



## Health Policy Stakeholder Meeting Template

In order to accurately capture and understand your organization's priorities for health care reform and other health care policy issues, we ask that you briefly detail your priorities as follows:

- Health policy priorities/goals in the short term
  - Expanding the State Children's Health Insurance Program (SCHIP) to cover more low-income children (and hopefully their parents).
  - Investing in Community Health Center (CHC) **operations, workforce and capital development** as part of an economic stimulus package.
  - Funding CHCs at the authorized level of **\$2.602 billion** and the National Health Service Corps at **\$235 million** in the FY10 Budget.
  - Aligning **CHC payments** under the **SCHIP** and **Medicare** programs with current Medicaid Prospective Payment System (PPS for FQHCs).
  
- Health policy priorities/goals in the long term
  - Broad expansion of affordable, adequate health insurance coverage to the uninsured, including strengthening of both **Medicaid** and **SCHIP**.
  - **ACCESS For All America:** Health Centers' **ACCESS For All America Plan** is a long-term strategic vision to bring access to affordable, high-quality primary and preventive care to all who need it. The plan calls for a targeted expansion of primary care access through CHCs that would complement any expansion of insurance, and aims to serve **30 million** people in CHCs by the year 2015.
  - **A 21<sup>st</sup> Century Primary Care Workforce:** CHCs also must have the **workforce** to deliver care to those in need. Through **payment** reform, expanded primary care **capacity**, and improved **training** mechanisms, the U.S. can strengthen our primary care workforce and lower costs, expand access and improve quality of care.
  - **A New Paradigm for Capital Financing:** Investing in the infrastructure of the CHC system of care – through access to low-cost debt, improvements to loan guarantee programs, and leveraging other sources of direct funding – will give CHCs the space, information technology and capacity they need to serve additional millions of patients.



- The mechanisms for achieving the goal (i.e., executive order, regulation, guidelines, policy change or legislation)
  - Short-term priorities listed above are primarily **legislative** – both through improvements to existing law, payment and coverage reforms under public insurance programs, and ongoing support through budget and appropriations.
  - In addition, a number of high-priority regulatory policy issues – primarily at CMS and HRSA – are detailed in the attached memo.
  
- Any budgetary or appropriations concerns or impact
  - In 2008, Congress unanimously passed and President Bush signed into law the Health Care Safety Net Act of 2008 (H.R. 1343, P.L. 110-355). This legislation contained **specific authorized amounts** for the Community Health Centers and National Health Service Corps programs and represented a call for major growth in both cases.
  - For FY10, the legislation calls for **\$2.602 billion** for the Community Health Centers program. It calls for **\$156.2 million** for Scholarships and Loan Repayments through the NHSC (recruitment line). NACHC is requesting \$235 million in total program funding (recruitment and field lines).
  - In addition to funds for expansion, the President's budget should call for funding regular grant adjustments to existing CHCs, allowing them to keep up with rising demand and increased costs of care.
  - Demand remains high for additional appropriations: in FY08, 1,065 applications for new funds were submitted, and only 222 were awarded.
  
- Any other HHS related issue
  - CMS and HRSA regulatory issues addressed in attached memo.
  - Specific program management recommendations available upon request.