

New Health Landscape Action Plan

Communication Format

- RAC calls with CPG / GA (bi-monthly)
- Weekly Wednesday calls
- Thursday advocacy email blasts
- Thursday Weekly Update- NEW SECTION?
- Website/ Social Media

Goal: Communicate what is happening and what the plan is

MESSAGE: The election results have changed the trajectory of our work plans and may have altered how to prioritize our work. There remains much unknown about what the Trump Administration will do once in office and specifically with health care. We do know that he has promised to repeal and replace the ACA, and has suggested Medicaid block grants are a better way to manage the Medicaid program. How exactly each policy would be enacted is unknown. Each policy however has deep resonant impacts on California, and CPCA and Advocates' work. Right now we are researching, learning, and establishing connections with our partners ultimately to build the plan for the future. The election changes the work, but it doesn't stop it. And change, especially unknown change offers opportunity and we are reviewing all the options to determine the best opportunities for clinics, health centers, and our communities.

- Communication
 - Develop website for members with resources- Ben Avey
 - Carmela emails
 - Talking Points
 - Research
 - Messages for committees/wg/pns.....
 - Fact Sheets
 - Advocacy material
 - Keep cadre of material on RAC page- Heather Wright
 - Day after election
 - Carmela message- stand with you
 - Week of Nov 14
 - Carmela message with more clarity on implications
 - Media talking points
 - Week of Nov 21 communication to members
 - Provide members with short summary of Trump positions/ Ryan Proposal/ Gov Brown per capita cap – Victor Christy
 - Message for patients with immigration resource guide- Ben/ Liz
- Research
 - PPS rates- Jeanita Harris
 - Block grants/ Per capita cap- Deb Roth
 - For our planning and eventually to share with members
 - Medicaid- Deb Roth
 - FQHC portion in CA

- What is required?
- Advocacy
 - Key Contacts
 - Clean up sheet/ reconcile with NACHC – Victor Christy/ Ben Avey
 - Circulate to RAC
 - Line up members with republican leaders
 - Public Affairs Peer Network- nov 30 call- will be key contacts

Goal: Pause and slow down repeal/replace ACA and blowing up Medicaid.

MESSAGE: The Affordable Care Act has strengthened, enhanced, and begun to modernize the health care system in America. We need to keep the building blocks of a program that has afforded new health care coverage to over 20 million Americans. This includes securing funding to community health centers that are the bedrock of Medicaid and the health home for almost 25 million people across the country. Without Medicaid and without health centers the country will lose one of the highest quality low cost choices on the market.

- Focus
 - ACA
 - Medicaid
 - Health Center Program
 - California angle??
- Research
 - Ask CHCF to update their recent ACA/clinics analysis—Andie
 - Include RHCs and any other safety net providers not listed
 - Include economic implications for dropping all of ACA expansion and covered CA
 - Impact on the counties / indigent populations
 - CPCA pull together reports produced and compile a value analysis that includes- Meghan Noussaine
 - CA FQHCs and Medicaid
 - People covered by Medi-Cal
 - Cost savings of Medi-Cal
- Communication
 - Place op-eds/ LTE throughout the state about the risk of what could happen and the positives of what we have--- Ben Avey
 - CPCA develop the framework- positives of what we have/ risks of block grants/per capita cap
 - CPCA work with members to place
 - Develop 1 pager for members to use- Medicaid and unintended consequences- Deb Roth/Meaghan McCamman
 - Explain what Medicaid means to CA
 - Explain what FQHC means to Medicaid
 - The web is tangled

- Develop talking points for media- Ben
 - Write to Kamala Harris- introduce FQHCs and ACA/ 330 program-
- Advocacy
 - Develop state/federal impact analysis (for legislators) (CPCA develop template)—ask Cap Link to do it statewide....
 - Impact of ACA expansion
 - Impact of 330 Grant
 - Value of Health center in the community (jobs etc)
 - Provide rubric for health centers to do impact analysis
 - Impact of ACA expansion
 - Impact of 330 Grant
 - Value of Health center in the community (jobs etc)
 - Patient stories
 - Week of Nov 28
 - Letter template (state/ congressional) for health centers to submit to representatives
 - Include impact analysis
 - Have members schedule district meetings
 - Dec 5
 - Member webinar to include political analysis/ advocacy strategy
 - Have members schedule district meetings
 - State Profile
 - District Profile
 - Impact Analysis
 - Patient Stories
 - Identify key R and Connect with key contacts in our members
 - Support the member in the conversations
 - McCarthy
 - Nunez
 - Coalition
 - Participate in HealthAccess save ACA coalition
 - Local coalitions
 - Form coalitions to evaluate potential impact
 - Determine priorities
- Scenario planning
 - Workforce
 - Expansions

Goal: Influence ultimate plan

ASK: The Medicaid program ensures a cadre of benefits, protections, and options for Americans. The federal government must ensure that block grants and state flexibility are predicated on a basic level of practical safeguards. Any state that receives a block grant must commit to basic health benefits that

includes FQHC covered services. Health centers in California provide primary care, behavioral health, and oral health care to over 6 million individuals

- Research
 - Federal
 - Determine if the FQHC covered benefit could be altered
 - Determine how PPS/ APM would work
 - Review CA regulation/ SPA on FQHC and PPS
 - Determine if that benefit could be altered
 - Determine how PPS/ APM would work
 - Review NAMD proposal and juxtapose with APM for CA APM - AP
- Coalition
 - Continue to engage w. Hernandez
 - Waxman
 - Determine CA's must have's in our Medi-Cal Program