

State must build on its new health care reforms

By Kenneth Oakley, M.D.

Gov. Eliot L. Spitzer and the State Legislature deserve praise for passing a health care budget that makes solid strides in moving New York's long-broken system from one that waits until people get sick toward one that identifies and solves medical problems before people fall ill.

However, far more work must be done if primary and preventive care — and the lower costs, better health outcomes and reduced disparities that will result — is to become the centerpiece of New York's health care system. This budget:

- Expands eligibility in the Child Health Plus program and streamlines enrollment and recertification for Medicaid and Family Health Plus. Lack of insurance is a major barrier to primary and preventive care and leads to higher rates of expensive and unnecessary emergency room use.
- Restores \$9.8 million in transition funding for community health centers.

- Restructures the diagnostic and treatment center indigent care pools in a way that results in a more fair distribution of these funds.

All of these measures represent significant movement toward building the front end of our health care system and show a commitment unseen before in New York State government, which has allowed primary care to erode.

While we applaud these initial steps toward a more patient-centric health care delivery system, the issues of health work force shortages and development have yet to be substantively addressed. Without doing so, much of the intended transformation will be severely compromised or will not occur at all.

And there is a very long way to go to reach the recommendation of the Commission on Healthcare Facilities in the 21st Century that "All New York residents have a primary care 'home.'" To that end, we call on the state to:

- Release the \$10 million statewide capital grant program, which was passed in 2005 and funded in 2006.
- Set aside HEAL-NY grant funds, already appropriated for health

care restructuring, for the explicit purpose of expanding primary care.

- Create a task force to develop new standards of performance that will be needed to create a patient-centered primary care home.
- Expand community-based primary care recruitment initiatives.
- Set aside some of the \$1.5 billion the state will receive from the Federal- State Health Reform Partnership to assure that primary care providers have the information technology needed for preventing and managing the rapid growth of chronic illness in New York.

A major restructuring of our health-care system will take years, if not decades, to fully implement, but these steps will jump-start primary care access throughout our 62 counties.

In turn, costs will decline, health outcomes will improve and disparities will recede, as borne out by dozens of studies.

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