



## BI-STATE PRIMARY CARE ASSOCIATION

### *2011 National Public Policy Principles, Priorities & Strategies*

#### ***Public Policy Principles***

Bi-State has a steadfast commitment to improving the health status of Vermont's and New Hampshire's citizens and ensuring all individuals have access to appropriate, affordable and high-quality medical, behavioral, oral health care and access to low-cost pharmaceuticals. Our public policy principles, priorities and strategies focus on preserving, strengthening and expanding the Community Health Centers and primary care safety net providers for the benefit of the general public. Bi-State's work is to grow, sustain and strengthen primary care providers and primary care workforce to assure access to health care for all. To achieve our goals, Bi-State works with federal, state and regional health policy organizations, foundations and payers to develop strategies and programs that promote and sustain community-based, primary health care services. As such, Bi-State's health care policy work at the state and national level is primary to our purpose.

#### ***Public Policy Priorities Highlights***

##### ***National Health Care Reform***

- Promote universal coverage and access that is available and affordable to everyone, especially to low income individuals and families.
- Promote public coverage that is comprehensive, sufficient, equitable, fair and sustainable and including medical, oral and mental/behavioral health emphasizing prevention and primary care.
- Promote health systems operations, delivery and finance integration to include Community Health Centers and primary care safety net providers. Develop and execute state implementation plans to maximize national funding investments for the underserved in Vermont and New Hampshire through the Community Health Center and National Health Service Corps Trust Funds that grow and strengthen the workforce and safety net health care delivery system.

##### ***Appropriations for the Community Health Center and National Health Service Corps Programs***

- Support increased appropriations for the Community Health Center Program to preserve, strengthen and expand the Community Health Center model with special funding emphasis on meaningful base grant adjustments.
- Support expanded resources for new primary care access points, expanded medical capacity, service expansion to medical, oral, behavioral health and pharmacy services, and resources for special populations such as homeless and migrant and seasonal farm workers.
- Support increased appropriations for the National Health Service Corps Program with special emphasis on priority allocation of providers to Community Health Centers.

##### ***Medicaid and Children's Health Insurance Program (CHIP)***

- Assure the continued viability of the Medicaid and CHIP Programs with fair and equitable reimbursement including continued prospective Medicaid reimbursement to Community Health Centers.

##### ***Medicare***

- Assure the continued viability of the Medicare program with fair and equitable reimbursement to Community Health Centers and stabilize and increase Medicare payment rates.

##### ***Workforce***

- Support investments in federal legislation that will positively affect the recruitment and retention of primary care physicians with special emphasis on assuring providers serve in underserved communities. This includes expanding the National Health Service Corps Program and continued support for the Conrad 30 and J-1 Visa Waiver Programs.
- Invest in the national Area Health Education Centers Programs that support the development of a primary care workforce.

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#### ***Capital***

- Support access to capital for Community Health Centers through reauthorizing New Market Tax Credits, providing access to credit enhancements, tax exempt bonds, loan guarantees and mortgage insurance as tools to address facility and equipment needs.

#### ***Other Public Policy Priorities***

- Expanding Federal Tort Claims Act coverage for Community Health Centers, including Federally Qualified Health Center Look-Alikes and volunteer clinicians at Community Health Centers.
- Promote and support adequate funding and appropriate network integration for our members' health systems.
- Promote and support adequate funding for the Patient Centered Medical Home/Health Home model.
- Promote and support adequate funding for the Area Health Education Centers Programs.
- Promote and support adequate funding for the Maternal and Child Health (Title V) appropriations.
- Promote and support adequate funding and reauthorization for the Women, Infants and Children (WIC) Nutrition Program.
- Provide input to Centers for Medicare and Medicaid Services (CMS) and Health Resources and Services Administration (HRSA) on any state Medicaid Plan Amendment or Medicaid Waiver.