



**Written Testimony of
Wayne County Rural Health Network**

**New York State Joint Legislative Public Hearing on
2015-2016 Executive Health Budget
Monday, February 2, 2015
10:00AM**

Chairs:

Senator Kemp Hannon
Assemblyman Richard Gottfried

Submitted:

Emilie C. Sisson, Manager, Wayne County Rural Health Network

Wayne County Rural Health Network (WCRHN) is a rural health network comprised of 21 not-for-profit agencies and community-based organizations in Wayne County, NY. Members include the county's only hospital, several county departments, school systems, various medical groups, safety-net medical and mental health providers, substance abuse prevention and treatment services, nursing homes, sexual assault victim services, and agencies that serve the developmentally disabled and various wrap-around services. Our primary funding comes from the Rural Health Development Program funding through the Charles D. Cook Office of Rural Health. Our mission is the following: "In collaboration with partners, providers, and individuals, the **Wayne County Rural Health Network** plans, initiates, and implements innovative solutions for emerging and unmet health and human service needs that one provider alone could not undertake." We have many innovative and cost-effective programs that we develop and implement to increase access to health care and meet the mandates of DSRIP, NYSDOH's prevention agenda, Medicaid redesign strategies, and the Triple Aim. Among such programs, three of our most salient are: 1.) prevention of chronic disease, including diabetes; 2.) promotion of mental health and prevention of substance abuse; and, 3.) promotion of healthy women, infants, and children.

Governor Cuomo's Budget Harms Rural Health in New York State

The NYS 2015-2016 Executive Health Budget proposes to cut Rural Health Network Development and Rural Health Access programs by 15.1%. The budget also proposes to bundle these programs with seven other Workforce Development initiatives. The assumption and premise for bundling apparently is to increase cost efficiencies and program effectiveness in health care throughout NYS; but, to do so will actually cause the opposite to occur.

The Rural Health Network Development grants are truly unique and actually make possible increased efficiencies and effectiveness. How is this proposition possible? The answer is that Rural Health Networks (RHNs) require collaboration of disparate organizations to come together to work collaboratively to create efficient and effective programs that address local/regional health care needs and gaps in services. The purpose and ability to collaborate and form partnerships which provide new

and better programs is the fundamental operating principle of RHNs. Such a methodology breaks down silos and barriers that interfere with development and impede implementation. Furthermore, because RHNs operate using this methodology, we are nimble and can develop, implement, and monitor our collaborative projects. By operating in this manner, RHNs draw on the strengths of our collaborators and overcome the weaknesses of perceived competitiveness and territorial squabbles. We ensure that the needs and gaps which are unique to this geographic area are identified and solved appropriately and without delay.

WCRHN has successful programs which include mental health agencies working with schools, the county hospital working with Public Health to create and implement a dental clinic, multiple agencies working to provide prevention programs in chronic disease and diabetes (in order to prevent hospitalizations), as well as breast feeding and obesity prevention activities. The programs which reach thousands of people in our county also save money. Our discount prescription program has saved nearly \$1.5 million dollars on 33,000 RXs. The dental clinic we designed and implemented serves close to 3,000 individuals in a 10-month period. And the Network's support for Certified Application Counselors and Facilitated Enrollers has facilitated nearly 2,000 individuals and families to enroll in available insurances in less than a year's time. We also administer the funds for the Sexual Assault Nurse Examiner program at the local hospital, making the collection of forensic sexual assault evidence possible, as well as the Cancer Services Program, providing needed cancer screenings to those who cannot afford them. We have provided mental health, substance abuse prevention training to more than 200 individuals in the last three months. We provide a county-wide resource guide for health and human services and a county-wide non-emergency medical transportation guide. The above are just a few quality examples of what an RHN can accomplish quickly. All are aligned with NYS's prevention agenda, the Triple Aim, Medicaid Redesign, DSRIP, ACA, and regional health planning.

Based on the case we have made for RHNs, it is obvious that our scope of operating, our vision of virtually unlimited capabilities, and our tangible and sustainable successes make us very different from workforce development. By bundling the network development and health care access with workforce development, you not only will harm RHNs but will cause many to disappear because of funding cuts. (Please note that RHNs suffered funding cuts of nearly 20% three years ago; those RHNs most severely affected disappeared.)

We know that you, as legislators, are advocates for health in NYS and stewards of the money NYS spends on health care. We also know that RHNs are the best possible, most cost-efficient and most program-effective developers and deliverers of unique solutions to unmet needs. We ask that you reinstate the \$6.4 million dollars for Rural Health Development and the \$9.8 million for Health Care Access, returning them to the full level amount of the 2014-2015 budget and unbundle those funds from rural Workforce Development.

RHNs are unheralded catalysts, change facilitators, and creators of better health and wellness at local levels. We are the secret treasures that strengthen New York State's rural health care system.

We would be happy to discuss this testimony further. For more information or to answer any questions you may have, please call Emilie C. Sisson, Manager, at (315) 483-3266 or via email at emilie.sisson@rochesterregional.org.

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