



## **NEW YORK STATE AMERICAN ACADEMY OF PEDIATRICS: PRIORITY PEDIATRIC BUDGET, POLICY & PROGRAM ISSUES 2015**

### *To Address Children's Health & Well-Being We Support:*

#### **A Bright Futures Medical Home for All Children**

AAP Bright Futures benefit package should be the model for all health insurance available to the children and families of New York whether subsidized through Medicaid or Child Health Plus, purchased through the NY Health Exchange, commercial coverage through employment or employer based ERISA plans. All developmental screens, social emotional screening and maternal depression screening, and other services which are part of Bright Futures, should be adequately reimbursed. Bright Futures is a comprehensive, culturally sensitive and cost effective model of preventive and primary care for infants, children and adolescents.

#### **Raising the Minimum Wage to Address Child Poverty**

New York's youngest families are our poorest families. Work should pay. Parents who work full time should be able to afford to take care of their children, put food on the table and a stable roof over their heads. Right now, this is not the case. We support accelerating the existing Minimum Wage legislation scale to a base of \$15.00 an hour this year. New York's struggling families deserve to make a decent wage for a day's hard work.

#### **Creating and Supporting a Statewide Paid Family Leave Program**

While the federal Family Medical Leave Act provides for unpaid leave for families, families need time to take care of themselves without fear of losing the income they depend on; and the city stipulates the use of up to 5 paid sick days to care of a family member, the State of New York, has no such provision. The state needs to follow the lead of New York City, and create and support a Paid Family Leave Program that supports families to take paid time off at the birth of a baby, an adoption, and the need to care for an ill or fragile relative. Paid Family Leave is a necessity in today's world, where most families depend on two incomes just to make ends meet. Families should not be forced to decide between love and caring for a family member and finding themselves thrown into poverty. Paid Family leave should be a right, not a privilege. Most developed countries have generous Paid Family Leave policies, the US is far behind. New York State can and must show the way.

#### **Raising the Age of Adult Criminal Responsibility to 18**

New York is only one of two states that still allow 16 year olds to be tried in Adult Criminal Courts as adults. The state's current legal framework defies the science of brain development and the research on the maturation process of social emotional awareness. This is the year for New York to raise the age from 16 to 18 and join other states in recognizing that adolescents are not adults, but young people who are still growing and developing; they are becoming adults, but are not yet there.

### **Integrating and Paying for Children’s Mental Health Services in Pediatric Primary Care**

Over the last five years, we have successfully trained hundreds of pediatricians, to offer high quality children’s mental health screening, assessment, diagnosis and treatment services in the primary care setting. Providing high quality child mental health services in the pediatric primary care setting must become the state standard. And the state must design and implement a fair payment mechanism to support the services.

### **Expanding Nurse Family Partnership Programs Using Medicaid Waiver funds**

Nurse Family Partnership is an evidence-based program that helps new parents become better parents through the provision of parent education, nutritional counseling, child development education and supports for the parent and the child. The program has demonstrated significantly positive outcomes for children and parents. The health and well-being of children whose families have access to Nurse Family Partnership programs is demonstratively better than the outcomes for similarly situated children whose families have not had access to the program. Nurse Family Partnership programs are a wise investment in children’s ongoing health and well-being. Bringing this vital program to scale is an important public health endeavor.

### **Maintaining and Expanding Children’s Access to Timely Immunization Reflecting the AAP/ACIP Immunization Schedule.**

We support all legislation, public policy initiatives and financial investments that support the immunization of children and teens in their medical home according to the ACIP/AAP immunization schedule.

### **Developing Pediatric Standards for all Urgent Care Centers/Services**

As Urgent Care Centers continue to proliferate across New York, we call upon the state to create and implement strict pediatric standards for those Urgent Care Centers that profess to serve children. Urgent care centers that offer services to children should at a minimum have a pediatric trained physician, i.e. a pediatrician, family medicine or pediatric emergency physician and a pediatric nurse practitioner on staff during all operating hours. Urgent Care Centers should also be required to communicate with a child’s medical home physician about any treatment given.

### *To Address All Children’s Needs for Healthy Early Brain Development, Educational and Social Emotional Well Being We Support*

### **Increasing Budget Support for Universal High Quality Infant and Child Care, Pre-K and Afterschool programs so quality care can be universal**

All families need access to high quality, safe and accessible care for their children while they are at work.

We support the investment of additional resources to bring New York closer to truly Universal Pre-K. The evidence is overwhelming that Pre-K can and does level the playing field for children entering elementary school. It mitigates the reality that zip code is destiny. All children need access to high quality Pre-K. Children cannot wait. They need access to Pre-K now, as promised. We also want to see significant additional state investment to build and maintain high quality infant and child care. Early brain development/learning skills and key social/emotional development is directly related to the quality of care that infants and toddlers experience. The state must step up and invest state dollars to assure that all infant/toddler programs are high quality and accessible.

And older children need a safe place to learn and play after school, so their parents can be assured that they are safe until the family can be together after work for the evening hours. Afterschool programs, should not be an afterthought, they need to a universally available option for all working families.

### **Increased Support for Early Literacy Programs**

The state budget should support early literacy programs, like Reach Out and Read. Early literacy, combined with parent child bonding over books is a core component of children’s healthy development and cognitive awareness.

### *To Ensure a Healthy Environment*

#### **Expanding Centers of Excellence in Children’s Environmental Health**

We support continuing state budget support for the existing Centers of Excellence in Children’s Environmental Health and encourage the creation and support of 5 more centers to fully serve the needs of children, families and pediatric community across the state.

#### **The Green Agenda of the Just Green Partnership**

We also support the Green Agenda of the Just Green Partnership including legislation and regulation supporting the “greening” of schools and child care centers, the reduction of toxic substances in children’s toys, food and clothing and the complete disclosure of all pesticides used in lawn and garden care. We are opposed to any loosening of current environmental protections.

### **We OPPOSE**

#### **Pediatric Care in Retail Based Clinics**

NYSAAP strongly opposes pediatric care in retail-based clinics (RBCs). We do not believe that RBC’s or “limited service clinics” as they are called in this year’s Article 7 legislation, can be an appropriate source of medical care for infants, children, and adolescents.

We strongly discourage their use by families with children because the AAP is committed to the Medical Home model of care. The Medical Home provides accessible, family-centered, comprehensive, continuous, coordinated, compassionate, and culturally effective care for which the pediatrician and the family share responsibility.

Given that RBC’s are not and cannot be part of a medical home model; the NYSAAP is particularly concerned about fragmentation of care and the possible negative impact on quality of care for health care for children and adolescents

Children are not just small adults, their health care needs are unique and the level of parental participation in that care is critically important. Without strict requirements that RBC’s become part of a child’s medical home network, the details of which are clearly absent from this legislation, we remain firmly opposed to expansion or support of RBC’s in New York.

#### **Anti- Immunization Legislation or Policy**

NYS AAP strongly opposes any legislation or policy which reduces current immunization mandates for child care, school, sports and camp participation. Maintaining a statewide commitment to

universal, on schedule immunization is the only way to protect our children through the concept of herd immunity. The more people who are immunized the more people who are protected. An epidemic is just a plane ride away as the recent measles outbreak indicates.

For more information contact:  
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