



March 5, 2023

The Honorable Bernie Sanders
Chair
Senate Committee on
Health, Education, Labor and Pensions
Washington, D.C. 20510

The Honorable Bill Cassidy, MD
Ranking Member
Senate Committee on
Health, Education, Labor and Pensions
Washington, D.C. 20510

Dear Chair Sanders and Ranking Member Cassidy:

On behalf of the Healthcare Leadership Council (HLC), we thank you for holding a hearing on, “Community Health Centers: Saving Lives, Saving Money.”

HLC is a coalition of chief executives from all disciplines within American healthcare. It is the exclusive forum for the nation’s healthcare leaders to jointly develop policies, plans, and programs to achieve their vision of a 21st century healthcare system that makes affordable high-quality care accessible to all Americans. Members of HLC – hospitals, academic health centers, health plans, pharmaceutical companies, medical device manufacturers, laboratories, biotech firms, health product distributors, post-acute care providers, homecare providers, and information technology companies – advocate for measures to increase the quality and efficiency of healthcare through a patient-centered approach. We are uniquely positioned to address disaster preparedness comprehensively from all perspectives in the healthcare industry.

Since the first Community Health Center (CHC) opened their doors more than 50 years ago, they have provided quality and affordable care to those most in need. These health centers provide primary care, dental care, behavioral health, and pharmacy services to more than 30 million patients, including nine million children and 400,000 veterans in rural and underserved communities regardless of their income or health insurance status.¹ Nearly 45 percent of CHC’s are located in rural communities where American’s often have more trouble accessing care due to a shortage of healthcare workers and longer distances to reach healthcare services than their urban counterparts.² During the COVID-19 public health emergency, CHC’s were the main source of care for millions of vulnerable patients and played a pivotal role in ensuring equitable access to COVID-19 tests, vaccines, and treatments.

For the past decade, Congress has supported CHC’s through the annual appropriation process for the health center program, coupled with investments in the mandatory CHC fund.³ This

¹ Americas Health Centers, National Association of Community Health Centers (August 2022) https://www.nachc.org/wp-content/uploads/2022/08/Americas-Health-Centers-2022_final.pdf

² Health Center Facts, National Association of Community Health Centers (February 2023) <https://www.nachc.org/media-center/health-center-facts/>

³ Federal Grant Funding, National Association of Community Health Centers (February 2023) <https://www.nachc.org/focus-areas/policy-matters/health-center-funding/federal-grant-funding/>

funding is vitally important to the success of CHC's and their ability to respond to the changing healthcare needs of their communities. Significant cuts to hospitals and CHC's that serve vulnerable communities and low-income individuals would be catastrophic. As Congress works to make affordable high-quality care accessible to all Americans, HLC urges the committee to prioritize adequate support for CHC's long term sustainability, especially in underserved areas.

We also believe Congress should support the National Health Service Corps (NHSC), which provides scholarships and loan repayment funds for medical providers who agree to practice in medically underserved areas, and Teaching Health Centers, which train medical residents to work as primary care physicians in those same areas. This support is important as many of the NHSC providers and graduates from teaching health centers serve in CHC's. In a Medicare report, CHC's ranked nurses as the top category where they saw a shortage of healthcare workers.⁴ To better address the national shortage of registered nurses, HLC believes Congress should reintroduce S. 4844/H.R. 8817, the "National Nursing Workforce Center Act." One of the major barriers to understanding this shortage is the lack of standardized information about the landscape of nursing in each state, making it difficult to develop informed interventions to recruit and retain nurses. Nursing workforce centers advance the profession through a data driven approach throughout 39 states in America. These centers conduct local research, publish reports on nursing supply, demand, and education, and share best practices. However, not every state has a center and those centers that exist do not always have the funding essential for their work. That is why we believe this legislation is an important step forward to support the nursing workforce within CHC's.

Lastly, HLC believes Congress should further explore value-based care as a long-term way to better align the healthcare workforce and address shortages. A value-based care system will improve healthcare quality and outcomes for patients. The shift to value-based care will require numerous changes in the way our healthcare system is structured and operates. This shift will enable consistent and efficient data collection, and communication among healthcare providers which will allow for better utilization of the healthcare workforce. Additionally, value-based care will encourage greater use of appropriate telehealth services, leading to improved patient access to healthcare for millions of Americans in rural and underserved communities where CHC's provide care.

Thank you again for your efforts to prioritize CHC's and their ability to provide care to millions of vulnerable patients. HLC looks forward to continuing to collaborate with you on this important issue. If you have any questions, please do not hesitate to contact Debbie Witchey at (202) 449-3435 or dwitchey@hlc.org.

Sincerely,



Mary R. Grealy
President

⁴ Medicare: Additional Reporting on Key Staffing Information and Stronger Payment Incentives Needed for Skilled Nursing Facilities, Government Accountability (August 2021)
<https://www.gao.gov/products/gao-21-408>