



Legislation Details (With Text)

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Title: Resolution calling on the New York State Legislature to pass and the Governor to sign A.11134/S.7807, which would amend the public health law, in relation to providing quality out-patient care for patients of academic medical centers regardless of source of payment or insurance type.

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Res. No. 505

Resolution calling on the New York State Legislature to pass and the Governor to sign A.11134/S.7807, which would amend the public health law, in relation to providing quality out-patient care for patients of academic medical centers regardless of source of payment or insurance type.

By Council Members James, Mark-Viverito, Palma, Vann, Williams, Rodriguez, Koslowitz and Rose

Whereas, In 2003, the United States Department of Health and Human Services’ (HHS) Agency for Healthcare Research and Quality, released the first-ever national comprehensive effort to measure differences in access and the use of health care services by various populations; and

Whereas, This report contained many findings, including the fact that health care inequality does exist, that disparities have a major impact on individuals and society, and highlighted that differential access may lead to many of the disparities in the quality of care, and that opportunities to provide preventive care are frequently missed, while patient improvement is possible; and

Whereas, Tommy Thompson, the then-Secretary of HHS, indicated that, “[c]ommunities of color suffer

disproportionately from diabetes, heart disease, HIV/AIDS, cancer, stroke and infant mortality. Eliminating these and other health disparities is a priority of HHS;” and

Whereas, Health care disparities and treatment inequality continue to exist and are being examined by all levels of government; and

Whereas, The New York City Department of Health and Mental Hygiene issued Take Care New York 2012: A Policy for a Healthier New York City, which highlights the need to reduce disparities and make all neighborhoods healthier; and

Whereas, Despite this overarching commitment to eliminating health care disparities among New Yorkers, advocates, including Bronx Health REACH and New York Lawyers for the Public Interest, allege that many private teaching hospitals in New York City operate a two-tiered system of outpatient specialty care depending on patients’ insurance type; and

Whereas, This two-tiered system involves those patients that have private insurance receiving treatment in the hospitals’ faculty practices, while patients with Medicaid or without insurance receive care in the hospital-based specialty clinics; and

Whereas, These private teaching hospitals allow valuable and finite resources to be allocated unequally between the two systems of care, with faculty practices receiving highly trained physicians and sufficient administrative support from the hospital, while patients at specialty clinics are more likely to be treated by residents who receive less training and are unable to provide sufficient continuity of care; and

Whereas, This burden falls disproportionately on communities of color, as they are more likely to be on public insurance or uninsured; and

Whereas, Due to this divide, two separate and unequal systems of health care exist and this directly contributes to disparities in health outcomes; and

Whereas, Many advocates assert that because academic medical centers benefit from robust public funding, these facilities should be compelled to provide equal treatment, notwithstanding a patient’s insurance

status; and

Whereas, A.11134/S.7807 would amend the public health law in relation to prohibiting patient steering based on source of payment; and

Whereas, Additionally, the bill requires that patients be made aware of hospital financial assistance policies through various means and would require that this information be posted on the hospital's website and also included on the hospital's patient referral line; and

Whereas, The legislation further requires New York City general hospitals to negotiate with Medicaid managed care plans in their social service districts to ensure that all medical service providers employed by the general hospitals are credentialed by the available plans; and

Whereas, The overall purpose of this legislation is to bring private teaching hospitals in line with the with the integrated care already offered by the public health care system by requiring private hospitals to provide care in the same manner, using the same staff and technologies, to all persons regardless of insurance status; now, therefore, be it

Resolved, That the Council of the City of New York calls upon the New York State Legislature to pass and the Governor to sign A.11134/S.7807, which would amend the public health law, in relation to providing quality out-patient care for patients of academic medical centers regardless of source of payment or insurance type.

JM
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