

To:	Health Center Partners CEOs
From:	Vernita Todd, SVP External Affairs
CC:	Henry N. Tuttle, CEO
Date:	4/8/2016
Re:	Policy & Issues Executive Summary

NACHC's annual Policy & Issues Forum March 16-20 in Washington, DC.

Health Center Staff and Board Members gathered to network during the conference and to carry a strong message to our elected officials on Capitol Hill. Our Health Center Partners 2016 Delegation included members from Borrego Community Health Foundation, Community Health Systems, Inc., Mountain Health, Neighborhood Healthcare and San Ysidro Health Center along with Health Center Partners staff.

The HCP Delegation was able to schedule meetings with all 8 Congressional offices. Faceto-face meetings were held with Congressman Raul Ruiz (D36), Congressman Duncan Hunter (D50), Congressman Scott Peters (D52) and Congresswoman Susan Davis (D53) who was presented the 2016 Community Health Defender Award for her general support of health centers and specific support of HR 2. Senator visits were coordinated by CPCA and were by invitation only.

Issues Presented to Legislators focused on 3 themes: Access, Workforce & Integration

ACCESS

Health Centers requested \$1.5 Billion dollars in discretionary funding to match the already approved \$3.6 Billion dollars from HR2 (The Doc Fix). This is level funding from FY 2015 and likely to be the same net ask for FY 2017 as well. Mandatory funding from the ACA expires on 9/30/2017 so we must build a case for funding beyond that period. **Health Center Partners** is negotiating with NACHC to bring the Nation Builder and Phone2Action platforms in-house to aid in building our advocate base. Stay tuned for ways your health center can encourage staff and patients to become Health Center Advocates.

WORKFORCE

The national provider shortage is hitting health centers hard. In our membership alone, we know that you are trying to fill at least 60 physician vacancies! Nationwide, the need is also staggering. A recent NACHC report indicates more than 2 million additional patients could be served if health center vacancies were filled. The

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NACHC Workforce Report is included in the attachments to this Executive Summary. We are keenly aware that increasing the number of patients seen while claiming there aren't enough providers could make Legislators take pause, so our goal was to offer ways they could help.

The request made to Members of Congress was Funding for programs that help attract physicians to health centers like the National Health Service Corps Loan Repayment Program. Funding for Teaching Health Centers is also a strategy to grow the physician pool for health centers. Area Health Education Centers (AHECs) are another way to start creating a pipeline of potential health center providers. Lastly, making FTCA coverage available for volunteer physicians was also posed as an option.

INTEGRATION

While NACHC chose to focus on INNOVATION, California health centers chose instead to talk about INTEGRATION and the need for federal language to require states to reimburse providers for same-day medical and mental health visits. Being able to provide services when the patient identifies the need is what we are supposed to do as patient centered medical homes – so that's what health centers do even if it is at a loss. More than 30 states allow this including Texas and Florida. There are bills floating in both the House and Senate. All versions include significant cost items that are causing issues with the Legislators. *We are awaiting an update from NACHC on the status of these bills. Stay tuned.*

 HOUSE:
 H.R. 2646, the Helping Families in Mental Health Crisis Act (Rep. Tim Murphy, R-PA)

 H.R. 4435 – Comprehensive Behavioral Health Reform and Recovery Act (Rep.

Gene Green)

SENATE: Mental Health Reform Act of 2016 (Alexander, Murray, Cassidy, Murphy)

Legislative Visits Details – March 17, 2016

Visits were scheduled with the 8 Legislators representing our Membership sites. Each meeting discussed the three themes and included a request for Members to join the CHC Caucus and to sign on to the Bilirakis-Green Dear Colleague letter circulating in support of CHCs.

Congressman Raul Ruiz (D36) met with the delegation and supported health centers by signing on to the *Dear Colleague* letter. Ruiz encouraged health centers to take advantage of his Future Physician Leaders (FPL) program – The Future Physician Leaders (FPL) program is a long-term summer mentorship program for prospective medical students who also want to fulfill a mission of service to the community. Find out more <u>here</u>.



Congressman Duncan Hunter (D50) met with the delegation while thoroughly enjoying St. Patrick's Day. Hunter agreed to join the Health Center Caucus but declined signing the *Dear Colleague letter.* He was adamant about helping health centers forge relationships with area VA organizations so keep this in mind if you run into snags. *Contact his Legislative Aide, Reed Linsk <u>reed.linsk@mail.house.gov</u>*

Congressman Scott Peters (D52) met with the delegation and had already signed on to the *Dear Colleague* letter prior to our visit.

Congresswoman Susan Davis (D53) met with the delegation and also had signed the *Dear Colleague* letter prior to our visit. Davis had keen interest in our request for same day mental health and medical visits. Her previous work on mental health parity makes her a possible champion for this cause.

Congressmen Juan Vargas (D51) and Mark Takano (D41) were unable to make the visits but showed support for health centers by signing on to the *Dear Colleague* letter. Takano's staff made a point that we should bring innovative workforce solutions to his attention.

Congressmen Ken Calvert (D42) and Congressman Darrell Issa (D49) were unable to make the visits and declined signing the *Dear Colleague* letter. Issa is a member of the CHC Caucus and his staff was particularly interested in whether other large states permitted same day mental health and medical visits. The NACHC PPS/Same Day Visit Report from 2015, available in the attachments, indicates that the 2 largest states in the country (NY, CA) do not reimburse for same day mental health and medical visits while Texas and Florida do. This was shared with his staffer.

Senators Dianne Feinstein and Barbara Boxer both signed on to the *Dear Colleague* letter circulating in the Senate. Neither Senator was available for a face-to-face meeting, but Boxer did agree to a group photo op with the entire California delegation present.

All Members of Congress were asked to please consider visiting a health center in their district during the August recess. *Wouldn't Community Health Center Week (Aug 7-13) be perfect?* Let's try to get as many as possible to a health center event this year. Let them see the great work that happens at our centers and for the nearly 800,000 patients served by the Membership!

NACHC reports (Workforce Summary & PPS/Same Day Visit Report), along with all the P&I materials will be available on the legislative page of the Health Center Partners website: <u>Policy & Issues 2016</u>



HRSA Update

Acting Bureau of Primary Health Care Administrator, Tonya Bowers, was on hand to share the HRSA update and funding opportunities coming in FY 2016.

HRSA Strategic Goals

- Improve access to quality health care and services
- Strengthen the Health Workforce
- Build Healthy Communities
- Improve Health Equity
- Strengthen HRSA Program Management and Operations

Upcoming Funding Opportunities

Health Infrastructure Investment Program \$265M

It's back again for those of you who submitted applications in 2015 but who were not funded. Another *290* awards will be made in the coming months so it's time to dust off those Capitol Proposals.

FY 2016 HRSA funding continued:

Delivery System Health Information Investment - \$90M

This is new funding aimed at helping you make technology improvements. HRSA encourages you to think of needs moving into the future as this will be one-time formula based funding open to all FQHCs.

• Quality Improvement Awards \$100M

This will be the 3rd year in a row for Quality Improvement awards but the methodology for how awards are determined will be changing again. All FQHCs are eligible for these formula based awards to be granted near the end of the summer once HRSA has time to review 2015 UDS data.

• PCMH for New Grantees \$10M only for FQHCs funded since 2011

In an effort to assist New Grantees in building their respective PCMH capacities, this one-time funding is being made available, as it was to existing FQHCs in the last couple of years.

• New Access Points (NAP) - \$50M

Yes, there will be New Access Point opportunities in the near future. In anticipation of continued funding, HRSA will open a NAP competition to fund 75 new sites in 2016, but won't make awards until the 2017 Fiscal Year (which begins October 1).

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Grants will be announced in the BPHC Digest. You can even set up alerts for a particular type of grant funding. Subscribe Here and share with your team so you can <u>all</u> be in the know!

HELP US to HELP YOU!

Please be sure to let **Health Center Partners** know when you apply for HRSA funding so we can share that information with the Bureau when the opportunity arises. This past week at the Symposium in Orange County, our CEO was able to spend time discussing Member health centers directly with BPHC Administrator, Tonya Bowers. We anticipate having time with her again at the PCA/HCCN Conference in November, so please share!

In Other News

You can spotlight the work of an exceptional board member, staff member or colleague by nominating them for a NACHC Award of Excellence! Check out the descriptions for the awards here: <u>NACHC Awards 2016</u>

The National Association of Community Health Centers is accepting nominations through April 29, 2016 for the 2016 NACHC Community Health Care Awards of Excellence. Awards are presented at the NACHC Annual Community Health Institute, August 25-30, 2016 in Chicago, IL. To submit a nomination, visit their website at <u>www.nachc.com</u> and click on the Awards of Excellence button on the home page.

Respectfully submitted,