



## NEW YORK STATE FY 2017-18 ENACTED BUDGET SUMMARY

Governor Andrew M. Cuomo, Senate Majority Leader John Flanagan, Senate Independent Democratic Conference Leader Jeffrey Klein, and Assembly Speaker Carl Heastie announced on Friday evening, April 7, 2017, an agreement on the FY 2018 State Budget. The chart below highlights the priority items that The Coalition advocated for and how they were incorporated into the Final Budget. You can access the Governor’s press release and the Final Budget, as well as The Coalition’s original priority asks.

[Statements from Governor and legislative leaders](#)

[Governor Announces Passage of 2017-2018 Budget](#)

[FY2017 – 2018 Enacted Budget](#)

[FY2018 Budget Priorities](#)

### COALITION’S FY 2017-18 PRIORITY OBJECTIVES

Infrastructure & Capacity	OBJECTIVE ACHIEVED
<b>Increase the \$30 million set aside in the Statewide Health Care Facility Transformation Program for community based providers</b>	
The Final Budget includes \$500 million for health care facilities and increases the set aside for community based providers to \$75 million so community based behavioral health clinics can prepare for integrated primary and behavioral health care. \$300 million will go for unfunded applicants during FY2017; \$50 million for Montefiore Medical Center; and \$75 million for essential hospitals.	<input checked="" type="checkbox"/>
The Nonprofit Infrastructure Capital Investment Program received an investment of \$20 million. Although funded in FY 2017, the program was not included in this year’s Executive Budget.	<input checked="" type="checkbox"/>
<b>Ensure the viability of the behavioral health care infrastructure as community based services transition to new payment systems</b>	
APG payments were extended to March 2020 for behavioral health services other than inpatient services.	<input checked="" type="checkbox"/>
Replaces value based payments with an unspecified “alternative payment methodology” and eliminates the phase in of VBP.	<input checked="" type="checkbox"/>
Allows for waiving alternative payment methodologies if determined to be a financial hardship or threaten access to ambulatory behavioral health services, ensuring access for clients to viable community clinics.	<input checked="" type="checkbox"/>

Continues the Vital Access Provider (VAP) program for BH providers for two years with an appropriation of \$50 million.	
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<b>Ensure access to services &amp; housing</b>	
<b>Immediately increase support and capacity for behavioral health programs</b>	
\$10 million was appropriated through OMH for children’s mental health needs to alleviate waiting lists for services.	
OASAS received \$10 million in capital funds to create additional facilities to expand substance abuse supports, addiction disorders, recovery and prevention services.	
Existing OMH residential programs received an enhancement of \$10 million through the Empire State Supported Housing Initiative.	
<b>A stalled agreement to create additional units of Supportive housing in the FY 2016 Budget denied thousands of homeless mentally ill people from being housed.</b>	
\$2.5 billion for affordable housing was released to build 6,000 units of supportive and 100,000 units of affordable housing units over the next five years. No MOU is necessary. Tax incentives are available to developers through an extension of 421-A.	
<b>The right combination of medications is important for people needing multiple pharmacology. The Executive Budget eliminated Prescriber Prevails for Non Mental Health Medications</b>	
The Final Budget restores physician rights to prescribe the prescription drug they believe most appropriate for their patient ensuring safe medications for people with mental illness.	
<b>Increase efforts to combat the Opioid and Heroin Epidemic</b>	
The Final Budget allocated \$200 million to continue addressing the statewide epidemic of heroin and opioid addiction by adding \$30 million to last year’s allocation of \$170 million, which was baselined this year .	
<b>Increase community based services</b>	
OMH will reconfigure 140 state operated residential beds into 280 scatter site housing in the community.	

<b>Workforce</b>	
<b>The nonprofit sector serves a growing population every year despite shrinking reimbursement and expanding regulation. Recruiting and retaining qualified staff has become problematic and threatens the nonprofit infrastructure.</b>	
The Final Budget includes \$13.75 million for the first quarter of 2018 for 100 and 200 CFR staff, and \$55 million annually thereafter for OMH, OASAS and OPWDD staff including clinical 300 CFR staff.	

The minimum wage agreement continues to be implemented, adding \$225 million for minimum wage compliance across all human services sectors.



### Other Important Budget Actions

The millionaires' tax was extended for 2 years generating \$3.4 billion in revenue.

Raised the age of criminal responsibility from 16 to 18.

The Final Budget does NOT include reduction of \$50 million in reimbursements to NYC.

The final Budget does NOT include the proposal to lower state contribution to NYC Dept of Health for the General Health Work Program.

Should federal cuts be more than \$850 million to the Medicaid program, the Final Budget allows the Governor to create a plan to adjust state spending.

#### Health Homes

DOH proposes a Health Home restructuring initiative (pending CMS approval), whereby outreach services will be cut by \$20M and additional savings used to facilitate a value-based outreach model. The Coalition will work with our Health Home partners if advocacy is needed to ensure services and funding.

**For more information, please contact Christy Parque [cparque@coalitionny.org](mailto:cparque@coalitionny.org) or Doug Berman [dberman@coalitionny.org](mailto:dberman@coalitionny.org) at The Coalition.**