

**NASSAU-SUFFOLK
HOSPITAL
COUNCIL, INC.**

1383 Veterans Memorial
Highway, Suite 26
Hauppauge, NY 11788
Phone 631-435-3000
Fax 631-435-2343
www.nshc.org

MEMBER HOSPITALS

**Brookhaven Memorial
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**Catholic Health Services
of Long Island**

- **Good Samaritan
Hospital Medical Center**
West Islip
- **St. Catherine of Siena
Medical Center**
Smithtown
- **St. Charles Hospital**
Port Jefferson
- **St. Francis Hospital**
Roslyn
- **St. Joseph Hospital**
Bethpage
- **Mercy Medical Center**
Rockville Centre

East End Health Alliance

- **Eastern Long Island
Hospital**
Greenport
- **Peconic Bay
Medical Center**
Riverhead
- **Southampton Hospital**
Southampton

Long Beach Medical Center
Long Beach

**John T. Mather
Memorial Hospital**
Port Jefferson

**Nassau University
Medical Center**
East Meadow

North Shore-Long Island

- **Jewish Health System**
- **Glen Cove Hospital**
- **North Shore
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- **Plainview Hospital**
- **Syosset Hospital**
- **Franklin Hospital**
- **Huntington Hospital**
- **Southside Hospital**

**Stony Brook
University Hospital**
Stony Brook

**Veterans Affairs
Medical Center**
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**Winthrop South Nassau
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- **South Nassau
Communities Hospital**
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- **Winthrop-University
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**Nassau-Suffolk
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Medicaid Cuts Advance Under State's Contingency Plan

The enhanced FMAP funds Congress allotted New York State in August do not prevent the state from moving forward with its FMAP contingency plan for Medicaid cuts. The contingency plan became part of the final language for the fiscal year 2010 – 2011 state budget that legislators passed in August and it authorized the state to enact Medicaid cuts beginning September 16, 2010, as a way to close New York's \$1.085 billion budget gap in the event the FMAP money did not come through. To stop the cuts, the legislature must forward legislation to repeal the contingency plan law.

A bill to repeal the law has been introduced in the Senate, but there has not been any action in the Assembly. Technically, the enhanced FMAP money - a total of \$1.4 billion - closes the budget gap, eliminating the need for the FMAP contingency plan. The state and regional hospital associations are contemplating legal action, if the legislature does not engage this issue and repeal the contingency plan in its entirety.

In the absence of repeal legislation, payment reductions of 1.1 percent took effect September 16, 2010 and continue through March 31, 2011, the end of the state fiscal year. However, states usually wait for federal approval from the Centers for Medicare and Medicaid Services (CMS) before enacting such cuts. That approval is uncertain at this time.

"These cuts are yet another assault on hospitals," said Kevin Dahill, president/CEO of the Nassau-Suffolk Hospital Council (NSHC), the association that represents Long Island's hospitals. "This region's hospitals have absorbed Medicaid reimbursement cuts and additional taxes in seven budget actions since April

2008. The cumulative loss exceeds \$166 million. Statewide, that figure swells to more than \$5 billion in cuts and taxes to health care providers."

"Long Islanders need to know that every cut or tax translates into lost jobs and reduced access to health care services," said Dahill.

To avoid further cuts and taxes, Long Islanders can contact their state representatives and urge them to develop legislation that will repeal the contingency plan cuts. Helpyourhospital.org is an easy-to-use, zip code driven website that quickly connects constituents with their legislators.

Federal Reform News

Most notably, on September 23, 2010 the national health reform provision requiring coverage for young adults up to age 26 on a parent's plan goes into effect. Some employers and their insurance carriers have already implemented this change. This is one mechanism for reducing the number of uninsured Americans – the legislation's primary goal. New York's Pre-existing Condition Insurance Plan, administered by GHI and known as the NY Bridge Plan, starts covering uninsured New Yorkers who have a pre-existing medical condition on October 1, 2010. The plan will provide affordable coverage until January 1, 2014, when insurance exchanges take over.