Message Points – Community Health Center 4th Stimulus Package

A Strong Public Health System Requires A Strong System of Community Health Centers

The Centers in my district are being overwhelmed by the COVID-19 crisis.
*Access to PPE and testing kits are not in the jurisdiction of Congress and are, therefore, not included in the talking points related to this 4th stimulus package

Three parts of this request:
- Immediate and emergency funding in order to keep our doors open. This is NOT an exaggeration.
- Ensure long-term stable funding for community Health Centers and critical workforce needs as well as long-overdue infrastructure investment.
- Statutory changes to ensure best practices and reimbursement for services.

1) COVID-19 EMERGENCY: $7.6 BILLION OVER 6 MONTHS
- Address health center revenue losses and enable them to stay open to continue providing preventive care and keep chronically ill patients out of emergency rooms.
- Enable health centers to detect, prevent and diagnose COVID-19 to alleviate pressure on hospitals.

2) STABILIZE CURRENT SERVICES AND EXPAND CARE TO 10 MILLION PATIENTS: $41.9 BILLION OVER 5 YEARS
- CHCs will be critical in the recovery from the COVID-19 pandemic with an increased number of unemployed and uninsured community members and an increased demand for essential primary care services.
- Health centers need long-term financial stability to maintain current services, recruit and hire providers, and plan and deliver reliable, quality services.
- Managed growth of health center capacity will allow expansion of services to additional medically underserved patients in high need areas, in response to the COVID-19 aftermath and provide services to ALL regardless of ability to pay.

3) CRITICAL EXPANSION OF WORKFORCE PROGRAMS TO ADDRESS SHORTFALL: $7.8 BILLION OVER 5 YEARS
   National Health Service Corps Loan Repayment Program: $6 Billion over 5 years
   Teaching Health Centers GME Program: $0.931 Billion over 5 years
   Nurse Corps Loan Repayment Program: $0.87 Billion over 5 years
- Federal government data projects a national shortfall of up to 160,000 physicians and one million nurses by 2025.
• Expanding these proven workforce programs will bring providers to practice in medically underserved communities and help address the primary care shortage.
• Estimate: additional 50,000 clinicians in health centers.

4) CRUCIAL INFRASTRUCTURE INVESTMENT: $20 BILLION OVER 5 YEARS OR UNTIL EXPENDED
• Health centers must plan, prepare and position for future emergencies among their 12,000 urban and rural communities beyond the COVID-19 crisis.
• Funding is needed to address the critical facility needs, as well as, acquisition and upgrades of needed equipment and technology to develop integrated systems of care, including data tracking and sharing, virtual/telehealth visits, and other collaborative efforts to cut costs and improve care.

OTHER CRITICAL NEEDS:
• Telehealth
  o The Cares Act gave health centers limited reimbursement for providing telehealth services to Medicare patients in their homes; however, the rates are insufficient.
  o Statutory changes are needed to ensure that payment is consistent with current Medicare and Medicaid statute and policy.
  o Bill language will be provided.

• 340B
  o Protect health centers’ ability to retain 340B savings on drugs dispensed to Medicaid Managed Care patients consistent with current statute.
  o Bill language will be provided.