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BI-STATE PRIMARY CARE ASSOCIATION 2022 National Public Policy Principles and Priorities

Public Policy Principles

Bi-State Primary Care Association has a steadfast commitment to improving the health of New Hampshire and Vermont residents. Our work is to ensure that all individuals have access to affordable, appropriate, equitable, high-quality comprehensive preventive and primary care. This care integrates medical, oral, behavioral, and mental health including substance use disorder diagnosis, treatment, and recovery, regardless of insurance or ability to pay. Our work focuses on population-based approaches to community-based quality primary and preventive care for the public, as well as preserving, strengthening, and expanding the Community Health Centers and primary care safety net providers. We work on behalf of all, with special emphasis on low- and moderate-income families.

Community Health Centers across Vermont and New Hampshire are on the front lines keeping their communities healthy and safe through the COVID-19 pandemic. Bi-State's work is to grow, sustain and strengthen primary care providers and primary care workforce to ensure and promote access to health centers and rural health clinics for all. To achieve our goals, Bi-State works with the following entities to develop strategies and programs that promote and sustain the finest in community-based, primary health care services: federal and state governments; federal, state, and regional health policy organizations; thought leaders; foundations; and payers. As such, Bi-State's health care policy work at the state and national level is primary to our purpose. Bi-State is committed to supporting policy changes that eliminate health disparities tied to race, ethnicity, and other factors, and removing structural barriers to health equity.

Public Policy Priorities Highlights

Health Care Systems and Finance Reform

- Work toward universal, comprehensive, sufficient, equitable, fair, and sustainable coverage and universal access that is available and affordable to everyone.

Appropriations for the Community Health Center Program

- Promote and support increased and sustained appropriations, prioritizing Base Grant Adjustments and New Access Point funding, for the Health Center Program to preserve, strengthen, and expand the model.
- Promote and support expanded services for comprehensive medical, oral, behavioral, and mental health and substance use disorder diagnosis, treatment and recovery, pharmacy, vision, and resources for homeless, public housing, and migrant and seasonal agriculture workers.

Medicaid and Medicare

- Promote and support a strong, viable Medicaid and Medicare program, including expansion of dental, vision, and hearing benefits for Medicare, with fair and equitable prospective reimbursement to Health Centers and Rural Health Clinics.
- Promote and support Federally Qualified Health Centers and Rural Health Centers reimbursement by Medicare for telehealth services to patients beyond the Public Health Emergency regarding permanent distant site status and ensure equal payment for equal services.
- Extend Medicare reimbursement to mental health and substance use disorder treatment professionals, including Licensed Alcohol and Drug Counselors, Licensed Clinical Mental Health Counselors, Licensed Psychologists, and Licensed Marriage and Family Counselors who hold master's degrees to expand access to these services.

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Workforce

- Support increased and sustained Federal investments that enhance health care workforce development, recruitment, and retention of primary care providers and ancillary staff in essential clinical and administrative roles emphasizing underserved communities. For example, Graduate Medical Education/residency training slots for primary care physicians or dentists through programs such as Teaching Health Center or traditional hospital-based residencies.
- Support increased and sustained Federal investments in Health Centers to build their capacity to serve as accredited community-based training sites for a breadth of health care workforce roles. The training may include, but is not limited to medical and dental assistants, mental health and substance use disorder treatment providers, family medicine and nursing residents, and dental students and residents.
- Support increased and sustained Federal investments in Health Centers to build and sustain collaborative partnerships with training programs, community/technical colleges, universities, and academic medical centers to ensure that the health care workforce reflects the communities they serve.
- Support sustained Federal investments in programs offered through the National Health Service Corps, such as the students-to-scholars program, loan repayment, and Nurse Corps.
- Ensure continued support for the Conrad 30, J-1, and H-1B Visa Waiver Programs to allow communities to recruit foreign physicians who have trained in the US.
- Support increased and sustained Federal investments in Area Health Education Centers to expand health care workforce pipeline development and training at the community level.
- Support strategies and policies that reduce the administrative burden on community-based primary care practices to minimize unnecessary costs incurred by health care employers.

Capital

- Promote and support access to capital for Health Centers through federal appropriations and mandatory funding, federal stimulus packages responding to COVID-19, New Market Tax Credits, USDA Rural Loans, tax-exempt bonds, loan guarantees, and mortgage insurance.

Other Public Policy Priorities

- Promote and support the integrity of the Federal Tort Claims Act (FTCA) coverage for employed and volunteer staff at Federally Qualified Health Centers and Free Clinics.
- Promote and support access to lower-priced drug costs, including the continued availability of 340B drug pricing options for patients through Health Centers and other Covered Entities.
- Promote and support adequate and sustained funding for the Maternal and Child Health Program (Title V) Program, Family Planning Program (Title X), Women Infants and Children (WIC) Nutrition Program, Supplemental Nutrition Assistance Program (SNAP), and Temporary Assistance for Needy Families Program (TANF).