



The Political Landscape in Washington and the Implications for Health Centers

John Sawyer, Director of Federal Affairs
National Association of Community Health Centers

Region IX Clinical Excellence Conference
June 5th, 2017

Today's Agenda

- 1. The Political Environment in Washington**
- 2. Federal Legislative and Regulatory Updates**
- 3. Advocacy Resources and Action Steps**

The Political Environment in Washington



very loud, lots of movement, very little strategy, minimal execution of goals

Challenges and Opportunities

CHALLENGES/WEAKNESSES

- Systemic Dysfunction
- Competing Priorities in Different Debates
- Need Congress to Act – Cliff, Workforce Issues, Marketplace
- Need Congress to Spend Money
- Hard to Play Offense in 2017

OPPORTUNITIES/STRENGTHS

- Bipartisan Support
- Local Connections
- Proven Track Record – savings, cost-effectiveness, quality
- Need to Stop Congress from Acting – Medicaid Changes, AHCA
- Playing Defense Breeds Good Coalitions

Legislative Priorities

MEDICAID

CHC GRANTS

WORKFORCE

340B

HIGHEST PRIORITY

- Foundational to entire system – the **two pillars** that hold up every community health center
- Unique policy to CHCs
- NACHC is central player

HIGH PRIORITY

- Enormously important to CHCs' viability, sustainability
- Debate will happen *within* or *alongside* other debates
- NACHC leading coalition efforts

Health Center Funding

Discretionary/Appropriations

FY17:

- Omnibus passage May 4
- Health Centers funded at level \$1.5b
- Includes carveouts: \$50m MH, \$50m opioids – we'll be watching HRSA action

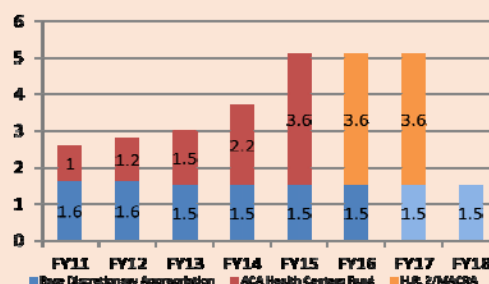
FY18:

- Bilirakis-Green Letter – 290 cosigners
- Wicker-Stabenow Letter – 61 cosigners
- Trump full budget expected May 23

Our ask:

- at least level funding, \$1.5b, plus Cliff Fix is needed before 9/30

Mandatory/Health Centers Fund/Cliff



- CHC Fund Extension from MACRA expires 9/30
- NHSC and THCGME (also CHIP, MIECHV, DSH, more) expire at the same time.
- Working on "extenders" package
- Goal is at least 5 years, risk is shorter-term, esp. given possible collision with AHCA

President Trump's FY18 Budget



A Very Mixed Bag for Health Centers:

- First step in FY18 budget process...long way to go
- Would fix the Health Center Funding Cliff, extending CHC, NHSC and THCGME funding through 2019
- Limits federal contributions to state Medicaid programs
 - Cuts at least \$610 billion over ten years
- Provides \$9.9 Billion for HRSA in FY18
 - Cuts \$459.9 Million from FY17 budget
- Strong focus on program integrity of 340B Program
 - Price verification and better technology

THE HEALTH CENTER WORKFORCE

Two critical programs set to expire this year if Congress doesn't act:

NHSC

National Health Service Corps

- 54% of NHSC Clinicians nationwide practice in health centers
- Like CHCs, was extended for 2 years in MACRA – current funding is \$310m annually
- Demand far outstrips supply – HPSA Scores tied to total funding amount



THCGME

Teaching Health Centers Graduate Medical Education

- Program is currently underfunded - \$60m annually
- Residents trained in THCGME sites are much more likely to stay and practice in underserved areas.
- NACHC working closely with AATHC, AAFP, AOA, AACOM, others on reauthorization, growth

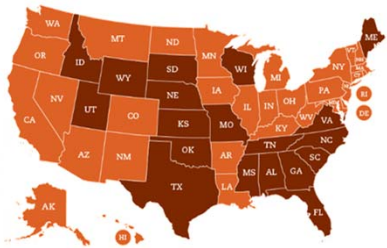
“Health Extenders” Package?

- Multiple health safety-net programs set to expire on 10/1/17
- CHC Fund, CHIP, NHSC, MIECHV, DSH, Medicare provisions, THCGME, rural ambulances, etc.
- Many considered “must-pass”
- NACHC coauthored a letter urging action on expiring health extenders that were included in MACRA:
 - Community Health Center Fund
 - National Health Service Corps
 - Teaching Health Centers GME Program
 - Children’s Health Insurance Program (CHIP)
 - Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV)
- Bipartisan Policy Center Report from March 2017 highlights: CHIP, CHCs, NHSC, MIECHV



Health Centers and Medicaid

What’s Been Proposed? What’s On the Table?



Repeal of ACA
Medicaid
Expansion



Block Grants or
“Per-Capita
Allotments”



Changes to FQHC
Prospective
Payment System

The American Health Care Act Moves Forward



Refresher: basics of House bill

- Eliminates ACA individual mandate, changes ACA subsidies from income-based to age-based
- Major changes/cuts to Medicaid: Expansion rollback, per-capita cap
- CBO Estimate: 23 million people would lose coverage by 2026
- Pulled from consideration for lack of votes in late March



April – late changes pushed the bill over the finish line:

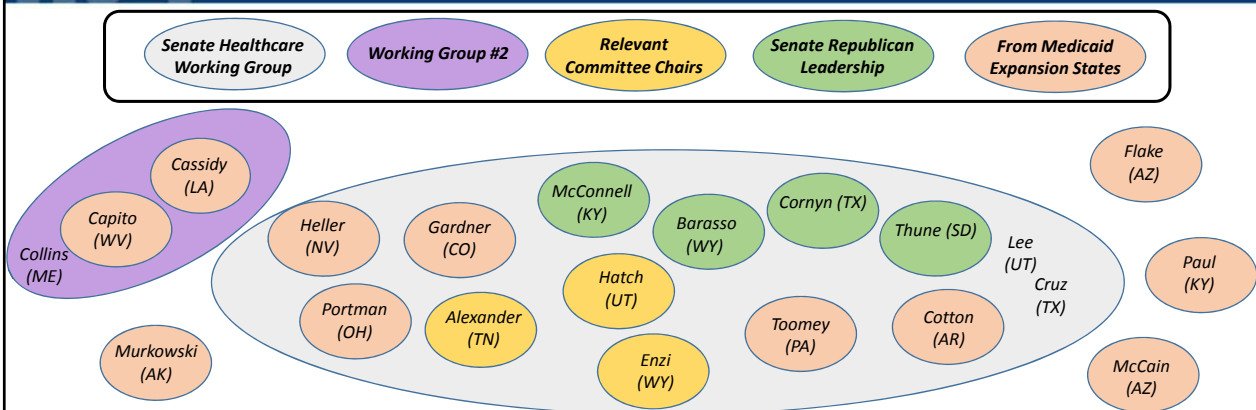
- **Meadows-MacArthur Amendment:** allows state waiver of Essential Health Benefits, Community Rating requirements from ACA
- **Upton Amendment:** additional \$8 billion to State high-risk pools to cover those priced out of the Marketplace.
- Meadows-MacArthur added Freedom Caucus support, Upton got just enough moderates
- **Bill passed 217-213 on May 4**



Premature Celebration?

- Bill faces very complicated dynamic – and tight margins – in the Senate

AHCA Goes to the Senate: What to Expect



Senate Dynamics Are Complicated

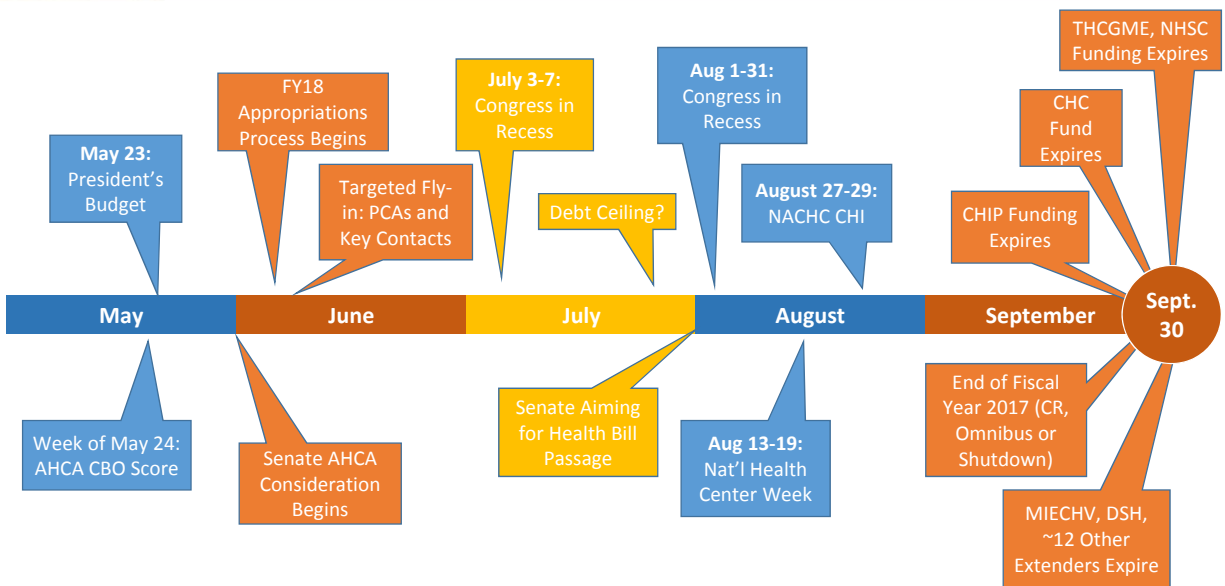
- Medicaid: Expansion vs. Non-Expansion State Senators; can you “fix” a Per-Capita Cap?
- Budget reconciliation rules limit “what’s in, what’s out” and how much more Senate can spend than House
- Vote margin is very tight – GOP Majority can only afford to lose 2 votes
- Aiming for action before August recess, then bill would presumably go back to House: “take it or leave it”

Statewide CHC Letters to Senators & Governors




- NACHC is working with PCAs to organize **statewide letters to Senators and Governors** on the AHCA. **Goal is completion by end of May.**
- Template letters have gone to all PCA CEOs and State Legislative Coordinators, and focus on:
 - The **Role of Health Centers**
 - Health Center Concerns** with the House-passed AHCA
 - Principles and Recommendations** moving forward
- Critical tool for unifying the statewide voice, ensuring **every health center is engaged.**
- Similar template shared for letters to **governors**, since they will have a critical role to play in Senate debate.
- Same principles reflected in **action alert**, materials for use with **state legislators, mayors, etc.**


Timeline – What We Know Now



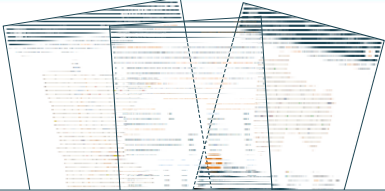
Online Policy Resources




Nuts and Bolts-
Health Center Funding,
Medicaid, Workforce, & 340B




NACHC Policy Papers-
Health Center Funding,
Medicaid, and Workforce




**State and Congressional District Maps,
State Fact Sheets**



Health Centers on the Hill Blog



NACHC Federal Affairs Webpage



NACHC Fact Sheets

For these and other materials, go to
www.nachc.org/policy-matters/federal-issues/.



**WHAT'S NEW IN THE
REGULATORY WORLD?**

Updated Administrative Personnel



HHS Secretary Tom Price, MD



HRSA Administrator
George Sigounas, MS, PhD



CMS Administrator
Seema Verma



BPHC Administrator
Jim Macrae



Deputy BPHC Administrator
Tonya Bowers

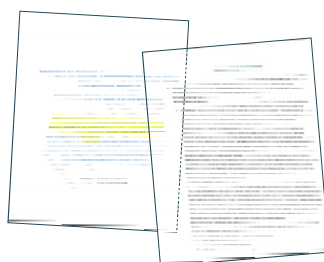


Associate Bureau of Health
Workforce Administrator
Luis Padilla

BPHC: Updates

FTCA

- NACHC has asked BPHC to clarify whether FTCA applies to certain services provided for non-FQHC patients, e.g., prescribing Naloxone to FQHC patients for them to administer to friends or family members.
- BPHC is still considering these issues.



Compliance Guide

- Consolidates most PINS and PALs into a single document.
- BPHC reviewing comments and could finalize in the upcoming months.

FY17 New Spending

| Award Type | Amount |
|---------------------------|--------|
| Substance Abuse Expansion | \$50m |
| Mental Health Expansion | \$50m |
| New Access Points | \$50m |
| Quality Awards | \$100m |

340B Developments

Scrutiny continues

- From Congress, HRSA, drug manufacturers, press, & beyond
- Important that health centers **ensure and document compliance**
 - NACHC's new 340B Manual can help

Medicaid 340B savings at risk:

- Savings for Rx to fee-for-service patients will be **eliminated next spring**
- **Getting harder** to keep 340B savings for managed care patients

340B Mega-Guidance

- "Mega-Guidance" was pulled back for further review by new Administration, unclear if, and when it will be finalized



Proposed Changes to HPSA Scores

HRSA is advancing major changes to how HPSA scores are calculated.

For auto-facility HPSAs, HRSA has proposed to:

- **Establish separate scores for each site**
- **Measure poverty using Census data for all persons within a 30-minute travel radius of the site**

NACHC has **serious concerns** about these proposals, and has had extensive discussions with HRSA about them.

To read NACHC's summary of the proposed changes, visit nachc.org/policy-matters/regulatory-issues/

Medicaid and Medicare Developments

Medicaid

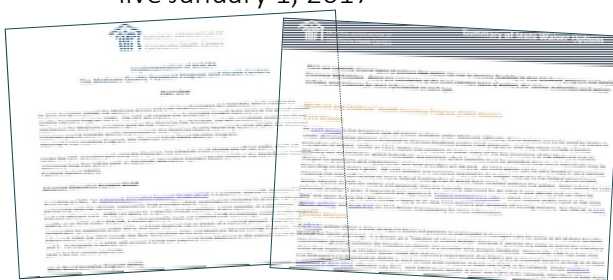
- New CMS Administrator has focus on Medicaid
 - Promoting state flexibility, allowing states to design their own Medicaid programs, via 1115 waivers. Has recommended “fast tracking” waivers that include provisions already approved
- Expect to see more states submit 1115 waivers to make substantial changes to their Medicaid programs
- **Must be involved** in the waiver discussions and approval process to ensure PPS remains in tact



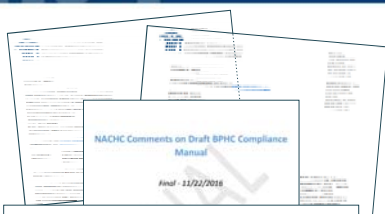
Seema Verma

Medicare

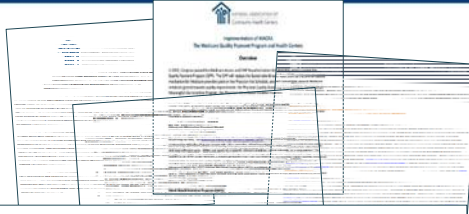
- MACRA implementation continues
- While there’s no direct impact on FQHC Medicare payment, FQHCs can choose to report on some of the new measures
- New FQHC specific marketbasket went live January 1, 2017



Online Regulatory Policy Resources



NACHC Comments



NACHC One-Pagers and Fact Sheets



NACHC Webinars



Policy Shop Blog



NACHC Regulatory Affairs Webpage



NACHC Manuals

For these and other materials, go to www.nachc.org/policy-matters/regulatory-issues/

**HEALTH CENTER
Advocacy
NETWORK**

HOW TO TAKE ACTION?

**Create a Culture
of Advocacy**

**I'M A PART OF THE
HEALTH CENTER
Advocacy
NETWORK**

Are you a Health Center Advocate?

By Joining the Health Center Advocacy Network...

- You'll have more ways to **contact Congress**
- You can easily **share alerts & calls to action** with your social media networks
- You can opt in with your mobile phone to **receive updates and alerts via text message**.

How To Sign Up:

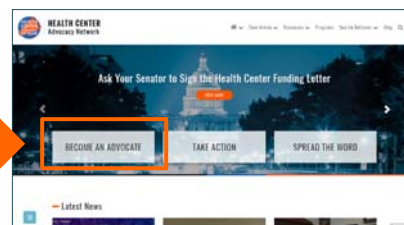
Para recibir comunicaciones en español

Text
HCAVOCATE
to **52886**

Text
DEFENSOR
to **52886**

OR

Visit www.hcadvocacy.org/join



Current Advocacy Action Steps



#1: Engage Your Elected Officials

- Coordinate with your PCA to set up in-person meetings with your governor
- Gather signatures on a sign-on letter to send to your Senators
- Collect impactful stories and share them with policymakers



#2: National Health Center Week

- Plan an event
- Invite elected officials to your NHCW celebrations
- Submit a letter to the editor or op-ed



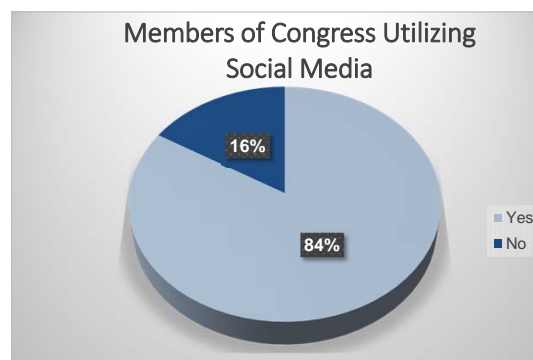
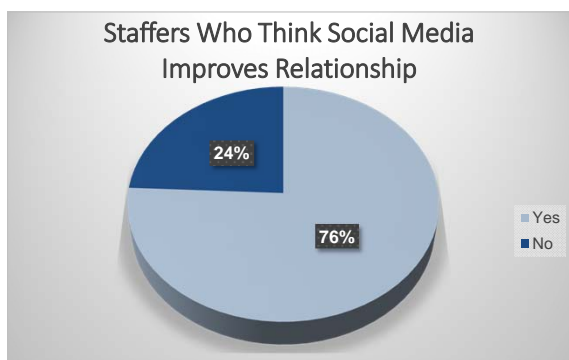
#3: Build Advocacy Capacity

- Create a Health Center advocacy plan
- Recruit new advocates (set a goal— aim for 50, 100, 1000 new advocates!)

All new action steps are on headvocacy.org

Why the Emphasis on Social Media for Advocacy?

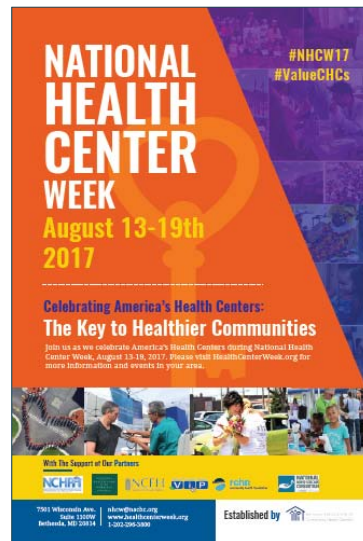
Anyone can start a policy conversation with almost every Member of Congress, simply by going to their Facebook or Twitter page and asking a question.



Social media posts can be influential, but they don't take the place of building relationships with and being a local resource for Congressional staff!

Get Ready for NHCW 2017!

America's Health Centers:
The Key to Healthier Communities



Visit the brand new NHCW site to post your events and find tons of tools, resources, and information! www.healthcenterweek.org

Advocacy Center of Excellence (ACE) Program



Three achievement levels: **bronze**, **silver**, and **gold**—complete the ACE checklist to apply!

CHCs that have achieved certain **measures of advocacy success** and demonstrate **ongoing commitment to advocacy**

Is your Health Center an "ACE"?

NACHC partners with PCAs to support ACEs in each state

ACEs receive **national recognition** and other benefits for their advocacy efforts

For more information, visit www.hcadvocacy.org/ace.

Congratulations to our Advocacy Centers of Excellence (ACE) Health Centers!

GOLD

Clinica Family Health (CO)
 Community Health Care Systems, Inc. (GA)
 Community Health Development, Inc. (TX)
 Cumberland Family Medical Center (KY)
 Georgia Mountains Health Services (GA)
 Greater Lawrence Family Health Center (MA)
 Piedmont Health Services (NC)
 Salud Family Health Centers (CO)
 Scenic Bluffs Community Health Centers (WI)
 Southeast Community Health Systems (LA)
 Teche Action Clinic (LA)
 Valley Healthcare System (GA)
 Westside Family Healthcare (DE)

Updated May 5, 2017

Congratulations to our Advocacy Centers of Excellence (ACE) Health Centers!

SILVER

Cares Community Health (CA)
 Carolina Health Centers (SC)
 Diversity Health Center (GA)
 Family Care Health Centers (MO)
 Greene County Health Care (NC)
 HopeHealth (SC)
 Lorain County Health & Dentistry (OH)
 Metro Community Provider Network (CO)
 North End Waterfront Health (MA)
 Southwest Louisiana Primary Healthcare Center (LA)
 Valley View Health Centers (OH)

Updated May 5, 2017

Congratulations to our Advocacy Centers of Excellence (ACE) Health Centers!

BRONZE

Albany Area Primary Health Care (GA)
 Bakersville Community Health Center (NC)
 Charlotte Community Health Clinic (NC)
 Community Health Service Agency (TX)
 Community Healthcare Center (TX)
 Community Healthcare Network (NY)
 El Rio Community Health Center (AZ)
 Family Health Centers (KY)
 Family Health Centers of Georgia (GA)
 Family Medical Center of Michigan (MI)
 First Choice Health Centers (CT)
 Gaston Family Health Services (NC)
 Georgia Highlands Medical Services (GA)
 Golden Valley Health Centers (CA)
 HRHCare (NY)

Lone Star Family Health Center (TX)
 Medical Associates Plus (GA)
 MedLink Georgia (GA)
 Mountain Family Health Centers (CO)
 Primary Health Care (IA)
 Primary Healthcare Centers (GA)
 Promise Community Health Center (IA)
 Roanoke Chowan Community Health Center (NC)
 Siouxland Community Health Center (IA)
 South Boston Community Health Center (MA)
 Sunrise Community Health (CO)
 White House Clinics (KY)
 William F. Ryan Community Health Center (NY)

Updated May 5, 2017

La Defensa de los Centros de Salud

Manténgase informado



Envíe **DEFENSOR** a **52886** para recibir mensajes de texto



Inscríbese para recibir correos electrónicos en www.saveourchcs.org



www.hcadvocacy.org/defensor

Aprenda más sobre la defensa



Asista a seminarios de internet sobre la defensa incluyendo temas como:

- Estableciendo relaciones con funcionarios electos
- Narración
- La semana nacional de los centros de salud
- Usando los medios sociales para la defensa

Corra la voz



Descubra recursos para ayudar a animar más recursos en su comunidad como:

- Un video breve “¿Que es un defensor?”
- Infographic sobre los centros de salud
- Folletos
- Hojas de compromiso
- Instrumentos para los medios sociales

Health Center Key Contact Program

Are you a Key Contact?

Do you have a **direct relationship** with your Member(s) of Congress or their staff?

Do you **consistently respond to calls to action** with a phone call or personal email to these contacts?

Are you **committed to delivering the Health Center message** on behalf of your Health Center and the Program as a whole?



If you answered 'YES' - YOU could be a Health Center Key Contact.

Email grassroots@nachc.org

What Can You Do Right Now?



Make sure you're signed up as an advocate— Visit www.hcadvocacy.join to sign up or update your preferences and select which communications you want to receive.



Share a quick sentence or two about why you value your local Health Center— Let your community and policy makers know why your HC matters so much.



Spread the Word— Take a few minutes to get in touch with your friends, family, and colleagues and ask them to become advocates too.

Stay Connected with NACHC's Advocacy Efforts

HEALTH CENTER ADVOCACY NETWORK
ADVOCACY CENTER OF EXCELLENCE PROGRAM

Washington Update
April 26, 2016

Health Center Policy Updates
Health Center Visits with Members

Key Contact Best Practices Guide

Sign the Health Center Funding Letter
TAKE ACTION

HEALTH CENTER ADVOCACY NETWORK

Email grassroots@nachc.org

facebook.com/HCAAdvocacy @HCAAdvocacy

Questions?

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