



Community Health Centers have a clear and defined mission as the first line of defense against COVID-19.

- More than 95 percent of Community Health Centers have the ability to test for the virus.
- Throughout the nation, health centers have launched drive-thru and curbside testing sites, delivering more than 160,000 COVID-19 tests per week.
- Health centers can care for individuals who are not sick enough to require emergency care, reducing the demands — both clinical and financial — on hospitals and emergency departments.
- Health centers have adapted quickly, expanding telemedicine capabilities to safely screen patients and provide care.
- When non-acute patients test positive for COVID-19, health centers can connect them to affordable primary care and support services, including housing and food assistance.
- As trusted community resources, health centers have long-standing relationships with patients and are counted on to provide accurate information and guidelines about staying safe and protecting others during a pandemic.
- Health centers are fighting the racial disparities laid bare by COVID-19. *The New England Journal of Medicine* recently noted that in caring for the Black and Brown communities disproportionately affected by the virus, health centers are “providing life-saving surveillance and mitigating the profound inequalities of our COVID response.”

With unemployment at record highs, Community Health Centers will be critical to bridging care gaps for newly uninsured individuals.

- As millions of people lose jobs, they are also losing their employer-sponsored health insurance and will turn to health centers for essential health care.
- Health centers are often the main source of primary and preventive care in their communities. If they do not receive the funding they need, they will be forced to lay off staff, keep sites closed, and reduce services. As a result, there will be fewer options for affordable primary care services in thousands of communities, which will lead to poorer overall health for families and increased health care costs for everyone.
- Access to primary care at a health center is especially critical to rural communities across the U.S., places where we now know a virus can quickly and easily spread out of control, exacerbated by hospital closures and a long travel distance between providers.

Community Health Centers are fiscally responsible and accountable with taxpayer dollars.

- Health centers have a long-standing record of transparency. They are required to report how they efficiently use federal and state taxpayer dollars to prevent disease and illnesses in hard-hit communities.
- Health centers collect and report data every week to document how they are responsibly spending federal dollars and mitigating the spread of COVID-19 through testing and caring for non-acute patients.
- Health centers are transparent as lean nonprofit and public organizations and work hard to ensure the federal funds maximize patient care and services.

Healthy people drive a healthy economy.

- Health centers care for nearly 30 million people nationwide, many of whom are essential workers in our food, agriculture, service industries, and other necessary frontline jobs.
- Health centers save the health care system \$24 billion annually by managing chronic health conditions and helping people avoid a hospital visit.
- Politicians nationwide have been talking about why it's essential to restart the economy. What better way than to fund Community Health Centers?

Community Health Centers need a secure path toward sustainability to do the job that the federal government has tasked them to do.

Health centers need:

- \$7.6 billion in additional emergency Covid-19 funding to ensure health centers have the resources they need to keep their doors open and continue to care for the community during this pandemic;
- \$41.9 billion over five years of mandatory federal funding to provide long-term stability for health centers and to support and expand primary care access to up to 10 million more underserved patients;
- \$20 billion over five years to support critical infrastructure investments, enabling centers to make needed upgrades to existing facilities and adjust to the changing Covid-19 requirements;
- \$7.8 billion over five years to support the critical expansion of workforce programs to address the growing shortfall of our nation's primary care health care workers;
- Crucial expansion of the temporary authority to allow health centers to utilize telehealth beyond the pandemic and provide appropriate payment for these services;
- Provide Paycheck Protection Program (PPP) access to health centers with over 500 employees;
- Provide Health Center Look-Alikes (LAL) access to emergency Covid-19 funding;
- Preserve original statutory intent for the 340B Drug Program so that savings continue to flow directly to the patients and to health center re-investment funding; and,
- Extension of the Public Health Emergency for as long as the pandemic continues to impact our communities.

Community Health Centers stand ready to fight the long game against COVID.

- Health centers have more than 50,000 nurses, medical assistants, and outreach staff to administer the COVID-19 vaccine when it becomes available.
- As a trusted community health resource, health centers have long-standing relationships on the ground with patients and the broader community – and are counted on to provide accurate information and guidelines about staying safe and protecting others during a pandemic.

A strong community-based primary care foundation is essential for the next pandemic.

- Our best defense against the next pandemic is a strong public health system that is robust, well-financed, and adaptive. Health centers are integral to deploying response strategies against epidemics and disasters and bringing a proud legacy working in partnership with local, state, and federal authorities.
- Health centers anticipate ongoing cycles of shocks to the health care system as growing numbers of families who have lost employer-sponsored insurance due to economic conditions still need access to affordable care.