

# Medical Society of the State of New York (MSSNY)

## 2023-24 Budget Priorities

### MSSNY Supports Range of Health Care Initiatives in Governor Hochul's Proposed Budget; Voices Concern Over Host of Other Potential Changes

Governor Hochul's proposed Budget for FY 2023-24 lays out a roadmap for how New York state will spend approximately \$227 billion in the next year and introduces a number of comprehensive initiatives to help support both New York's health care system, and its health care workers, who are weary from multiple years of responding to the COVID crisis that first overwhelmed the state in March of 2020. The Budget also makes significant investments to guarantee more patients have comprehensive health insurance coverage to access the quality medical care they need and deserved.

MSSNY looks forward to working with the Governor and Legislature as they negotiate the details for the final budget. The following highlights MSSNY's position on a range of these funding proposals.

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#### **MSSNY SUPPORTS**

- Extending the MSSNY Committee for Physicians Health (CPH) program for an additional 10 years with the full \$990,000 appropriation for 2023-24. The program is currently due to expire on June 30, 2023.
- Extending the Excess Medical Liability Insurance program to maintain coverage for the approximately 16,000 enrollees for another policy year.
- Requiring health insurers to pay into a Health Insurance Guaranty Fund to ensure payment of medical claims in the event of a health plan insolvency.
- Maintaining the increased appropriation level from FY23 for Doctors Across NYS (DANYS) program physician loan repayment program, whose budget was significantly increased from \$9 million - \$16 million last year.
- Increasing Medicaid payments for primary care, hospitals, and nursing homes, as well as increase payments for beneficiaries of the Essential Plan.
- Raising the cigarette tax by \$1 per pack and prohibit all flavored tobacco products including menthol.
- Expanding insurance coverage and enforcement for mental health services, and investment in new psychiatric beds.
- Reducing interest on court judgments from 9% to the market-based rate.



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### **MSSNY OPPOSES**

- Elimination of "prescriber prevails" protections prescriptions provided to patients insured by Medicaid.
- Numerous proposed scope of practice changes for Physician Assistants (PA), Nurse Practitioners (NP) & Pharmacists, including allowing independent practice for PAs who have practiced for 8,000 hrs. under Supervision, if they practice in (1) in primary care, or (2) as a hospital employee.
- Permit pharmacists to prescribe and order opioid antagonists and medications to treat nicotine dependence.
- Permit pharmacists to execute a non-patient specific order to dispense HIV pre-exposure prophylaxis.
- Permit pharmacists to order all limited-service laboratory tests as authorized by FDA, not just COVID and flu.
- Permit pharmacists to prescribe self-administered hormonal contraceptives.
- Permit dentists to order HIV or Hep C diagnostic tests.
- Permit NPs and pharmacists to participate in a "collaborative drug therapy management" program.
- Expanding existing mandatory Hep C testing requirements for certain patients, currently applicable to patients born between 1945-1965, to all patients 18 and over for hospitals, clinics and primary care providers.
- Requiring Health Department approval of private equity investment in private medical practice, which could create significant barriers to maintaining choice in healthcare delivery.

### **MSSNY BUDGET ITEMS OF NOTE**

- Allowing New York to join the Interstate Medical Licensure Compact and Nurse Licensure Compact.
- Transfer of oversight of licensed health professions from the Department of Education (DOE) to the Department of Health (DOH).
- Establishing a new procedure for when a health plan questions the medical necessity of services provided by a hospital, with claims reviewed by a joint committee composed of clinicians representing both the payer and the general hospital. If the dispute prevails, then the claim will be determined by an independent third party.
- Require reviews by health plans into whether a procedure was medically necessary when performed at a hospital-based outpatient clinic, rather than a free-standing ambulatory surgical center, are subject to statutory utilization review protocols, including appeal rights.
- Creation of a new \$1 billion health care transformation fund that doesn't require primary care providers to connect with a licensed entity to apply.

