

## The New York City Council

## Legislation Details (With Text)

File #: Res 0138-2006

8- Version: \* Name:

Implementing the recommendations of "Separate

and Unequal: Medical Apartheid in New York City."

Type: Resolution Status: Filed

In control: Committee on Health

On agenda: 3/1/2006

Enactment date: Enactment #:

**Title:** Resolution calling upon the appropriate committee of the Council of the City of New York to hold a

hearing on implementing the recommendations of "Separate and Unequal: Medical Apartheid in New

York City," a report by Bronx Health Reach, with the goal of eliminating racial health disparities.

Sponsors: Helen D. Foster, Melissa Mark-Viverito, James Sanders, Jr., Thomas White, Jr.

Indexes:

## Attachments:

Date	Ver.	Action By	Action	Result
3/1/2006	*	City Council	Introduced by Council	
3/1/2006	*	City Council	Referred to Comm by Council	
12/31/2009	*	City Council	Filed (End of Session)	

Res. No. 138

Resolution calling upon the appropriate committee of the Council of the City of New York to hold a hearing on implementing the recommendations of "Separate and Unequal: Medical Apartheid in New York City," a report by Bronx Health Reach, with the goal of eliminating racial health disparities.

By Council Members Foster, Mark-Viverito, Sanders Jr. and White Jr.

Whereas, Bronx Health Reach, a coalition composed of 40 community and faith-based organizations dedicated to understanding and eliminating racial and ethnic disparities in health outcomes in the Southwest Bronx, issued a report on October, 17, 2005, entitled "Separate and Unequal: Medical Apartheid in New York City" (the "Report"), which made several recommendations to eliminate racial health disparities; and

Whereas, The Report found that Black and Latino New Yorkers are more than twice as likely as White New Yorkers to be uninsured, or to receive Medicaid or other public insurance; and

Whereas, The Report also found that due to a lack of quality health insurance, people of color disproportionately face more barriers to accessing high quality care, and are often sent to different healthcare

File #: Res 0138-2006, Version: \*

institutions or segregated into different care systems within the same institution, all of which lead to disparities

in health outcomes; and

Whereas, In response to these findings, the Report recommends structuring Medicaid fee schedules to

create equal access to quality care by allowing care provided in faculty practices to be reimbursed by Medicaid

at the same rate as Medicaid reimburses the clinics located in the same hospital, which would promote a single

model of care for all patients and remove financial incentives for two-tiered systems; and

Whereas, The Report also calls for the creation of enforcement mechanisms that include significant

penalties to ensure that discrimination in care based on source of payment, as regulated by New York State's

Patient Bill of Rights, is not tolerated; and

Whereas, The Report recommends that race and ethnicity information be added to the data already

collected in health facilities statewide to identify disparities in health care utilization and outcomes; and

Whereas, The Report also calls for greater accountability requirements with respect to collection of

indigent care funds, which are allocated by the state and federal government to reimburse hospitals for care

they provide to patients who cannot pay for health care services, in order to ensure that subsidies to hospitals

reflect the amount of charitable care they provide; and

Whereas, According to Bronx Health Reach, pervasive segregation of care, based on the link between

race, ethnicity and insurance status, resulting in the systemic separation of people into different systems of care,

has created a "Medical Apartheid," which must end; now, therefore, be it

Resolved, That the appropriate committee of the Council of the City of New York hold a hearing on

implementing the recommendations of "Separate and Unequal: Medical Apartheid in New York City," a report

by Bronx Health Reach, with the goal of eliminating racial health disparities.

Res 1298/2005

JN