



**RESOLUTION URGING MULTI-YEAR STATE TAKEOVER OF LOCAL  
SHARE OF MEDICAID**

**WHEREAS**, county officials across the state are presently introducing their 2012 budgets; and

**WHEREAS**, these budget decisions are being made under the constraints of the State's new property tax cap; and

**WHEREAS**, when State lawmakers enacted a property tax cap, they pledged to provide mandate relief that would enable and empower local leaders to implement that tax cap locally; and

**WHEREAS** that mandate relief has not materialized; and

**WHEREAS**, By far, at a local statewide cost of \$7.3 billion, Medicaid is the number one mandate facing counties; and

**WHEREAS**, State Legislation (S.5889-B) will require state policymakers to take full fiscal responsibility for New York's largest in the nation Medicaid program, by implementing an eight (8) year gradual State takeover of county Medicaid costs; and

**WHEREAS**, removing county taxpayers from the financing of Medicaid is the single most important thing the State Legislature can do to lower property taxes for New Yorkers; and

**WHEREAS**, the State takeover of county Medicaid costs will lead to lower property taxes and enhance New York's economic competitiveness and improve economic opportunities for all New Yorkers; and

**WHEREAS**, state lawmakers can fund the takeover with a combination of Medicaid program reforms, state-derived savings and other spending controls, including, applying MRT (Medicaid Redesign Team) reform savings to mandate relief and pursuing a federal Medicaid waiver to leverage state cost containment initiatives that can be applied to property tax relief and applying future revenues to lowering property taxes and by allowing federal health care reforms to cover New Yorkers; and

**NOW, THEREFORE, BE IT RESOLVED** that the Board of \_\_\_\_\_ County calls on State lawmakers to keep their promise, and sign on to legislation (S5889-B) designed to provide mandate relief for counties, in the form of an eight-year State takeover of county Medicaid costs.

Dear Senator/Assemblymember:

I am writing to ask you to sign on as a cosponsor of new bi-partisan legislation designed to provide mandate relief for counties, in the form of an eight-year State takeover of county Medicaid costs.

Last session, when you enacted a property tax cap, you pledged to turn your attention to reforming the State mandates that are driving the high property taxes in New York State. For counties, at \$7.3 billion statewide and growing by 3 percent each year, Medicaid is our number one mandate.

The bill, S.5889/A. Bill # Pending, will require state policymakers to take full fiscal responsibility for New York's largest in the nation Medicaid program, by implementing an eight (8) year gradual State takeover of county Medicaid costs.

The State has complete control over the design of New York's Medicaid program, but since 1966 have asked property taxpayers to pay the bill for their decisions. Removing counties from the financing of Medicaid is the single most important thing you can do in the State Legislature this year.

The State takeover of county Medicaid costs will enable local services to continue to be provided, lead to lower property taxes and enhance New York's overall economic competitiveness.

The takeover can be funded with a combination of Medicaid program reforms, state-derived savings and other spending controls, including:

- Applying MRT (Medicaid Redesign Team) reform savings to mandate relief.
- Pursuing a federal Medicaid waiver to leverage savings that can be applied to property tax relief.
- Applying future revenues to lowering property taxes.
- Allowing federal health care reforms to cover New Yorkers.

These actions would provide more than ample savings and revenues to fund this State takeover of county Medicaid costs. This bill provides that mandate relief, and it does so in a way that does not break the State's bank.

Please let us know when you have become a co-sponsor of the bill so that we can add your name to the growing list of State lawmakers keeping the mandate relief pledge they took when they enacted the property tax cap.

Sincerely,

BILL NUMBER: S.5889-B

SPONSOR: Gallivan, McDonald, Grisanti, Larkin, Ritchie, Valesky, Young

TITLE OF BILL:

An act to amend chapter 58 of the laws of 2005, relating to authorizing reimbursements for expenditures made by or on behalf of social services districts for medical assistance for needy persons and the administration thereof, in relation to calculating social services district medical assistance expenditure amounts.

PURPOSE:

This bill provides for an immediate freeze of local contributions to the cost of Medicaid followed by the gradual state assumption of all nonfederal Medicaid costs over an 8 year period.

SUMMARY OF PROVISIONS:

Sections 1 and 2 of Part C of Chapter 58 of the Laws of 2005 are amended to provide a phased takeover of the local share of Medicaid costs.

JUSTIFICATION:

Since the enactment of the Medicaid program in 1965, local social service districts (counties and the City of New York) have been required to share in both the cost and administrative operation of the program. Over the years, the cost of the program has grown exponentially while responsibility for program design and administration has been gradually shifted to the state. By 2016, all administrative responsibility for Medicaid will be assumed by the state.

Despite this shift of responsibility, county and New York City governments continue to be required to contribute a significant share of the total program cost. Currently, counties and New York City pay approximately \$7.3 billion per year and under existing law, these costs will continue to increase by 3% each year. With the recently enacted 2% cap on property taxes, counties simply cannot continue to meet this state mandate without slashing other essential local services such as senior services, veteran's services, law enforcement, parks, and road maintenance.

This legislation provides for the gradual assumption of the current local shares starting with an immediate freeze on local contributions effective January 1, 2012. On October 1, 2012, local contributions will be reduced by 5%. Additional reductions will be made in the subsequent years ending with the full assumption of local Medicaid costs in 2019.

The timing of this legislation is designed to take advantage of changes that may be required by the federal Affordable Care Act as well as state actions being implemented or planned by the Governor's Medicaid Redesign Team. Given the phased nature of the takeover, there is ample time for the Governor and Legislature to develop and consider changes to the program that may be required to maintain program compliance with federal law as well as affordability to the state.

LEGISLATIVE HISTORY:

New bill.

EFFECTIVE DATE:

This act shall take effect immediately.

# Warren County

## HMO Rates Effective 1/1/2012

Company	Blue Shield of Northeastern NY	Empire Blue Cross	CDPHP	GHI	NYSHIP Renewal	MVP
Students	age 26	age 26	age 26	Did not quote at this time	Did not quote at this time	Did not quote at this time
Dependents	age 26	age 26	age 26			
Co-Pay	\$25	\$25/\$40	\$25/\$40			
Inpatient Co-pay	\$500	\$500	\$240			
Drug Card	\$10/\$30/\$50	\$10/\$25/\$50	\$10/\$30/\$50			
Individual	\$703.21	\$662.42	\$574.33			
2-PERSON	\$1,441.58	\$1,291.72	\$1,177.36			
Family	\$1,951.96	\$1,921.02	\$1,651.01			
% Increase	55.4%	46.4%	26.9%			

\*These rates are subject to change due to differences in underwriting criteria and enrollment vs. proposed selection of benefits.

Created by: Capital Financial Group, Inc. 9/27/2011

# Warren County

## EPO Prospective Rates Effective 1/1/2012

Company	Blue Shield of Northeastern NY (EPO) Renewal	Empire Blue Cross	CDPHP	GHI	NYSHIP Renewal	MVP
Students	age 26	age 26	age 26	age 26	age 26	
Dependents	age 26	age 26	age 26	age 26	age 26	
Co-Pay	\$25/\$40	\$25/\$40	\$25/\$40	\$25	\$20	
Inpatient Co-pay	\$250	\$250	\$240	\$250	\$0	
Drug Card	\$10/\$30/\$50	\$10/\$20/\$50	\$10/\$30/\$50	\$10/\$30/\$50	\$5/\$15/\$40	Did not quote at this time
<b>Individual</b>	\$520.51	\$523.57	\$574.33	\$624.87	\$763.31	
<b>2-PERSON</b>	\$1,067.05	\$1,020.96	\$1,177.36	\$1,187.24	\$1,665.31	
<b>Family</b>	\$1,496.33	\$1,518.35	\$1,651.01	\$1,312.21	\$1,665.31	
<b>% Increase</b>	15%	15.7%	26.9%	38%	10%	

\*These rates are subject to change due to differences in underwriting criteria and enrollment vs. proposed selection of benefits.

Created by: Capital Financial Group, Inc. 9/27/2011

**Warren County**

**12/1/2011 Estimated Health Costs for Actives & Retirees (County Cost) Blue Shield Minimum Premium, eliminate CDPHP MA IA (with 50% Reserve built into County/employee rate)**

Coverage Type	Totals For Each Coverage Type										
	BLUE SHIELD EPO	NYSHIP	BS MA IA	BS MA OOA	MVP MA	BLUE SHIELD EPO	NYSHIP	BS MA IA	BS MA OOA	MVP MA	Totals For Each Coverage Type
Individual	\$477.76	\$477.76	\$0.00	\$0.00	\$0.00	301	0	0	0	0	301
Co-Indiv.	\$485.28	\$485.28	\$0.00	\$0.00	\$0.00	10	0	0	0	0	10
2-Person	\$970.56	\$970.56	\$0.00	\$0.00	\$0.00	214	0	0	0	0	214
Family	\$1,346.20	\$1,346.20	\$0.00	\$0.00	\$0.00	292	3	0	0	0	295
Individual Medicare	N/A	\$477.76	\$263.00	\$276.00	\$214.20	0	1	225	22	82	330
2-Person Medicare (1 w & 1	N/A	\$970.56	\$0.00	\$0.00	\$0.00	0	0	0	0	0	0
2-Person Medicare (2 with)	N/A	\$970.56	\$0.00	\$0.00	\$0.00	0	0	0	0	0	0
Family Medicare	\$1,346.20	\$1,346.20	\$0.00	\$0.00	\$0.00	1	0	0	0	0	1
<b>Enrollees Covered</b>											
Total Number of Enrollees:											<b>1151</b>
Total Monthly Premium By Carrier:											<b>\$10,057,473</b>
Total Yearly Premium By Carrier:											<b>\$17,564</b>
Health Rate											
County Budget Rate											
13.6%											
10.0%											

Warren County

12/1/2011 Estimated Health Costs for Actives & Retirees (County Cost) Blue Shield same Prospective plan, eliminate CDPHP MA IA

Coverage Type											Totals For Each Coverage Type
	BLUE SHIELD EPO	NYSHIP	BS MA IA	BS MA OOA	MVP MA	BLUE SHIELD EPO	NYSHIP	BS MA IN	BS MA OOA	MVP MA	
Individual	\$483.23	\$483.23	\$0.00	\$0.00	\$0.00	301	0	0	0	0	301
Co-Indiv.	\$490.90	\$490.90	\$0.00	\$0.00	\$0.00	10	0	0	0	0	10
2-Person	\$981.79	\$981.79	\$0.00	\$0.00	\$0.00	214	0	0	0	0	214
Family	\$1,361.98	\$1,361.98	\$0.00	\$0.00	\$0.00	292	3	0	0	0	295
Individual Medicare	N/A	\$483.23	\$263.00	\$276.00	\$214.20	0	1	225	22	82	330
2-Person Medicare (1 w & 1	N/A	\$981.79	\$0.00	\$0.00	\$0.00	0	0	0	0	0	0
2-Person Medicare (2 with)	N/A	\$981.79	\$0.00	\$0.00	\$0.00	0	0	0	0	0	0
Family Medicare	\$1,361.98	\$1,361.98	\$0.00	\$0.00	\$0.00	1	0	0	0	0	1
<b>Enrollees Covered</b>											<b>Enrollees Covered</b>
Total Number of Enrollees:						818	4	225	22	82	1151
Total Monthly Premium By Carrier:						\$759,524	\$4,569	\$59,175	\$6,072	\$17,564	Grand Total Yearly Premium:
Total Yearly Premium By Carrier:						\$9,114,293	\$54,830	\$710,100	\$72,864	\$210,773	\$10,162,860
						Health Rate					15.0%
						County Budget Rate					11.2%