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## House Speaker and Majority Leader Support Role of Community Health Centers in NH



*(L-R) Lucy Hodder, legal counsel for Governor Hassan, Senate Majority Leader Jeb Bradley, Speaker of the House Terie Norelli, Executive Director Tess Stack Kuenning and NH Public Policy Director Kristine Stoddard from Bi-State Primary Care Association at the Breakfast.*

CONCORD, NH – (Feb. 7, 2013) Senate Majority Leader Jeb Bradley, House Speaker Terie Norelli, Bi-State Primary Care Association’s executive director, Tess Stack Kuenning and NH Public Policy director, Kristine Stoddard, addressed a crowd of 200 legislators, agency directors, and business leaders at Bi-State’s annual Legislative and Business Breakfast yesterday. The designated role of primary and preventive care in the Patient Protection and Affordable Care Act and its implementation in New Hampshire was the theme of the event.

Kuenning described how the recent budget cuts negatively impacted the State’s Community Health

Centers and their patients: “During the last biennium, \$4 million was cut from the State’s primary care contracts to Community Health Centers to serve low-income, uninsured people. The loss of funding led to layoffs of physicians, nurse practitioners, medical assistants, social workers, substance abuse counselors, and care coordinators. Home visiting programs, entire WIC programs, and school-based oral health programs were eliminated.” To demonstrate one impact of reduced funding, Kuenning said, “One Community Health Center lost funding for its substance abuse counseling for pregnant women, affecting 400 expectant mothers, and are already seeing a disturbing trend – the beginning of an increase in the number of low birth-weight babies. Not only do extreme low birth-weight babies face possible health deficits and a compromised quality of life, the cost to the state of even one affected baby is tremendous,” she said.

Senator Bradley, a guest speaker said, “It is my hope that if there is revenue, the \$2 million cut [per year of the biennium budget] from primary care will be restored. Investing in New Hampshire’s Community Health

Centers is a good use of scarce funds.” House Speaker Norelli spoke about Medicaid expansion. “Over the next couple of months, we will be deciding whether to expand Medicaid as part of the Affordable Care Act,” said House Speaker Norelli. “We have been reviewing the costs and benefits of expansion, both in terms of our health care system and our economy. Information so far indicates that our public health and the economic well-being of the state will benefit significantly, when everyone has access to health care. Community Health Centers provide our most vulnerable neighbors with comprehensive, cost-effective, high quality care. In fact, they lead the nation in the treatment of chronic diseases – treating asthma, immunizing children in schools, and controlling diabetes.”

With 38 health center sites, NH’s 16 Community Health Centers provide access to primary medical, oral, mental health and behavioral health care to 125,000 people – 1 in 10 residents. The Community Health Centers break down barriers to access by accepting all patients within their service area regardless of insurance coverage or ability to pay, and by offering patients interpretation services, help with transportation, mobile health care, and access to low-cost prescription drugs.

The NH Legislative and Business Breakfast was supported by the NH Charitable Foundation; Centrix Bank; AT&T; Granite State Health Plan; Manchester-Boston Regional Airport; Northeast Delta Dental; Anthem; Granite Care-Meridian Health Plan; Harvard Pilgrim; Fidelity Investments; Bank of NH; Clark Insurance; NH Dental Society; Rath, Young and Pignatelli; Sulloway & Hollis; The Dupont Group; and Well Sense Health Plan.

Established in 1986, Bi-State Primary Care Association, serving Vermont and New Hampshire, 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 New Hampshire and Vermont.

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