

New York State Department of Health

Health Equity Impact Assessment Template

Refer to the Instructions for Health Equity Impact Assessment Template for detailed instructions on each section.

SECTION A. SUMMARY

1. Title of project	HHHN Malone Family Health Facility Expansion
2. Name of Applicant	Hudson Headwaters Health Network
3. Name of Independent Entity, including lead contact and full names of individual(s) conducting the HEIA	Crescendo Consulting Group Katelyn Michaud, MPH Managing Principal katelynm@crescendocg.com
4. Description of the Independent Entity's qualifications	Crescendo Consulting Group is a boutique woman-owned consulting firm specializing in conducting community health needs assessments, community needs assessments, and strategic plans for hospitals and health systems, FQHCs, CCBHCs and behavioral health organizations, community action agencies, and other non-profits across the United States.
5. Date the Health Equity Impact Assessment (HEIA) started	March 5, 2024
6. Date the HEIA concluded	April 30, 2024

7. Executive summary of project (250 words max)	<p><i>Family Health at Malone opened in December 2023 on the Alice Hyde Medical Center campus, a member of the University of Vermont Health Network. The 2,660 square-foot leased space consists of six exam rooms and additional support and administrative space. Due to primary care shortage in the Greater Malone community, HHHN is proposing to build a larger facility with 15 exam rooms plus one treatment room with approximate target opening date in winter 2026. The proposed new, larger health center is intended to expand primary care access to meet the needs of up to 10,000 patients in the Malone region. The site will provide advanced primary care services, including family medicine, integrated behavioral health care, and care management. Because of the location of the health center on the hospital campus, patients have convenient access to ancillary services such as lab, imaging and</i></p>
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specialty care. Additionally, under consideration is an onsite pharmacy at the health center. This is the latest in the Network's commitment to the northern region of the Adirondacks, complimenting existing health centers in Champlain, Plattsburgh and Ticonderoga.

8. Executive summary of HEIA findings (500 words max)

Located in Franklin County, the Greater Malone community resides in a designated HRSA primary care shortage area. Stakeholders who participated in the Meaningful Engagement expressed that many residents travel over an hour away to Potsdam and Plattsburg to receive primary care as there are not enough primary care providers within the local community.

Frankling County is a rural community with a low median household income and high percentage of poverty. Employment opportunities are limited and there is a high percent of older adults. Despite the challenges in the community, many stakeholders have stated that it's a beautiful place to live. Transportation is the top access to care barrier as the public transportation system infrastructure is limited and most people need a reliable private vehicle to get around the community.

By expanding primary care capacity within the Greater Malone community, more community residents will have the opportunity to receive primary and preventive care closer to home helping to eliminate transportation challenges to accessing care. All stakeholders expressed that the new, larger Malone Family Health clinic will be a welcomed benefit to the community and will help improve the health of community residents and the community as a whole.

SECTION B: ASSESSMENT

For all questions in Section B, please include sources, data, and information referenced whenever possible. If the Independent Entity determines a question is not applicable to the project, write N/A and provide justification.

STEP 1 – SCOPING

- 1. Demographics of service area: Complete the “Scoping Table Sheets 1 and 2” in the document “HEIA Data Tables”. Refer to the Instructions for more guidance about what each Scoping Table Sheet requires.**

Please see the corresponding data tables in the Excel file.

- 2. Medically underserved groups in the service area: Please select the medically underserved groups in the service area that will be impacted by the project:**

Low-income people

- Racial and ethnic minorities
- Immigrants
- Women
- Lesbian, gay, bisexual, transgender, or other-than-cisgender people
- People with disabilities
- Older adults
- Persons living with a prevalent infectious disease or condition
- Persons living in rural areas
- People who are eligible for or receive public health benefits
- People who do not have third-party health coverage or have inadequate third-party health coverage
- Other people who are unable to obtain health care
- Not listed (specify):

3. For each medically underserved group (identified above), what source of information was used to determine the group would be impacted? What information or data was difficult to access or compile for the completion of the Health Equity Impact Assessment?

Publicly available demographic data was collected on each of the above medically underserved groups and augmented with qualitative and internal deidentified HHHN Malone patient data to determine which medically underserved groups will be impacted by the expansion of primary care in Malone.

The greater Malone region is primarily an older, White community with high levels of poverty. While certain zip codes have higher percentages of racial and ethnic minorities, overall, there is minimum diversity within the community. Data and information on immigrants, especially undocumented or migrant workers, lesbian, gay, bisexual, transgender, or other than cisgender people, and persons living with a prevalent infectious disease or condition were difficult to find due to lack of valid data source. There is often distrust within the medical and research community for those three underserved groups and thus when surveyed, those groups after often undercounted. However, it is likely these medically underserved groups live in the Malone service area, but the size of the group is unknown.

4. How does the project impact the unique health needs or quality of life of each medically underserved group (identified above)?

Primary and prevention care is paramount to positive health outcomes at an individual and community level. Through conversations with local providers and stakeholders, there is little primary care options within the Malone service area. Many residents drive to Plattsburg and Potsdam for primary care and dental, which is about a one-hour drive one way for residents. For specialty care, residents often need to drive even further to Burlington (Vermont), Syracuse, and Albany. Due to the distance community residents may need to drive for health care, transportation may be a major barrier for residents without reliable transportation as there is little public transportation infrastructure in Franklin County.

The existing Family Health at Malone clinic is a 2,660 square-foot leased space consisting of six exam rooms and additional support and administrative space. This location is the result of a thoughtful, coordinated approach between FQHCs and the local hospital to ensure patient needs are met, while respecting the resources and capacity of each organization. The site was selected to develop a short-term solution that addressed the immediate need for expanded access to primary care services in Malone. The proposed new, larger health center is intended to expand primary care access to meet the needs of up to 10,000 patients in the Malone region. The existing location will be vacated once the new facility is operational. For each of the medically underserved groups selected under Question 2, the new Malone Family Health clinic will increase the footprint of the facility allowing more patients to be seen during the day and ultimately annually. HHHN will be recruiting new providers to the Malone location, which will allow the clinic to accept new patients and reduce wait times for current or new patients.

Medically Underserved Groups	Impact on Unique Health Needs or Quality of Life
Low-income people	<p>The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.</p> <p>HHHN is a Federally Qualified Health Center (FQHC) that serves patients regardless of insurance status and the ability to pay. The Sliding Fee program offers Hudson Headwaters patients discounts for medical, dental and other services, in addition to the RX Assist program for financial support with ongoing prescription needs.</p>

Racial and ethnic minorities	The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.
Women	The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.
Lesbian, gay, bisexual, transgender, or other-than-gender people	The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.
People with disabilities	The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.
Older adults	The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.
Persons living in rural areas	The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early

	<p>chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.</p>
<p>People who are eligible for or receive public health benefits</p>	<p>The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.</p> <p>HHN is a Federally Qualified Health Center (FQHC) that serves patients regardless of insurance status and the ability to pay. The Sliding Fee program offers Hudson Headwaters patients discounts for medical, dental and other services, in addition to the RX Assist program for financial support with ongoing prescription needs.</p> <p>For individuals who do not have health insurance or are underinsured, HHHN contracts with Adirondack Health Institute's Enrollment Assistance Services and Education (EASE) program which provides free assistance in signing up for Medicaid, Child Health Plus, the Essential Plan, and other qualified plans available through the NY State of Health Marketplace.</p>
<p>People who do not have third-party health coverage or have inadequate third-party health coverage</p>	<p>The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.</p> <p>HHN is a Federally Qualified Health Center (FQHC) that serves patients regardless of insurance status and the ability to pay. The Sliding Fee program offers Hudson Headwaters patients discounts for medical, dental and other services, in addition to the RX Assist program for financial support with ongoing prescription needs.</p> <p>For individuals who do not have health insurance or are underinsured, HHHN contracts with Adirondack Health Institute's Enrollment Assistance Services and Education (EASE) program which provides free</p>

	assistance in signing up for Medicaid, Child Health Plus, the Essential Plan, and other qualified plans available through the NY State of Health Marketplace.
Other people who are unable to obtain health care	<p>The new expanded facility will provide primary and preventive care within the local community eliminating the need to travel over an hour for care. The expanded access to primary care will likely lead to an increase in preventive screenings, immunization rates, and early chronic disease diagnosis, which may result in decreased emergency department visits for preventable or inappropriate use of the emergency department at Alice Hyde and cost savings.</p> <p>HHHN is a Federally Qualified Health Center (FQHC) that serves patients regardless of insurance status and the ability to pay. The Sliding Fee program offers Hudson Headwaters patients discounts for medical, dental and other services, in addition to the RX Assist program for financial support with ongoing prescription needs.</p> <p>For individuals who do not have health insurance or are underinsured, HHHN contracts with Adirondack Health Institute's Enrollment Assistance Services and Education (EASE) program which provides free assistance in signing up for Medicaid, Child Health Plus, the Essential Plan, and other qualified plans available through the NY State of Health Marketplace.</p>

5. To what extent do the medically underserved groups (identified above) currently use the service(s) or care impacted by or as a result of the project? To what extent are the medically underserved groups (identified above) expected to use the service(s) or care impacted by or as a result of the project?

De-identified data from Hudson Headwater's Electronic Health Record (EHR) showed that 20.1% of its current patients in the Malone service area are 65 years or older. Additionally, of its current patient panel, 91.0% identify as White and only 3.1% identify as a minority race. Only 0.85% of patients identify as Hispanic or Latino. Disability status, socioeconomic status, and other factors are unknown based on data provided through the EHR.

Additional de-identified patient data was available on the health of patients in the Malone service area using the Charlson Comorbidity Index (CCI), which is used to determine survival rates (1 year and 10 year) in patients with multiple comorbidities. Approximately one in five (19.59%) patients have a medium CCI score and another one five (18.24%) have a severe CCI score indicating that about 40% of the patients

currently served in the Malone service area have multiple chronic diseases and have higher mortality rates.

Many of the current patients at the Family Health at Malone clinic would be classified as one or a few of the medically underserved groups and as the facility increases its capacity, the patient panel will continue to grow and likely include a proportionate growth of patients in each of the medically underserved groups.

6. What is the availability of similar services or care at other facilities in or near the Applicant's service area?

Alice Hyde has several primary care clinics offering similar services and care in the Greater Malone community. However, stakeholders said that many community residents seek primary care outside of the community due to limited providers and capacity within the Greater Malone community.

7. What are the historical and projected market shares of providers offering similar services or care in the Applicant's service area?

Zip Code Tabulation Area (ZCTA)	Health Centers Program(s) serving ZCTA	Patient Share 2022 (%)
12969	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	100
12914	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	100
12923	HUDSON HEADWATERS HEALTH NETWORK	69.23
	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	30.77
12934	HUDSON HEADWATERS HEALTH NETWORK	94.17
	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	5.83
12955	HUDSON HEADWATERS HEALTH NETWORK	77.55
	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	22.45
12966	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	88.07
	HUDSON HEADWATERS HEALTH NETWORK	11.93
12920	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	72.62
	HUDSON HEADWATERS HEALTH NETWORK	27.38
12917	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	84.08
	HUDSON HEADWATERS HEALTH NETWORK	15.92
12926	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	96.01
	HUDSON HEADWATERS HEALTH NETWORK	3.99
12930	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	57.41
	HUDSON HEADWATERS HEALTH NETWORK	42.59
12916	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	92.49
	HUDSON HEADWATERS HEALTH NETWORK	7.51
12953	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	91.34
	HUDSON HEADWATERS HEALTH NETWORK	8.66
12957	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	85.19
	HUDSON HEADWATERS HEALTH NETWORK	14.81
12937	UNITED CEREBRAL PALSY ASSOCIATION OF THE NORTH COUNTRY INC.	100

December 2023

- 8. Summarize the performance of the Applicant in meeting its obligations, if any, under Public Health Law § 2807-k (General Hospital Indigent Care Pool) and federal regulations requiring the provision of uncompensated care, community services, and/or access by minorities and people with disabilities to programs receiving federal financial assistance. Will these obligations be affected by implementation of the project? If yes, please describe.**

HHHN Malone Family Health is a FQHC and thus does not turn any patients or potential patients away for the inability to pay for services. The clinic accepts public health insurance, such as Medicaid, and offers private pay with a sliding scale based on a person's income. This will not change with the new facility.

Similar to uncompensated care, the new facility will continue to serve all patients and will not deny services based on a person's race, color, sex, age, national origin, disability, religion, gender identity, sexual orientation or ability to pay. This will not change with the new facility.

- 9. Are there any physician and professional staffing issues related to the project or any anticipated staffing issues that might result from implementation of project? If yes, please describe.**

Across the country, many hospitals and health centers are struggling with staffing as there are staff shortages, especially in primary care. In the 2023 State of Primary Care Workforce published, HRSA projects that there will be a shortage of 68,020 full-time equivalent primary care physicians by 2036 and will be particularly acute in nonmetro areas. The report also stated that an increasing amount of behavioral health gynecology services are now being provided by PCPs¹. Rural communities are struggling more than urban communities. With the new expanded facility, Malone Family Health will be hiring new providers and support staff. While HHHN has multiple partnerships with universities for recruiting new providers, HHHN recognizes that staffing may be challenging as it works to expand primary care access to the Greater Malone community.

- 10. Are there any civil rights access complaints against the Applicant? If yes, please describe.**

No, there are no civil rights access complaints against Family Health at Malone or Hudson Headwaters Health Network.

- 11. Has the Applicant undertaken similar projects/work in the last five years? If yes, describe the outcomes and how medically underserved group(s) were**

¹ HRSA. 2023 State of Primary Care Workforce. <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/state-of-primary-care-workforce-2023.pdf>

impacted as a result of the project. Explain why the applicant requires another investment in a similar project after recent investments in the past.

Yes, HHHN opened Glens Falls Family Health in November 2023. The new site offers a modern clinical training environment, along with close proximity to Women's Health, Pediatric and Adolescent Health, Glens Falls Hospital and a variety of community services that emphasize a broader public health and community-oriented approach. The new health center is an example of the latest collaboration between health care providers and community partners designed to meet the growing needs of patients, while investing in the medical education and training critical for a sustainable healthcare workforce.

HHHN has been actively working on additional primary care expansion plans for the region, including new health centers in Salem, Lake Placid and Plattsburgh.

HHHN is also working to expand access in Lake Placid, NY through a new primary care practice at Adirondack Health's Lake Placid Health Center. Hudson Headwaters Family Health at Lake Placid will utilize the recently closed Emergency Department of Adirondack Health to expand access to essential services and ensure high-quality primary care is available to patients in the region. Hudson Headwater's existing practices in Saranac Lake and Tupper Lake have grown from 2300 unique patients in 2020 to a combined total of 7,100 unique patients in 2022. This new location is an additional example of regional planning, partnerships and community investment to meet the needs of the region.

HHHN is working on primary care expansion in Plattsburgh by adding a second site to focus on pediatrics. The future health center is closely located to Hudson Headwaters Plattsburgh Family Health and will help address the pressing demand for access in the northern locations. In the past year, the existing Plattsburgh and Champlain health centers have accepted more than 6,300 new patients, the majority of which are children and adolescents. The new Plattsburgh Pediatrics and Adolescent Health is planned to be open in 2025.

Certificate of Need Applications (CONs) were submitted for the Glens Falls Family Health, Lake Placid and Plattsburg projects before the HEIA regulation implementation, therefore an assessment was not completed for these projects. However, as Federally Qualified Health Center (FQHC), limited resources and the mission of Hudson Headwaters ensures that the expansion of primary care capacity is focused on high need, medically underserved communities. The Salem project CON and HEIA has been approved by DOH.

STEP 2 – POTENTIAL IMPACTS

- 1. For each medically underserved group identified in Step 1 Question 2, describe how the project will:**
 - a. Improve access to services and health care**

- b. Improve health equity**
- c. Reduce health disparities**

Currently, there are limited primary care providers and services available in the Greater Malone community. Franklin County is a designated primary care shortage area by HRSA. By expanding the physical facility to include more exam rooms (from six exams currently to 15 exam rooms and one treatment room), Malone Family Health will be available to increase its patient volume significantly and see more patients within a day and annually. Many community residents are driving over an hour one-way for primary care in Potsdam and Plattsburg. By expanding primary care in Malone, community residents will be able to seek primary care within their local community removing the transportation barrier that some residents may experience. Additionally, community residents will save time and money from driving long distances and may seek care more regularly and reduce the delay of needed care and treatment thereby improving health outcomes. Improved access to primary care in the community may also result in patients initiating primary care sooner which enables timely interventions, regular preventive screening and testing, and more opportunity for ongoing monitoring of chronic diseases than if a community resident needs to drive long distances for testing and treatment. Improved access to primary care contributes to improved well-being, potentially mitigates the progression of health issues, and positively impacts ALL medically underserved groups identified in Step 1 Question 2.

Expanded primary care will also improve health equity, especially for people with low-incomes, uninsured people, and people receiving public benefits, such as Medicaid. Malone Family Health is a FQHC and will provide primary care to community residents regardless of their ability to pay. This removes the common access to care barrier of insurance type and/or ability to pay. Approximately one in three (32.91%) of its current patient panel is insured by Medicaid, one in four (24.93%) is insured by Medicare, and 40.46% is insured by commercial insurance.

The 2022 Franklin County Community Health Assessment² identified that “there are no significant health disparities or mortality statistics on race and ethnicity in Franklin County, [but] there continues to be limited access to care.” The lack of health disparities or mortality statistics on race and ethnicity is likely due to the small percentage of the population that identified as a race other than White. However, national peer reviewed research shows that race and ethnicity does impact health outcomes, such as higher rates of high blood pressure, heart disease, and more. Research also indicates that socioeconomic status also impacts health outcomes³.

² 2022 Franklin County Community Health Assessment.

https://cms8.revize.com/revize/franklincountyny/Document_Center/Human%20Service/Public%20Health/Community%20Health%20Assessments%20and%20Improvement%20Plans/Franklin%20County%202022.2024%20CHA.CHIP.CSP%20Final.pdf

³ Barakat C, Konstatindis T. A Review of the Relationship between Socioeconomic Status Change and Health.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10341459/>

Research shows that primary care is critical for improving population health and reducing health disparities. Therefore, addressing barriers to accessing primary care may help reduce disparities and reduce the risk of poor health outcomes. Despite the limited local data on health equity, we can conclude that expanded primary care will also reduce health disparities in the local Malone community by improving access to services, especially for people with low-income, uninsured, and those with Medicaid.

- 2. For each medically underserved group identified in Step 1 Question 2, describe any unintended positive and/or negative impacts to health equity that might occur as a result of the project.**

Due to the provider and support staff shortages that many healthcare centers and hospitals are experiencing, especially rural communities, it is possible that when the new expanded facility is opened, the demand for services may be greater than the facility's capacity at first due to the need recruit and adequately staff the larger facility. This may lead to longer wait times or limited ability to accept new patients until the clinic is fully staffed. However, HHHN has plans to mitigate this risk and the potential negative impacts on health equity. This could potentially impact all medically underserved groups identified in Step 1 Question 2.

- 3. How will the amount of indigent care, both free and below cost, change (if at all) if the project is implemented? Include the current amount of indigent care, both free and below cost, provided by the Applicant.**

Family Health at Malone currently provides services on a sliding scale or free depending on a patient's income. Currently only 1.57% of the patient panel is "self-pay." The clinic will continue to offer this care in the new facility.

- 4. Describe the access by public or private transportation, including Applicant-sponsored transportation services, to the Applicant's service(s) or care if the project is implemented.**

Franklin County provides limited public transportation services throughout Franklin County, including the Malone service area. The service provides fixed routes with route deviation and demand response services. There is a shuttle service within the Malone community that runs from 9:00 am to 5:30 pm on Monday through Friday with no weekend services. Additionally, there are some fixed routes to Lake Placid, Plattsburg, and other towns outside of the county. On demand services must be booked with at least 24 hours' notice.

While there is public transportation available in the Greater Malone community, the routes and hours of operation are limited meaning that most community residents are reliant on private vehicles to get to medical appointments, work, school, and more. Many stakeholders said that transportation is one of the biggest challenges in the community and access to health care.

With the new facility, more local residents will be able to obtain their primary care within their community eliminating the need to travel over an hour for care in larger cities. The new facility will be located on the Alice Hyde Medical Campus. The bus service offers a discount to seniors, those with disabilities, and students.

5. Describe the extent to which implementation of the project will reduce architectural barriers for people with mobility impairments.

The Americans with Disabilities Act (ADA) requires that all health care entities provide full and equal access for people with disabilities. The new facility will be designed to meet or exceed the 2010 ADA Standards for Accessible Design ensuring that people with mobility impairments to have access to accessible facilities providing the primary care they need in the community.

6. Describe how implementation of the project will impact the facility's delivery of maternal health care services and comprehensive reproductive health care services, as that term is used in Public Health Law § 2599-aa, including contraception, sterility procedures, and abortion. How will the project impact the availability and provision of reproductive and maternal health care services in the service area? How will the Applicant mitigate any potential disruptions in service availability?

The proposed project is not related to the provision of maternal health care services and comprehensive reproductive health care services; the purpose is to expand primary care access. However, providers such as Malone Family Health, can provide reproductive health care services that fall within the scope of primary care, such as cervical cancer screenings, thereby increasing access to preventive care for women in the community.

Due to factors such as declining birth rates, changes in the healthcare industry, staffing shortages, and community demographics, many rural critical access hospitals across the country have closed their birthing units as they don't have the volume to adequately maintain specialized obstetric care and maintain staff competencies.

The Malone community is no exception to this challenge. Within recent years, Alice Hyde Medical Center closed its birthing unit at the hospital due to a variety of reasons. This closure resulted in a lot of vocal concerns among community residents. Stakeholders interviewed commented that access to OBGYN and maternal health care services are more limited now in the community and many pregnant and post-partum women seek reproductive and maternal health care outside of the community.

Meaningful Engagement

7. List the local health department(s) located within the service area that will be impacted by the project.

Franklin County Public Health

8. Did the local health department(s) provide information for, or partner with, the Independent Entity for the HEIA of this project?

Yes, staff from Franklin County Public Health participated in a group interview to provide their insights on the Greater Malone community and provided data from their recent Community Health Assessment.

9. Meaningful engagement of stakeholders: Complete the “Meaningful Engagement” table in the document titled “HEIA Data Table”. Refer to the Instructions for more guidance.

Please see the table in the separate document for the required information.

10. Based on your findings and expertise, which stakeholders are most affected by the project? Has any group(s) representing these stakeholders expressed concern the project or offered relevant input?

All stakeholders and the organizations and/or populations they represent may be impacted by the project. Every stakeholder said that the proposed expanded Malone Family Health practice is a welcomed project in the community that will greatly improve access to primary care in the local community. No stakeholders expressed any concern over the project. Most stakeholders recognized that the new, larger facility will result in community residents not needing to travel long distance to seek primary care outside of the local community as many stakeholders recognized that transportation can be a major barrier for many people trying to access services.

11. How has the Independent Entity’s engagement of community members informed the Health Equity Impact Assessment about who will benefit as well as who will be burdened from the project?

The stakeholder engagement provided insights and opinions from local residents who work and live within the community and are also impacted by the current lack of primary care within the Greater Malone community. Stakeholders were able to voice their own personal stories as well as provide a voice for some of the identified medically underserved groups in the community. An interview guide was created with a series of questions asking stakeholders about their perceptions on current access to health care in the community, common barriers to access, health equity, and social determinants of health.

Most stakeholders recognized a service gap of primary in the community citing that many residents, including several of the stakeholders, need to drive to Potsdam and Plattsburg for primary care, dental, and specialty care as there is not enough providers in the local community. Transportation was reported as the top barrier, largely due to the need to drive long distances to access services. Additionally, Franklin County has a

large low socioeconomic status population and many households are struggling with meeting their basic needs.

All stakeholders expressed the positive benefits of the new facility, which will expand primary care in the community. No stakeholders identified any groups that will be burdened from the project.

12. Did any relevant stakeholders, especially those considered medically underserved, not participate in the meaningful engagement portion of the Health Equity Impact Assessment? If so, list.

The stakeholders who participated in the meaningful engagement represented a variety of organizations and roles in the community from the Malone Mayor to Alice Hyde to the local school district. Each of these organizations (see the Meaningful Engagement table) serve and represent almost all of the medically underserved groups.

However, limited data and insights was collected on the following medically underserved groups:

- Immigrants
- People living with prevalent infectious diseases or conditions

The above two medically underserved groups were difficult to find accurate and valid data sources due to the small population size in the community and that both groups are historically undercounted in census counts⁴ due to historic distrust.

STEP 3 – MITIGATION

- 1. If the project is implemented, how does the Applicant plan to foster effective communication about the resulting impact(s) to service or care availability to the following:**
 - a. People of limited English-speaking ability**
 - b. People with speech, hearing or visual impairments**
 - c. If the Applicant does not have plans to foster effective communication, what does the Independent Entity advise?**

As previously mentioned, there is very limited diversity in the greater Malone area with few people of limited English-speaking ability. However, as an FQHC, HHHN must accommodate patients who may have limited English proficiency, or a language-based disability or impairment. HHHN providers and staff have access to translators and interpreters through contracted InDemand Interpreting services available as needed to

⁴ US Census Bureau. Counting Every Voice: Understanding Hard-to-Count and Historically Undercounted Populations. <https://www.census.gov/newsroom/blogs/random-samplings/2023/10/understanding-undercounted-populations.html#:~:text=For%20example%2C%20according%20to%20the,Native%20population%20living%20on%20reservations.>

help assist people with limited or no English-speaking ability and people with speech, hearing or visual impairments.

2. What specific changes are suggested so the project better meets the needs of each medically underserved group (identified above)?

No additional changes are suggested as current processes are adequate for the community.

3. How can the Applicant engage and consult impacted stakeholders on forthcoming changes to the project?

As the project progresses, HHHN can continue to communicate with stakeholders and community members on the project status, new providers, and grand opening dates.

4. How does the project address systemic barriers to equitable access to services or care? If it does not, how can the project be modified?

Many community residents that live within the Malone Family Health service area currently seek primary care outside of the community, often driving over an hour one way to see their providers. Not everyone who lives in the community has access to reliable transportation through public transportation or a private vehicle. The lack of transportation coupled with the often harsh weather in the community, especially during the winter months, can make driving to medical appointments difficult.

By expanding primary care capacity through a larger facility and more providers, community residents who seek primary care outside of the Greater Malone community have the opportunity to switch their medical home to a local facility that will help eliminate transportation challenges for many residents. Additionally, Malone Family Health accepts all health insurances, including Medicaid, and uninsured individuals using a sliding scale based on income.

Malone Family Health will offer case management services to connect patients to local public transportation options and other services in the community to help their patient's overall health. The clinic collects social determinant of health (SDoH) indicators of patients during their visits that will help Malone Family Health, and Hudson Headwaters overall, address additional systemic barriers to equitable access to care.

STEP 4 – MONITORING

1. What are existing mechanisms and measures the Applicant already has in place that can be leveraged to monitor the potential impacts of the project?

HHHN uses a multi-pronged approach to monitoring potential impacts on the patient population, tracking gaps in patient care, access, and quality. Language, race, and

ethnicity is collected on all patients as well as social needs indicators. As part of their monitoring efforts, HHHN utilizes care management resources and related metrics to focus on patients who meet criteria such as:

- *High utilization of health resources*
- *Difficulty managing multiple chronic conditions*
- *Health related social needs and/or barriers*
- *At risk of hospital re-admission*
- *Need for targeted case management or care coordination*

HHHN uses evidence-based behavioral health screening tools, SDoH tools, and Health Related Social Needs screening tools and assesses embedded health equity quality measures built into the electronic health record systems and gathers additional data by conducting patient satisfaction surveys.

2. What new mechanisms or measures can be created or put in place by the Applicant to ensure that the Applicant addresses the findings of the HEIA?

None are recommended at this time.

STEP 5 – DISSEMINATION

The Applicant is required to publicly post the CON application and the HEIA on its website within one week of acknowledgement by the Department. The Department will also publicly post the CON application and the HEIA through NYSE-CON within one week of the filing.

HHHN intends to post the HEIA on the website as required.

OPTIONAL: Is there anything else you would like to add about the health equity impact of this project that is not found in the above answers? (250 words max)

----- SECTION BELOW TO BE COMPLETED BY THE APPLICANT -----

SECTION C. ACKNOWLEDGEMENT AND MITIGATION PLAN

Acknowledgment by the Applicant that the Health Equity Impact Assessment was reviewed by the facility leadership before submission to the Department. This section is to be completed by the Applicant, not the Independent Entity.

I. Acknowledgement

I, Hudson Headwaters Health Network, attest that I have reviewed the Health Equity Impact Assessment for the HHHN Malone Family Health that has been prepared by the Independent Entity, Crescendo Consulting Group.

Laura Pasco

Name

CFD

Title

Laura Pasco, CFD

Signature

5/10/2024

Date

II. Mitigation Plan

If the project is approved, how has or will the Applicant mitigate any potential negative impacts to medically underserved groups identified in the Health Equity Impact Assessment? (1000 words max)

Please note: this narrative must be made available to the public and posted conspicuously on the Applicant's website until a decision on the application has been made.

II Mitigation Plan

Hudson Headwaters Health Network's plan to construct a new health center in Malone, NY and expand access to primary care will have a positive impact on Malone and the surrounding Franklin County communities, including medically underserved populations residing in the region. As a Federally Qualified Health Center, our mission is to provide the best health care, and access to that care, for everyone in our communities. The data shows a need for additional primary care capacity in Franklin County which currently relies on a fragile system of care. The proposed project will help to expand access to primary care for families living in rural areas.

Hudson Headwaters currently operates 23 health centers across 7,400 square miles and is committed to expanding services and access throughout our primarily rural service area. All of Hudson Headwaters health centers have achieved the highest level of recognition as patient-centered medical homes (PCMHs) from the National Committee on Quality Assurance. In 2023, Hudson Headwaters also earned Community Health Quality Recognition (CHQR) badges from Health Resources and Services Administration (HRSA) including Health Center Quality Leader, Advancing HIIT for Quality, COVID-19 Public Health Champion, and Addressing Social Risk Factors. Our extensive experience in delivering high quality, patient-centered care will extend to the proposed health center in Salem.

Specifically, advanced primary care services will be offered in Malone, including family medicine, integrated behavioral health and care management. Our Sliding Fee program as well as partnership with Adirondack Health Institute's Enrollment Assistance Services and Education program will benefit our low-income patients and those who are eligible for or receive public health benefits. The Sliding Fee program offers Hudson Headwaters patients discounts for medical, dental and other services, in addition to the RX Assist program for financial support with ongoing prescription needs.

The proposed project will expand access to primary care services utilizing a team care model inclusive of physicians and advanced practice clinicians. All Hudson Headwaters staff, including providers, are required to complete an annual cultural competency training. Topics around diversity, equity and inclusion (DEI) are reinforced through internal communications as well as a library of courses offered through our internal learning management system. DEI is a core element of the Network's strategic plan, as the health and well-being of our employees, patients and community start with a foundation of inclusion, empathy and respect for each other.

Hudson Headwaters will continue to screen for social determinants of health and monitor data such as quality measures, visit attendance including children and adolescents served, health status, care management activities and referrals to community-based supports to assess the impact of services across our patient population. Hudson Headwaters will continue to offer translation services to patients and cultural competency training annually to all staff. In addition, Hudson Headwater's care management team will support patients by focusing on health-related social needs, such as housing, transportation, and other social drivers of health. Through ongoing relationships, our care management team helps patients better understand their conditions and medications while providing education and support in navigating the healthcare system and connecting with community resources to improve overall health and wellness. This patient-centered approach will help to ensure those traditionally underserved populations are supported, with focused efforts on outreach and support for the populations identified in this HEIA.

Hudson Headwaters has a history of working collaboratively with stakeholders across our service area and has proactively engaged with the Malone community in planning the proposed site. This is achieved through existing relationships with key leaders, service providers and healthcare partners, as well as a volunteer Board of Directors that fully represents the geographic region served by the Network. We will continue to leverage the insight provided through those established channels and will provide updates on the project to our partners and the Malone community. In addition, once the health center is operational, a formalized patient advisory council will be established to ensure ongoing feedback can be provided to Hudson Headwaters. Patients of the health center will also have the opportunity to provide feedback through our patient satisfaction survey administered following each visit.

As noted by the independent entity, health care organizations across the country are experiencing staffing challenges, particularly in rural areas. The proposed facility is a new construction project that is targeted for opening in the winter of 2026 and therefore allows for an adequate runway for Hudson Headwaters to plan and execute a strategy to recruit providers and staff needed to operate the facility. A primary strategy is to transition existing staff from our Family Health at Malone practice to the new, expanded facility. Additional strategies include offering competitive salaries and benefits to attract and retain providers and staff including tuition reimbursement programs, leveraging our residency program to attract new providers to the region, addressing burnout through wellness programs and stress-reduction supports, creating a collaborative work environment through a team-based model of care, building strong community relationships to increase job satisfaction and make staff feel valued and connected to the population they serve, and investing in technology solutions to streamline processes and improve efficiency. Together these strategies will support the expansion of primary care services in the region and ensure medically underserved populations have access to care.

As a Federally Qualified Health Center, Hudson Headwaters is required to regularly assess the needs of the community. Hudson Headwaters is committed to expanding access to address unmet needs and is looking forward to developing future partnerships in the Malone community to best meet the needs of our patients.