



FDRHPO

Fort Drum Regional Health Planning Organization

"Building a Strong North Country Healthcare System"

27

Ladies and Gentlemen,

My name is Erika Flint, and I serve as Executive Director of the Fort Drum Regional Health Planning Organization. My agency – which uses the acronym FDRHPO – is a nonprofit health planning organization based in Watertown and the Population Health Improvement Program contractor for the Tug Hill Seaway Region. I'm honored to speak to you today about the benefits this program has on my region, which includes Jefferson, Lewis and St. Lawrence counties.

FDRHPO was selected by the Department of Health in 2015 to serve as a regional PHIP, with our original contract lasting until 2017. Since then, we have been awarded three renewed contracts, the most recent of which was planned to last through January 2020 in the amount of \$609,654. Without PHIP funding in this year's state budget, our program will expire by March 31.

If this happens, the detrimental effect to our region's health and wellness cannot be overstated. The Population Health Improvement Program has allowed our rural corner of the state to make incredible strides on initiatives like the New York State Prevention Agenda, the State Health Innovation Plan, and the Delivery System Reform Incentive Payment (DSRIP) program. Losing our PHIP so suddenly would bring this progress to an immediate halt and create a ripple effect on our region's health care providers, depriving them of the support they need to optimize patient care.

Our region's providers – and by extension, our patients – rely on us for many things. We provide a neutral forum for health stakeholders to identify, share and implement best practices that enhance community health and wellness. We collect and analyze local data, which helps our region pinpoint its health disparities and catalyzes efforts to address those disparities. We assist health care partners with health messaging and community engagement to ensure bilateral communication with their patients and the broader community. This list continues, but unfortunately, all the services I have described would be lost without continued PHIP funding.

I'd like to share a few short stories that help paint a picture of how these services have directly impacted communities in the Tug Hill Seaway Region:

The first involves a collaboration among three of our region's health stakeholders – Credo Community Center, a behavioral health and addiction services provider; North Country Family Health Center, a federally-qualified health center, and Fidelis Care, a payer. All three are members of FDRHPO's Population Health coalition, which meets monthly to discuss and review the community's population health priorities.

After discussing local oral health interventions at a coalition meeting in October 2017 and recognizing that oral health problems are a leading comorbidity of addiction, Credo



FDRHPO

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Community Center partnered with Fidelis Care to provide free toothbrushes, oral health information, and other items as holiday gifts to 68 of its residential clients.

However, the collaboration did not end there. After the gifts were delivered, Credo's Residential Rehabilitation Services for Youth expressed interest in hosting a guest speaker who could talk to residents about proper oral hygiene. Credo reached out to FDRHPO's coalition for a recommendation and was connected to North Country Family Health Center, which sent a dentist to do a full presentation for youth residents.

All groups agreed this collaboration would not have happened if they had not been brought together to discuss the topic by FDRHPO's PHIP coalition.

The second comes from the town of Massena, in St. Lawrence County, where data collected by FDRHPO's PHIP team helped the Massena Police Department make a much-needed hire in April 2017. Having just two investigators at the time, Police Chief Adam Love used health data from our St. Lawrence County Health Assessment to convince town officials to fund a third investigator, dedicated to investigating narcotic cases in the community.

"I had been talking to them about a third investigator for a while," Chief Love said. "During the budget presentation, I handed them a PowerPoint with numerous incidents and data that I received from your agency and I think that really opened their eyes up to the fact that we definitely needed a third investigator."

The data showed that St. Lawrence County's opiate hospitalization rate was roughly three times higher than rates in neighboring Jefferson and Lewis counties. It also showed that Massena and its surrounding towns were hot spots for opioid poisoning hospitalizations.

"I'd really like to thank you for creating this data and for assisting me in getting a position filled that was really needed at this police department," Chief Love said.

Finally, another testament to the value of FDRHPO's PHIP can be found in Lewis County, where Medicaid beneficiaries now have better access to dental care than before.

Before February 2016, Lewis County had not had a single dentist accepting Medicaid for nearly four years. Using local data from our PHIP, the North Country Initiative – our



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regional DSRIP performing provider system – prioritized the recruitment of a new dentist to fill this gap.

Data had showed that 51.4 percent – more than half – of third graders in the county had untreated tooth decay between 2011 and 2013. Fortunately, within several months of opening, the new Lowville Dental Practice saw 939 patients – 63% of whom were Medicaid or Medicaid Managed Care beneficiaries. This story gained nationwide attention and was reported on by Politico in August 2016.

Nevertheless, without this comprehensive local data the issue may not have taken precedence, and Medicaid patients in Lewis County might still be without a local dentist.

These are just three examples of PHIP's far-reaching positive impact in the Tug Hill Seaway region. Many more could be listed and, in working with the 10 other PHIPs across the state, I know the same to be true in their regions.

If we allow PHIPs to be phased out, we will be asking communities throughout New York State to navigate without a compass, and in many cases, without a clear destination.

Efforts to improve health and wellness will be fragmented and duplicative. They will lack directional support, community involvement, and assessment. Without PHIPs, time and money will be spent inefficiently, jobs will be lost, and the improving health of our state will plateau.

We can only strengthen the health of our communities with sustainable funding.

I urge you to restore funding for New York's Population Health Improvement Program and allow us to continue as trusted stewards of this critical Department of Health initiative.

Thank you for considering this important matter.

Sincerely,

Erika F. Flint

FDRHPO Executive Director

