STATEMENT

Despite upstate New York's lack of rural health care access, Josh Riley joined with extremists in the Democrat party to vote against a $50 billion investment in rural health care.

Verification

An August 2025 Report Found That Rural Parts Of New York Faced "A Significant Shortfall In Health Professions." "Some rural parts of New York state have a significant shortfall in health professions, including primary care, pediatric, and obstetrician and gynecologist (OBGYN) doctors, dentists and mental health practitioners, according to a new report released Thursday by state Comptroller Tom DiNapoli. The shortage of mental health practitioners in New York's rural counties may be the most severe, with all counties designated by the federal government as areas having professional shortages. The rural counties examined were Allegany, Cattaraugus, Chenango, Delaware, Essex, Franklin, Greene, Hamilton, Herkimer, Lewis, Schuyler, Steuben, Sullivan, Washington, Wyoming and Yates." (Luke Parsnow, "Rural New York Counties Face Shortage Of Health Professionals, Comptroller's Report Says," Spectrum News 1, 8/7/25)

On May 22, 2025, Riley Voted Against H.R. 1, The One Big Beautiful Bill Act. "Passage of the bill that would provide for approximately $3.8 trillion in net tax cuts and $321 billion in military, border enforcement and judiciary spending, offset by $1.5 trillion in spending reductions, as instructed in the fiscal 2025 budget resolution (H Con Res 14). It would raise the statutory debt limit by $4 trillion and provide for increased spending on defense and border security, spending cuts on social safety net programs, such as Medicaid and the Supplemental Nutrition Assistance Program. It also includes a mix of tax breaks for businesses and individuals; tax increases on universities and foundations; and a phase-down of clean energy tax credits. It would reduce spending on Medicaid by $625 billion over a 10-year period and modify eligibility and cost provisions for enrollees and health providers and impose work, volunteer and education requirements on adults ages 19 to 64 who are covered by the program. It would appropriate 'such sums as necessary' for reducing cost-sharing payments for low-income individuals who've purchased 'silver' plans on the 2010 health care law's exchanges. But payments to plans that cover abortions would be mostly barred. It would extend and make permanent individual tax brackets and rates included in the 2017 tax overhaul law (PL 115-97) and provide for the adjustment of the lower bounds of each tier based on inflation. It would reduce federal spending on the Supplemental Nutrition Assistance Program by requiring states to shoulder more of the cost, expand work requirements for SNAP, extend programs authorized under the 2018 farm bill, and prohibit the U.S. Department of Agriculture from increasing the cost of the Thrifty Food Program. As amended, it would cap state and local tax deductions at $40,000 for households with incomes below $500,000 and prohibit Medicaid funding for gender transition therapies or procedures for minors and adults, among other provisions." (H.R. 1, Roll Call #145, Passed: 215-214-1-2; R:215-2-1; D:0-212; Riley Voted Nay, 5/22/25; CQ, Accessed: 6/10/25)

All Democrats Voted Against The One Big Beautiful Bill (H.R. 1, Roll Call #145, Passed: 215-214-1-2; R:215-2-1; D:0-212; All Democrats Voted Nay, 5/22/25)

The One Big Beautiful Bill Enacted The Rural Health Transformation Program (RHT). "The Rural Health Transformation (RHT) Program was authorized by the One Big Beautiful Bill Act (Section 71401 of Public Law 119-21) and empowers states to strengthen rural communities across America by improving healthcare access, quality, and outcomes by transforming the healthcare delivery ecosystem. Through innovative system-wide change, the RHT Program invests in the rural healthcare delivery ecosystem for future generations." (Rural Health Transformation (RHT) Program, Centers for Medicare & Medicaid Services, 7/8/26)

The RHT Program Allocated $50 Billion In Rural Health Care Funding. "RHT Program funding is $50 billion to be allocated to approved States over five fiscal years, with $10 billion of funding available each fiscal year, beginning in fiscal year 2026 and ending in fiscal year 2030." (Rural Health Transformation (RHT) Program, Centers for Medicare & Medicaid Services, 7/8/26)