Federal Policy Update

New Mexico Primary Care Association Annual Conference
June 14, 2018

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Today We’ll Cover:

- The Latest on Capitol Hill – Cliff Fix and Beyond
- What to Expect in 2018
- Staying Involved with Health Center Advocacy
The Cliff is Finally Fixed!
How We Got Here: Path to the Cliff Fix

**April 5, 2017**
290 Representatives sign Bilirakis-Green letter

**May 24, 2017**
61 Senators sign Stabenow-Wicker letter

**June 23, 2017**
House E&C Subcommittee on Health holds hearing

**September 13, 2017**
H.R. 3770, Bipartisan CHIME Act is introduced in the House; currently 219 co-sponsors

**September 19, 2017**
70 Senators sign onto bipartisan letter sent to Senate HELP Committee leaders urging Health Center Funding Cliff Fix

**September 28, 2017**
S. 1899, Bipartisan CHIME Act is introduced in the Senate; currently 21 co-sponsors

**October 4, 2017**
House E&C Committee markup of newly introduced H.R. 3922

**October 19, 2017**
Energy and Commerce Committee passes CHAMPION Act 28-23

**October 27, 2017**
153 House Representatives sign onto bipartisan letter sent to House Leaders supporting CHCs

**November 3, 2017**
CHAMPIONING Healthy Kids Act passes the House, 242-174 – combined bills funding extensions for CHIP and CHCs

**December 22, 2017**
Congress passes HRes 670 as “short term patch” to extend Health Center funding through March 31, 2018

**February 2, 2018**
Rep. Stefanik leads House R letter to Speaker Ryan urging him to include CHC funding in next CR – 105 cosigners

**February 5, 2018**
Senators Blunt and Stabenow are joined by 65 colleagues in letter to Senate Leadership urging bipartisan cliff fix

**February 6, 2018**
House and Senate pass Bipartisan Budget Act extending 2 years of CHC funding

**February 9, 2018**
RED ALERT FOR CHCs – Congressional Fly In and National Day of Demonstration

**February 9, 2018**
House and Senate pass Bipartisan Budget Act extending 2 years of CHC funding
Health Care Extenders – What was in the Budget Deal?

- **Community Health Centers Fund (CHCF)** – 2 year extension w/ increased funding ($3.8B in FY18 and $4.0B in FY19)
- **National Health Service Corps (NHSC)** – 2 year extension of level funding ($310M/yr)
- **Teaching Health Centers Graduate Medical Education (THCGME)** – 2 year extension w/ increased funding ($126.5M/yr)
- **Children’s Health Insurance Program (CHIP) funding** – Additional 4 year extension (for a total of 10 years through FY27!)
- **Cuts to Medicaid Disproportionate Share Hospital (DSH) Payments** – 2 year delay
- **Maternal Infant Early Childhood Home Visiting (MIECHV)** – 5 year extension ($400M/yr)
- **Medicare Therapy Caps** – Permanent repeal
- **Special Diabetes Program** – 2 year extension at current funding levels
- **Puerto Rico/ U.S. Virgin islands Medicaid** – 2 year increase to Medicaid caps
- **Opioid Funding** – $6B over two years through state grants
- **Disaster Relief** – $90B in total, incl. $60M for CHCs in affected areas (renovation, equipment, etc.)
Community Health Center Funding
Cliff Fix FAQs

- What does “2 years of CHC funding” really mean?
  The two years of funding is retroactive to the day it expired, covering the period from October 1, 2017 through September 30, 2019.

- What will the additional $600 million in funding be used for?
  We don’t know yet. HRSA will determine how to distribute those dollars. Expect to see grants with quick turnaround times (e.g. Quality Improvement) in FY18; possible service expansions/NAPs in FY19.

- What do I say to my Members who voted NO on the Bipartisan Budget Act?
  We recommend you look at their support over the course of the year, and not just one vote. Hopefully there is still much to thank them for and build from.

- Where do we go from here?
  We need long-term stability. That work is already starting, and we are going to need your help.
Minor Section 330 Changes

- Cliff fix included technical changes and “statutory clean up”
- Requested by Senate HELP staff as part of CHCF extension
  - Negotiated between NACHC and bipartisan House, Senate committee staff
  - Significant technical input from HRSA and Feldesman-Tucker

**KEY TAKEAWAY:** Nothing of serious concern included

What’s Up Next for Congress?

– DACA expiration/Immigration reform
– FY19 Appropriations
– Opioid epidemic response
– “Welfare Reform”?
– Market stabilization?
– Infrastructure?
– Drug pricing?

… All of which will be heavily influenced
President’s FY19 Budget Released

- Continued Support for Community Health Centers, NHSC, THCGME

Provides $10 billion to combat opioid epidemic, incl. $400 million directed specifically to health centers

Made 21% cut to HHS’s overall budget (loss of $17.9 billion) – including large cuts to HRSA and CDC

Included Graham-Cassidy ACA repeal and replace legislation (incl. Medicaid block grant)

- Unlikely to shape Congressional action
NACHC’s 2018 Legislative Agenda – 5 Key Areas

• Federal Grant Funding
  – FY19 Appropriations; Long term stability for cliff

• Medicaid
  – State-federal connection; Protections for program at-large and FQHC PPS specifically

• Behavioral Health/SUD Treatment
  – Targeted grant funding; Adding billable providers

• 340B Drug Pricing Program
  – Maintaining health center access

• Telehealth
  – Reimbursing CHCs as distant and originating sites

**Workforce issues included throughout agenda**
Medicaid

- Large scale, structural changes to Medicaid unlikely to pass Congress

- Focus will be on the states, particularly as CMS has expressed interest in “fast tracking” waivers that include provisions already approved
  - Work requirements, premiums, lockouts, co-pays, lifetime caps, etc.
  - FQHC PPS protections

- More important than ever for health centers to work with their PCAs and Networks to ensure thoughtful, coordinated responses to complex proposals
340B – What’s the Latest?

- Flurry of 340B bills introduced in last few months (primarily hospital focused):
  - Early November - **H.R. 4392; McKinley (R-WV) & Thompson (D-CA)**
    - Blocks CMS cuts to Medicare Part B Payments to Hospitals
  - Late December: **H.R. 4710 aka PAUSE ACT; Bucshon (R-IN) & Peters (D-CA)**
    - Two-year moratorium on new DSH hospitals and new reporting requirements
  - Mid-January: **S. 2312 aka HELP Act; Cassidy (R-LA)**
    - Similar to PAUSE ACT, two-year moratorium on new DSH hospitals and new reporting requirements (beyond those included in PAUSE ACT)

- E&C Committee conducted 2-year review of 340B program, including 3 Congressional hearings, stakeholder meetings and document requests
  - Report highlights strong bipartisan support for the program, also areas of concern
More to come?

- E&C Chairman Walden: “Will bring up additional 340B-related legislation as soon as February”
- GAO Report on Contract Pharmacy
- Senator Hatch letter to HHS RE: moving program from HRSA to CMS
- Additional Hearings?

What should health centers be doing?

- *Be able to demonstrate how 340B benefits your patients (savings)*
- Ensure compliance (diversion, duplicate discounts, contract pharmacies)
CONNECT for Health Act of 2017
S. 1016, Schatz (D-HI)/Wicker (R-MS)
H.R. 2556, Black (R-TN)/Welch (D-VT)
Co-sponsors: 19 Senate/ 24 House

For FQHCs & RHCs, CONNECT includes provisions to authorize reimbursement within Medicare for:
Distant site providers
All originating site providers
Remote Patient Monitoring (RPM) of patients with chronic conditions

Congressional telehealth caucus created last year

115th CONGRESS
1st SESSION
S. 1016

To amend title XVIII of the Social Security Act to expand access to telehealth services, and for other purposes.

IN THE SENATE OF THE UNITED STATES
MAY 3, 2017

Mr. SCHATZ (for himself, Mr. WICKER, Mr. COCHRAN, Mr. CARDIN, Mr. THUNE, and Mr. WARNER) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL
To amend title XVIII of the Social Security Act to expand access to telehealth services, and for other purposes.

Be it enacted by the Senate and House of Representa-
tives of the United States of America in Congress assembled,
For these and other materials on federal, state, and regulatory issues, go to www.nachc.org/policy-matters/.
Building on Our Momentum

Community Health Centers also support 1600+ full-time jobs in VT. Let’s valueCHCs & Fixthecliff for VT & the nation.

Community health centers await funding that expired months ago. New drugs, but slow access means how to ensure health care to patients. Congress needs to act now.

Legislation to extend funding for clinics serving poor and uninsured stalls in Congress. The CHiME Act isn’t on the congressional calendar — and if funding is set to expire at the end of the month.

Emergency aid is needed for rural, urban community health centers. Federal funding is drying up due to inactivity. States should step in.

Rep. Randy Hultgren • @RHultgren
Community Health Centers offer the kind of preventive and comprehensive services others do not.

Clock ticking on funding for Federally Qualified Health Centers.

Funding Lapse For Community Health Centers Still Looms

We must fund these health centers this week.

Cold Shoulder Sends Shivers Through Community Health Centers

For 50+ years, community health centers have delivered comprehensive, preventive and primary health care to patients.
Before you leave today, make sure you are signed up as 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: Visit www.hcadvocacy.org/join OR

Text HCADVOCATE to 52886

Para recibir comunicaciones en español

Text DEFENSOR to 52886

OR

Visit www.hcadvocacy.org/join
Questions?

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