIV diagnoses in NYC decreased by 5.4% between 2016 and 2017, new diagnoses in Upstate NY and on Long Island appear to have actually increased, bringing the Statewide decrease in new HIV diagnoses to just 4% between 2017 and 2016.¹ We believe that the critical difference between NYC and the rest of the State is access to critical housing supports.

As my testimony in front of yesterday's Joint Legislative Budget Hearing on Housing explains in further detail, Housing Works and the End AIDS New York Community Coalition are extremely pleased that Governor Cuomo's 2020 Executive Budget includes \$5 million in funding to enable local departments of

¹ *State and City ETE Updates*, presented by Johanne Morne, NYS DOH AIDS Institute, and Demetre C. Daskalakis, NYC DOHMH, at the 2018 EtE Summit, Albany, NY, December 2018.

social services across the State to partner with managed care organizations (or other entities that invest to improve HIV health outcomes) and community-based organizations, to pilot innovative strategies to provide access to rental subsidies in line with local fair market rents and the 30% rent cap protection. This NYS funding would leverage matching dollars from local partners, for a total \$10 million HIV housing investment that would build upon the existing HIV Enhanced Shelter Allowance to provide meaningful housing supports for low-income people living with HIV in participating local districts Upstate and on Long Island. As many as 4,200 low-income households living with HIV remain homeless or unstably housed in upstate NY and on Long Island because local social service districts do not approve HIV rental assistance at meaningful levels and the 30% rent cap is limited to NYC. These unstably housed persons with HIV not only experience worse health outcomes but are far more likely to require costly inpatient and emergency room care. Ample evidence shows that dollars spent on HIV housing not only improve individual and community health but also generate Medicaid savings from avoided emergency and inpatient care that more than offset the cost of housing.² It is time to invest public dollars wisely, in housing as HIV health care.

We urge the Legislature to support this \$5 million pilot by including the initiative language in your one-house budget bills along with Article VII language to implement the appropriation. We believe that this investment will support sufficient housing subsidies to finally afford equal access to safe, stable housing for households living with HIV in every part of NYS.

Housing Works also asks the Legislature to build on Governor Cuomo's \$5 million initial investment in the Executive budget toward eliminating the State's hepatitis C (HCV) epidemic by expanding hepatitis C testing, linkage, treatment and prevention programs statewide. More than 230,000 New Yorkers, are living with chronic hepatitis C infection, and 50% are unaware of their status.ⁱ In 2016, an alarming 14,745 new HCV cases were reported in the State,ⁱⁱ with 56% of newly reported cases diagnosed outside of NYC.ⁱⁱⁱ In 2015, an estimated 979 New Yorkers died from HCV related causes.^{iv} With highly effective new treatments that can cure HCV in eight to twelve weeks, and proven harm reduction strategies to prevent transmission, NYS has the tools to control and eventually eliminate HCV. We strongly urge the Senate and Assembly to include an additional \$10 million investment in the State's hepatitis C response in the Senate and Assembly one-house budget bills.

But while the Executive Budget health proposals are visionary and praiseworthy in some areas, they must be challenged in others. The proposed \$27 million cut to New York City health care through reducing the rate of the Article 6 State match for health care funds by 16% is a ruthless and unacceptable proposal that would severely damage health services in NYC and put lives at risk. We call on the Governor to immediately reverse these cuts in his 30-day amendments, and we call on the Legislature to take action if the Governor insists on advancing these catastrophic and inhumane cuts to NYC health programs.

We call on the Governor and Legislature to include funding the enacted budget to offset Federal cuts to New York STI and TB funding to maintain and strengthen the State's STI and TB response.

We also urge the Governor and Legislature reverse the proposed \$5 million cut to the Medicaid Health Home program, which will cut life-saving services and care coordination to the highest-need New Yorkers with chronic health conditions, including HIV/AIDS, serious mental illness, and substance use disorders. This cannot stand. The Health Home program was already greatly reduced in last year's budget and cannot sustain further cuts. The Executive Budget proposal will "disincentivize intense care management over an extended period" when there are cases when this additional care management is necessary for individuals in the program.

² Basu, et al. (2012). Comparative Cost Analysis of Housing and Case Management Program for Chronically Ill Homeless Adults Compared to Usual Care. *Health Services Research*, 47(1 Pt 2): 523-543.

Furthermore, the Executive budget's proposal to establish a universal health care access commission with report due a year from now kicks the can down the road when hundreds of thousands of New Yorkers go without insurance. Housing Works urges the Legislature to take immediate action in the one-house budget bills to establish a state-funded Essential Plan to expand coverage to all immigrants in New York State who earn less than 200 percent of the federal poverty level. Based on an analysis by Community Service Society, total expected enrollment would be 111,100, including 27,400 people who currently have Emergency Medicaid and 83,700 people who are currently uninsured. This proposal could be partially financed with revenue from an individual mandate fee and we have identified other potential sources of revenue to finance this proposal. To live up to this moment in history, the Legislature must act to immediately expand coverage all immigrants in New York while also advancing the transition to a single payer system.

Finally, the Executive Budget does far too little to address the overdose crisis, which has taken the lives of 20,059 New Yorkers since Governor Cuomo's first year in office (and that horrifying death count from the Center for Disease Control does not include the year 2018). The Governor has failed to lead by not using his authority to authorize an Overdose Prevention Center Pilot, even though he made a promise to community members to do so last year while thousands more New Yorkers died of overdose. So we urge the Legislature to lead a unified, statewide and public health focused effort to combat the State's opioid epidemic, starting with piloting five Overdose Prevention Centers across the state in partnership with existing Syringe Exchange Program sites. The State must also create new syringe exchange program sites and harm reduction programs in underserved neighborhoods and counties, expand Health Hubs, drug treatment in State prisons and jails, and overdose prevention services statewide. We urge the Senate and Assembly to include the Overdose Prevention Center pilot in this year's one-house budget bills. We need your leadership to create an evidence-based, comprehensive public-health approach to addressing the overdose crisis.

Housing Works asks for the Legislature to be bold when it comes to addressing the State's public health crises. Our progress against the State's AIDS epidemic shows us what can be achieved by implementing evidence-based policies. Together, we can not only push the AIDS epidemic beyond the tipping point and secure our State's place as the first jurisdiction in the nation and the world to end its HIV/AIDS epidemic, but we can also eliminate hepatitis C, end overdose deaths, and expand health coverage to all New Yorkers. These are not dreams, they are future realities if you act now.

Thank you for your time.

Sincerely,

Charles King

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ⁱ Hart-Malloy, R, Carrascal, A, DiRienzo, AG, Flanigan, C, et al. (August 2013). Estimating HCV Prevalence at the State Level: A Call to Increase and Strengthen Current Surveillance Systems. *American Journal of Public Health*, Vol. 103, No. 8.

ⁱⁱ NYS DOH. Communicable Disease Electronic Surveillance System as of August 2017 and NYC DOHMH, Bureau of Communicable Disease, Viral Hepatitis Program. Data as of May 2017.

ⁱⁱⁱ NYS DOH. Communicable Disease Electronic Surveillance System as of August 2017

^{iv} CDC, National Center for Health Statistics. Multiple Cause of Death files. Accessed at <http://wonder.cdc.gov/mcd-icd10.html> on Feb 15, 2017.