



**Written Testimony of
Lake Plains Community Care Network, Inc.**

**New York State Joint Legislative Public Hearing on
2015-16 Executive Health Budget
Monday, February 2nd, 2015
10:00 AM**

**Chairs:
Senator Kemp Hannon
Assemblyman Richard Gottfried**

**Submitted by:
Kenneth L. Oakley, Ph.D. FACHE**

Lake Plains Community Care Network is a private non-profit corporation first established in 1993. Our Board of Directors is comprised of local community members representing acute care, primary care, emergency medical services, public health and education. Our catchment area encompasses three rural counties in upstate New York; Orleans, Genesee and Wyoming.

This year, the Governor's Executive Budget appears to be calling for a significant reduction and or cancelation of numerous programs viewed as critical to the maintenance of rural health in upstate New York. Specially, the proposal seeks to competitively bundle somewhat unrelated services under a broad "Work Force and Rural Programs" category with an overall proposed decrease in funding for these programs of over 15% from the year prior. Two of these programs include Rural Health Network Development and Area Health Education Centers, thus the reason I feel compelled to provide testimony. This bundling strategy appears very ill conceived and detrimental to the future health and wellbeing of rural residents statewide. In fact, Lake Plains took a leadership role in NYS in 1999 when it served as a spin off entity creating the State's first Area Health Education Center, the WNY Rural AHEC, Inc. Even back then, it was obvious that, while both programs play critical roles in the development and maintenance of our rural health care delivery system, their primary roles and responsibilities are uniquely different.

Our rural health network, while supportive of health workforce development, serves a much broader and far less restrictive set of services for our community. As examples, our Network has:

- Spent the past two years serving as a neutral facilitation resource and grant manager for two of our county health departments, actively supporting their collective efforts to explore and implement cross jurisdictional sharing opportunities. Thus far, this initiative has yielded a combined savings for the counties of over \$400,000 annually.



- Routinely supported local paid and volunteer EMS providers with compliance checks, specialized training programs and grants development. We serve as the designated Program Agency on behalf of EMS provider entities in three counties. Our grants development support alone routinely assists local squads in obtaining \$50,000 or more of new equipment and/or upgrades annually.
- Served since November 1, 1999 as the local facilitated enrolment provider and now as the patient navigator site under the Affordable Care Act. We serve upwards of 5,000 clients per year.
- Worked directly (on an ongoing basis) with 13 primary care practices, supporting their efforts to obtain and retain meaningful use and patient center medical home status.

Again, our organization sees competitive bundling of uniquely different service programs (as a cost containment measure) as both ill conceived and problematic to an already overly challenging effort to maintain rural health and health care delivery. Please, consider unbundling these programs and restoring funding levels as committed to in prior years.

Should have questions or desire further comment, please feel free to contact me at 585 345-6110.

Respectfully,

A handwritten signature in black ink, appearing to read "Ken L. Oakley", is written over a faint, larger version of the same signature.

Kenneth L. Oakley, Ph.D. FACHE
CEO, LPCCN & WNY R-AHEC