

LATE AGENDA
For the May 18, 2010 Committee Cycle

County Administration, Human Services and Finance Committee

- #26 RESOLUTION SUPPORTING A TEMPORARY EXTENSION OF ENHANCED
FEDERAL MEDICAID MATCHING FUNDS PROVIDED UNDER THE
AMERICAN RECOVERY AND REINVESTMENT ACT (ARRA)**

Intro No. 26
Date 5-18-2010
Reviewed by AWB
Co. Attorney
Date 5/12/10

RESOLUTION
BROOME COUNTY LEGISLATURE
BINGHAMTON, NEW YORK

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Sponsored by: County Administration, Human Services and Finance Committees

Seconded by:

RESOLUTION SUPPORTING A TEMPORARY EXTENSION OF ENHANCED FEDERAL MEDICAID MATCHING FUNDS PROVIDED UNDER THE AMERICAN RECOVERY AND REINVESTMENT ACT (ARRA)

WHEREAS, Medicaid is a federal, state, and local health care program whose costs and administration represents the largest component of the state and local fiscal relationship in New York, currently totaling over \$51 billion annually, and

WHEREAS, since the program's inception, counties across the state have struggled to fund the growth of the Medicaid local share and even with local budget austerity measures the programs cost has resulted in higher property taxes, higher sales taxes, and a decline in county services, and

WHEREAS, while a local government Medicaid "cap" has been implemented in New York in an effort to provide some budget stability and help shield local taxpayers from the impact of excessive Medicaid growth, counties remain concerned with the future sustainability of the Medicaid program, the effect on other state and local budget priorities, and the overall outlook for New York's economic competitiveness, and

WHEREAS, Congress has provided an increase in Federal Medicaid matching funds, set to expire on December 31, 2010, to all states under the American Recovery and Reinvestment Act in recognition of the recent fiscal crisis, and

WHEREAS, in addition to providing fiscal relief to the State of New York, this increase also provides direct fiscal relief to local governments in New York State which helps ease the local property and sales tax burden for all New Yorkers, and

WHEREAS, the U.S. Senate, House and the President all support a six month extension of this critical temporary enhanced Medicaid assistance through June 30, 2011 because of the continued fiscal pressures experienced by state and local governments due to further declines in tax revenues and increased demand for public services stemming from the recession, and

WHEREAS, New York and twenty-three other states, have included a six month extension of this enhanced funding in their budgets for the coming year, it is imperative that Congress enact a six month extension of enhanced Medicaid assistance payments as soon as possible, to allow states to finalize their budgets without having to fill even larger budget holes with tax increases or service cuts that would be necessary in the absence of this federal funding, now, therefore, be it

RESOLVED, that Broome County supports a six month extension of the enhanced Federal Medical Assistance Percentage (FMAP) as established under the American Recovery and Reinvestment Act, and be it

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FURTHER RESOLVED, that Broome County, together with the New York State Association of Counties (NYSAC) calls upon the Governor and the State Legislature to encourage the New York Congressional Delegation to support this six month extension, and be it

FURTHER RESOLVED, that Broome County will forward copies of this Resolution to Governor David A. Paterson, the New York State Legislature, the New York Congressional Delegation, NYSAC and all others deemed necessary and proper.

COUNTY OF BROOME } ss.:
STATE OF NEW YORK }

I, the undersigned, Clerk of the Legislature of the County of Broome, DO HEREBY CERTIFY that the above is an original resolution of such Legislature duly adopted on the _____ day of _____, 20____, by a majority of the members elected to the Legislature of said County at a regular meeting of said Legislature.

I FURTHER CERTIFY that at the time said resolution was adopted said Legislature was comprised of nineteen members.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the corporate seal of said Legislature this _____ day of _____, 20____.

Date sent to County Executive _____

Approved _____
County Executive

Date _____, 20____.

Clerk, County Legislature
County of Broome