

## **NYS Joint Senate and Assembly Hearing, May 18, 2020 Mitigating COVID-19 Effects on Minority Communities**

Written Testimony by:

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On behalf of Union Community Health Center (UNION) I would like to thank the NYS Senate and Assembly for inviting me to speak today about the devastating impact COVID-19 has had on our community, an ethnically diverse community located in the Bronx, NY. I hope that my comments today will help inform health policy which recognizes and addresses the shattering effect COVID-19 has had on the residents of the Bronx and lead to enhanced funding that will help mitigate the systematic inequalities that have consequently left residents disproportionately distressed compared to other communities within NY State.

UNION is a federally qualified health center (FQHC) made up of six sites and one mobile medical unit serving approximately 38,000 patients in the Bronx. Five of UNION's sites are located in District 15, the poorest congressional district in the United States, while the other is located in District 14 which has one of the highest rates of COVID-19 infection. Both districts are considered to be located in Medically Underserved (MUA) and Health Professional Shortage Areas (HPSA). Over three quarters of UNION's patients live at <200% of the federal poverty level, many of our patients are in fact are the working poor, a great percentage are immigrants, and increasingly, due to severe changes in federal policies, which have had direct, negative impacts on the communities we serve, our patients are un- or under-insured.

The approximate 600,000 residents who make up our ethnically diverse community, face cultural, linguistic, financial, and transportation barriers. They also experience significant health disparities compared to their counterparts across the city and state, including higher rates of hypertension, cardiovascular disease, obesity, diabetes, asthma, and depression. UNION like the other 70 plus FQHC's serving the most vulnerable residents of NYS, provides high quality, comprehensive primary care. Taking innovative approaches to treating patients has always been the gold standard of community health centers and at UNION, our integrated model of care is a holistic approach that involves primary care, behavioral health, and dental care providers designing and delivering care as one unified team for each patient. We provide this to anyone who requires services, regardless of insurance status, immigration status, or ability to pay. We are the safety-net and our successful health strategy has always been to broaden our community partnerships to better address the social determinants of health.

### **The Effects of COVID-19 on Communities of Color**

Although we are not yet at the end of this pandemic, to date, early data shows that COVID-19 disproportionately impacts low-income communities, more specifically, communities of color. Public health experts agree that the elevated death rate related to COVID-19 in the Bronx is tied to our borough's health disparities and high rates of chronic illness.

Here are our recommendations to mitigate the impact of COVID-19 on communities of color:

- Guarantee accessible COVID-19 testing. ( Not drive thru locations in neighborhoods where people do not typically own cars)

- The State's contract tracing program must be culturally and linguistically appropriate.
- Substantial testing and tracing initiatives must expand, especially in the hardest hit areas such as the Bronx, as the State re-opens and until COVID-19 is no longer a threat to New Yorkers.
- Resources must be directed to FQHCs to cover the costs of testing equipment to ensure access to tests that are effective and reliable.
- To protect us all the State must implement a plan for adequate sourcing and distribution of PPE that includes FQHCs as priority recipients.
- It is imperative the State implement clear public health messaging that is culturally and linguistically tailored to fit the needs of diverse communities such as the Bronx and work with community health centers to disseminate.
- The State must ensure communities of color have access to devices and connectivity at low or no cost.
- COVID-19 has created a Mental Health crisis in our Community. Communities of color have experienced overwhelming loss and many have been traumatized. NYS must support with culturally and linguistically programs and initiatives which address this unprecedented assault on the mental health of residents.

### **COVID-19's Impact on Union Community Health Center.**

Just as the COVID-19 epidemic is ravaging our community, it has also had a dire impact on UNION, as well as community health centers across State, threatening the social safety net. In response to the State's common sense orders to stay home, UNION experienced a drastic decrease in patient visit volume in the first weeks of the pandemic response. Our health center saw an 85% decrease in patient volume and we estimate our losses will be in the range of millions. Like other community health centers we have had to make difficult decisions; we have temporarily closed two sites, and have had to furlough and lay-off staff.

It's important to note that almost overnight, UNION reinvented outreach practices, as well the traditional delivery model of care to ensure on-going access to care for patients. An all-hands on deck approach was employed as teams of staff were reassigned to conduct telephonic outreach to each chronically ill patient to ensure they knew we were open, and through telephonic visits, able to help them, treat them and even have medications delivered right to their doors. Our patients have been relieved to have the option of telephone visits. However, reimbursement for services for telephonic visits has been approved by the Department of Health only for the duration of the public health emergency at this time. We know that patients will most likely need to rely on this method of connection to providers beyond what the DOH determined to be the end of this crisis. Removing the ability for patients to receive services via the telephone would be detrimental to patients' ability to receive timely primary care, especially as the communities begin to deal with potential long-term consequences of recovering from COVID-19. Which we feel will be the real 2<sup>nd</sup> wave of this pandemic.

UNION was also forced to ramp-up tele-health capabilities and hastily invest in needed equipment to fully launch all of our services virtually. However, many of our patients do not have access to audio-visual technologies, smart phones, or wifi. This is extremely concerning since most researchers predict that there will be another wave of COVID-19 in the fall/winter. Access to appropriate technology and internet services are issues of health equity, and we encourage the Legislature to support increased access to appropriate technology while ensuring telephonic visits are included in reimbursement. We implore you to establish a primary care payment model that supports the care delivery model of the future – a model that includes tele-health and telephone access to care.

To ensure a safe work environment for all UNION patients and staff once the PAUSE in NYC is lifted, we are redesigning physical spaces to comply with social distancing requirements. UNION, like most community health centers, operates with no substantial reserve and this too will be struggle to successfully accomplish. Bringing back

furloughed staff will also be a monumental challenge. UNION and health centers throughout the state will need transitional support to cover personnel, operating, and capital expenses.

Without a coordinated response that leverages the resources of all health care and social services partners, including FQHCs, New Yorkers in underserved communities will continue to be disproportionately affected by COVID-19. This means that the State must ensure adequate funding in preventive and public health infrastructure if we are to truly work together to address the devastating impact of this pandemic for the communities we serve.

We at UNION look forward to working with the legislature to do so.

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