



## NYC guarantees health care to all

As the longest federal government shutdown in US history continues, the mayor of New York is not counting on Congress for solutions to its health-care problems. Susan Jaffe reports.

"From this moment on, in New York City, everyone is guaranteed the right to health care—everyone", declared New York City Mayor Bill de Blasio as he unveiled his so-called NYC Care plan this month. People who cannot pay or are ineligible for health insurance—including undocumented immigrants—will be able to get the most comprehensive and affordable health coverage in the country, at little or no cost, the mayor said, speaking in both English and Spanish.

"This is a way of getting people health care here and now, regardless of what happens on the state or the federal level", he said. Of the 8.6 million people living in New York, approximately 600 000 New Yorkers without health insurance. About half will be eligible for NYC Care.

New York will redouble its efforts to enrol the remaining 300 000 residents in MetroPlus, the city's public insurance plan, or—if they qualify—the Affordable Care Act's (ACA) subsidised marketplace plans or Medicaid, the federal and state-funded programme for low-income families. Federal law prohibits Medicaid and the marketplaces from covering undocumented immigrants.

Like a growing number of Democrats, de Blasio favours a Medicare-for-all or single-payer plan for the whole country but he is not optimistic about its prospects.

"We're not going to fall for the trick of hanging around waiting for Washington, DC, to solve our problems. We're going to solve our own problems in the meantime and we're going to work for those bigger changes. But our people need health care right now."

The New York Immigration Coalition, comprised of more than 200 advocacy groups in the state, welcomed de Blasio's plan, especially

as "immigrants and health care are under attack by the federal government", said executive director Steven Choi in a written statement. "The Mayor's landmark proposal to reach vast numbers of immigrant and other New Yorkers who currently lack health care has the potential to make

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New York City healthier, stronger, and more vibrant."

de Blasio is not worried that New York will attract new immigrants simply seeking health care. "This is a very compassionate city", he said. "This is going to benefit the people who are here and part of our community now...and if they are sick all the time, do we think that's moral? Do we think that's healthy, do we think that's smart? No... we want them to be healthy for themselves, for their kids, in their workplace, for everyone."

NYC Care members will have a primary care doctor affiliated with the city's public hospital system, known as the Health + Hospital Corporation, or H+H. Their membership card will provide a 24-h telephone number for help ranging from finding the nearest pharmacy open at night to deciding whether they need to go to a hospital emergency room. They will be limited to care from the H+H system, which includes 11 hospitals, five nursing homes, and dozens of community health clinics. It is the largest public hospital system in the country, with more than a million patients a year.

"Low-income people should not have to go to a hospital with their hat

in their hand, asking for charity care services", said the president and chief executive officer of H+H, Mitchell Katz, a practising primary care doctor who still sees H+H clinic patients once a week. Members will be told they are entitled to guaranteed benefits, including inpatient services, emergency room services, diagnostic tests, drug coverage, outpatient care, and treatment from medical specialists, he said.

While city officials are still working out some logistical details, they plan to introduce NYC Care first in the borough of the Bronx this summer. The Bronx was chosen because residents have experienced poor health for several decades, said Herminia Palacio, deputy mayor for Health and Human Services, who is also a physician. "We're saying, it doesn't matter what your last name is, it doesn't matter what colour skin you have, it doesn't matter what kind of job you have, it doesn't matter what your family history is. You're a New Yorker, and as a New Yorker, we're guaranteeing your right to this health care."

### Paying the bill

The number of New Yorkers without health insurance is about equal to



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the population of midsize US cities such as Milwaukee or Baltimore, de Blasio noted. That is “600 000 people with nowhere to turn, except the emergency room, which is exactly the last place we want to see people go”, he said.

By encouraging patients to seek primary and preventive care instead of more expensive emergency care, city officials expect to save money and keep people healthy. An emergency room visit typically costs twice as much as an outpatient visit, said Katz.

Of the 300 000 uninsured New Yorkers who would join NYC Care, about half are already being served by the H+H system, said Palacio. They will be shifting into what she calls a “new 21st century health-care system that’s grounded in ambulatory care”. As new patients come into the system, officials estimate that the annualised cost will be about US\$100 million when the system is available throughout the city in 2021. Most of that money will pay for expanding ambulatory care, including staffing and technology resources, to meet the new patient demand, said Palacio.

But some critics say Mayor de Blasio and his administration have underestimated the costs and that trying to insure every New Yorker is unsustainable.

“Diverting non-emergency care away from emergency rooms is a good goal”, said Tim Rice, deputy director of health policy at the Manhattan Institute, a conservative New York City think tank. But de Blasio “is blowing the doors off the public health infrastructure in New York by saying, theoretically, that anyone is entitled to health care and if you can’t pay, it’s free”.

He also referred to reports that the H+H has operated on a deficit. Palacio disagreed, saying “we have achieved a great deal of financial stabilisation”.

But this might not be the best time for hospitals to provide more care at little or no cost to patients. Hospitals

across the country that serve a large number of Medicaid and uninsured patients are facing cuts of almost \$4 billion in their federal Medicaid payments later this year.

When Congress passed the ACA, it assumed that hospitals would treat fewer uninsured patients as more

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people gained coverage. Therefore, lawmakers included a provision in the law to reduce the extra Medicaid support hospitals receive for treating a high number of patients without insurance. After strong objections from both Republican and Democratic majority states, Congress delayed the cuts until Oct 1, 2019.

Unless Congress postpones the cuts again, the New York H+H system expects to lose \$687 million in the fiscal year ending June 30, 2020, and \$1.2 billion the following year, a spokesman said. Its operating budget was \$7.7 billion in fiscal year.

America’s Essential Hospitals, which represents public hospital systems, will be “advocating strongly” for another delay in the cuts, said the group’s senior vice president of policy and advocacy, Beth Feldpush. They have also sued the Trump administration to block changes that allow public hospitals to buy prescription drugs at a discount.

### Other local efforts

New York City officials are not the only ones impatient with the stalemate in Congress, where Democrats won a majority in the House of Representatives in the midterm elections after campaigning on promises to improve the ACA marketplaces. Republicans slightly expanded their Senate majority and are still determined to dismantle the ACA.

Before Katz came to New York to lead H+H, he helped to start Healthy San Francisco (HSF) and it is probably not coincidental that NYC Care adopts several of its features. Alice Kurniadi, manager for the Office of Managed Care in San Francisco’s Department of Public Health, oversees HSF but does not know how many of its roughly 14 000 members are undocumented immigrants because the programme does not require that information. She does know that the members use the full range of health services. Utilisation trends have shown a reduction in the rate of avoidable emergency room usage, she said.

California’s new governor, Gavin Newsom, is asking the Trump administration for permission to establish a state-funded, single-payer health-care programme, which the administration is unlikely to grant. Newsom only needs approval from state lawmakers for another proposal to expand Medicaid coverage to undocumented immigrant children. They are already able to get Medicaid until age 19 years but the governor wants to raise the limit to 26 years if they are otherwise eligible for coverage.

And Washington state’s governor, Jay Inslee, is proposing legislation to create a state-run public health insurance option that would compete with commercial health policies in the state health insurance marketplace.

Such local efforts will encounter opposition from the Trump administration but New York City officials say they will not be deterred. “We are unflinching in our commitment to New Yorkers, regardless of their economic status and regardless of their immigration status”, said Palacio. “It is critically important when there are countervailing forces, we need to stand up for what is right.”

Susan Jaffe