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April 12, 2018

Senate Committee on Appropriations

State of Vermont

115 State Street

Montpelier, VT 05633

Sent via email to rbuck@leg.state.vt.us

Re: SFY19 Proposed Budget

Dear Chair Kitchel and Committee Members:

Bi-State Primary Care Association appreciates the opportunity to provide comment on the SFY19 House passed budget. We wish to comment on the proposed funding levels for loan repayment and primary care coordination management.

Established in 1986, Bi-State is a nonpartisan, nonprofit 501(c)(3) charitable organization that promotes access to effective and affordable primary care and preventive services for all, with special emphasis on underserved populations in Vermont and New Hampshire. Bi-State's Vermont membership includes 12 Federally-Qualified Health Centers delivering primary care at 64 sites and serving over 172,000 Vermonters.

We want to express our appreciation to the House for inclusion of full funding for loan repayment and partial funding for primary care coordination management payments and encourage the Senate to provide full funding for both of these items:

Loan repayment. Bi-State's members are concerned that any loss of this funding will severely hamper their ability to recruit or retain qualified primary care clinicians. We have over 40 vacancies currently across our network and loan repayment is critical for recruitment and retention and is considered best practice for ensuring we stay competitive in a national job market. Applicants assume there will be some loan repayment, and without it we would lose those qualified candidates. In fact, among the first questions identified by candidates is 'how much is the loan repayment', not if there is loan repayment. Our members do not have the financial resources to 'back-fill' this funding should it go away and would be disadvantaged in future primary care recruitments. This could result in access challenges for Vermonters. *We urge you to support the funding level passed by the House.*

Primary Care Coordination Management. The Governor's proposed budget included the elimination of DVHA's Primary Care Coordination Management payment. This payment is a \$2.50 per member per month payment for Medicaid beneficiaries. The impact of this cut is estimated at over \$1.1m across Vermont's FQHCs. We learned of this cut as part of the Governor's budget proposal in January and was not anticipated. Bi-State's members have told me that this funding represents anywhere from one to four FTE depending on the size of the health center. The loss of funds will result in less care

coordination, less health coaching, and fewer enabling services for our Medicaid patients- those who need it most. *While we appreciate the House's partial restoration of this funding, \$1.25 per member per month, we encourage you to support full restoration of \$2.50 per member per month.*

It is also important to understand these funds as they relate to the Blueprint for Health per member per month payments and Community Health Teams. Our members fully participate in the Blueprint for Health (Blueprint) and value that program. However, as the Blueprint has itself reported in a series of annual reports, the funding provided to primary care practices to serve as patient-centered medical homes is insufficient for the work required. This means that each of our FQHCs is stretching their resources to meet the Blueprint requirements. This is, in part, possible because of the Primary Care Coordination Management payment that each of them receives. Loss of these funds adds additional pressure on our primary care providers.

We support the expansion of school-based dental programs:

All of Vermont's FQHCs provide dental services, either through on-site or contracted dental practices. This, along with mental health services, helps fulfill the FQHC mission of providing comprehensive primary care services to the underserved regardless of the ability to pay. Many of Vermont's FQHCs, including Community Health Centers of Burlington and Springfield Medical Care Systems, have started providing services in our schools. Additionally, we have a mobile van operated by The Health Center in Plainfield that goes out to the surrounding schools.

Our members see the dental need not only in children, but in their adult patients, which is particularly challenging since dental disease is preventable- and it starts with education and habits formed as children. The proposed expansion of school-based programs will allow our members, among others, to meet children where they are and break the cycle of dental disease and the associated physical and economic impacts with cost-effective preventive services. This will reduce lost school hours due to pain and support a healthy lifestyle.

We ask that you support funding for both the loan repayment program and the Medicaid Primary Care Coordination Management payments.

Sincerely,

Georgia J. Maheras, Esq.
Director, Vermont Public Policy
Bi-State Primary Care Association