

NYSACHO Emerging Issues Committee Meeting July 15, 2025: 2:00pm – 3:00pm

Attendees (NYSACHO): Danielle Pellino, Robert Viets, Sarah Montuori

Attendees (LHDs): Keith Brown (Schenectady), Tricia Bulatao (Albany), Kevin Watkins (Cattaraugus), Cassandra Archer (Cayuga), Peter Buzzetti (Chemung), Emily Haigh (Columbia), Katee Padbury (Cortland), Hannah Busman (Franklin), Christina Frederick (Franklin), Kathleen King (Fulton), Laura Churchill (Greene), Carrie Gordon-Stacey (Greene), Ashley Waite (Lewis), Dan Stapleton (Niagara), Victoria Pearson (Niagara), Lisa Lahiff (Orange), Kathleen Percacciolo (Putnam), Deborah Dalmat (Schuyler), Kim Abate (Seneca), Kat Potter (Steuben), Matthew Marmor (Steuben), Gregson Pigott (Suffolk), Eve Walter (Ulster), Tina McDougall (Washington), Alyssa Arlen (Washington), Diane Devlin (Wayne), Laura Paolucci (Wyoming)

Attendees (Guests): Amy Kellogg, Harter Secrest & Emery LLP

Agenda Item	Discussion
Meeting	1. Juul Settlement Fund Disbursement
Discussion	 Danielle Pellino informed members to contact her if their county has not yet received Juul Settlement funds. A few counties had not completed certification forms, but those individuals have already
	been contacted.
	 Counties not contacted are assumed to be in good standing, though a double-check is advised.
	2. Community Paramedicine Discussion
	Systemic Challenges in EMS:
	 EMS is federally categorized under transportation, which limits healthcare-related
	reimbursement opportunities.
	 Reimbursement typically only occurs when patients are transported to hospitals, not to clinics or crisis centers.
	 Significant gaps exist in EMS service in many counties, especially in areas lacking fire departments with built-in EMS support.
	Pilot Programs and Washington County Example:
	 Some counties, including Washington County, are exploring pilot programs using grant funding to address EMS gaps.
	 These programs include partnerships with physician offices and hospitals to reduce readmissions and better manage chronic disease post-discharge.
	Reimbursement & Equity Concerns:
	 Medicaid reimbursement is significantly lower than private insurance, which affects equitable access to EMS.
	 EMS is struggling financially, and many providers must work multiple jobs.



 It's unclear whether community paramedicine models can be financially sustainable.

• Stakeholder Disagreements:

- Conflicts exist between EMS providers, nurses, and others regarding supervision models and scope of practice.
- Nursing associations oppose some versions of community paramedicine bills over training concerns and supervisory structure.

Legislative Update (Amy Kellogg):

- A bill allowing EMS to transport to limited non-hospital facilities was passed last year.
- A broader EMS systems plan bill passed both houses but lacks funding, raising concern from counties.
- Community paramedicine remains contentious due to lack of consensus on roles, training, and supervision.

3. EMS as an Essential Service

- Defining EMS as essential would mandate county funding—something NYSAC opposes without a funding stream.
- Original bill language declaring EMS an essential service was removed as a compromise.

4. SOFR Legislation (Statewide Overdose Fatality Review Teams)

Overview from Amy Kellogg:

- The bill as written would create local panels for overdose fatality reviews, but concern exists that a voluntary program might become mandated once introduced in legislation.
- Counties currently can implement these teams without state legislation, but many face issues accessing needed data.

Data Access and HIPAA Challenges:

- The legislation aimed to compel data sharing within a timeframe, including from coroners and medical examiners.
- Current law does not offer liability protections or clear data-sharing provisions like those for child fatality review teams.
- Recently passed legislation may soon allow health officials access to coroner data, addressing one major barrier.

Alternative Paths Forward:

- Regulations or best practice frameworks from the Department of Health or NYSACHO might be more effective than legislation.
- A voluntary model might sidestep legislative resistance while still offering counties a structured approach.

5. Federal Landscape and Budget Implications

Amy Kellogg reported:



Adjournment

 Immediate implementation of federal provisions is underway, but many aspects await guidance from the NYS DOH.
 The recent federal tax bill created a \$750 million shortfall in New York's healthcare budget for the current year and a projected \$3 billion recurring deficit starting next year.
 New York will likely explore administrative cuts, reserve funds, and potentially new revenue or tax increases.
6. DEI Restrictions in Federal Funding
 NYSACHO flagged a new attestation requirement in HHS awards:
 Counties must agree not to operate programs that "advance or promote DEI or discriminatory equity ideology."
 Counties were advised to review narrative language carefully in federal reports and seek legal guidance.
7. PHEP Allocation for FY 2025–26
 Most counties should have already received notice of their allocation—78% of the award upfront—with the remainder to come later.

The next Emerging Issues Committee meeting is scheduled for August 19th, 2025 at 2pm.