Federal Policy & Advocacy Update

2019 Midwest Stream Forum for Agricultural Worker Health

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National Association of Community Health Centers
AGENDA

Latest on Capitol Hill and the Administration

What to Expect in 2019

AG Worker Access Campaign
WHAT IN THE WORLD IS CONGRESS UP TO?
New Year, New Congress!

The largest number of Women elected to the House!
THE 116TH CONGRESS AND HEALTH CENTERS

• New Policymakers for CHC Advocates to educate
  • At least 90 New Representatives and 9 New Senators

• New House Leadership and New Committee Chairs
  • w/ different priorities
  • i.e. New Speaker of the House (Pelosi), New Senate Finance Chair (Grassley), New House Appropriations lead (Granger), New E&C Health Subcommittee Chair (Eshoo)

Split House and Senate may leave few options for bipartisanship:
Health Centers may stand out more than ever!
NACHC’S 2019 LEGISLATIVE AGENDA

- Community Health Center Funding – Mandatory Funding
- Community Health Center Funding – Discretionary Appropriations
- Workforce Program Extensions – National Health Service Corps and Teaching Health Centers program
- Other Key Issues, including 340B, Medicaid, Behavioral Health and Telehealth
“Mandatory” Funding Community Health Center Fund (CHCF) $4.0 Billion + “Discretionary” Funding Subject to Annual Appropriations $1.63 Billion
COMMUNITY HEALTH CENTER FUNDING

CHCs were only funded through the annual budget prior to 2010 (Blue).

2010: Congress created a dedicated 5-year fund for growth in CHCs (Orange).

In 2015 & 2018, CHC advocates succeeded in getting 2-year extensions (Gray & Green).
CHALLENGES

• It’s expensive! (Even more than last time…)
• No Children’s’ Health Insurance Program (CHIP) extension bill to ride on and fewer programs for combo package
• Pay-fors will be a critical factor
• Surprise Medical Billing
• Partisan environment
• Crowded agenda
• New Members to get up to speed
• Lingering philosophical issues with mandatory funding
A CHANGE IN TONE OF MESSAGE

Evolution of the issue from “falling off a cliff” to “time for Reauthorization”
WHERE DO WE STAND?
FUNDING REAUTHORIZATION - HOUSE

- House Energy & Commerce Committee recommended funding for the CHC program, NHSC, THC GME programs for a period of four years at current funding levels: $4.0 Billion in Mandatory funding. (Mark Up included amendments for other Public Health programs, Special Diabetes programs for Native Americans; extending DSH Payments to hospitals and other Low-Income Medicare Programs.

- House, Senate and White House cannot agree on hot button policy issues: family planning, border wall, etc. With only five days left before the end of the federal fiscal year, the House passed a Continuing Resolution (C.R.) to avoid a government shutdown.

- Last week House of Representative voted for a Continuing Resolution (C.R.) through November 21, 2019. The C. R. includes extending the Mandatory Fund for the Health Center Program, NHSC and THC GME Program. The C.R. also applies to the $1.6 Billion in Discretionary funding.

- C.R. authorizes all federal agencies to continue to operate at current funding levels to avoid another government shutdown until a final appropriation for FY 2020 is completed.
WHERE DO WE STAND?
FUNDING REAUTHORIZATION - SENATE

- Senate Labor HHS Committee included a reauthorization of funding for the CHC program, NHSC, THC GME Programs for five (5) years and the current funding level of $4.0 Billion.

- House, Senate and White House cannot agree on hot button policy issues: family planning, border wall, etc. With only five days left before the end of the federal fiscal year, the House passed a Continuing Resolution (C.R.) to avoid a government shutdown.

- The Senate will vote on a similar Continuing Resolution (C.R.) this Thursday (September 26, 2019) as passed by the House. The C.R. also applies to the $1.6 Billion in Discretionary Funding.

- C.R. authorizes all federal agencies to continue to operate at current funding levels to avoid a government shutdown until a final appropriation for FY 2020 is completed. The C.R. will expire on November 21, 2019.
• Annual process, up to Congress (Appropriations Committees) to determine amount of funding.

• Congress currently working on twelve FY 2020 appropriations bills for all federal agencies. CHC discretionary funding is included in the Labor HHS bill.

• Current discretionary funding is $1.63 billion/year. – President’s Budget adds $50 Million for CHCs to eliminate HIV Epidemic. This amount has been dropped from the pending Continuing Resolution (C.R.)
• Large scale, structural changes to Medicaid unlikely to pass Congress.

• Focus is on the states, particularly as CMS has expressed interest in “fast tracking” waivers that include provisions previously approved
  • States seeking variety of provisions (e.g., work requirements, premiums, lockouts, co-pays, drug testing, asset testing, eliminating retroactive coverage).

• CMS encouraging Block Granting Medicaid program to States. State of Tennessee has submitted an 1115 Waiver to Block Grant Medicaid in TN. (Utah, Alaska, Kansas are also considering a block grant).

• PPS Rate Protection

• Really important for health centers to work with their PCAs and Networks to ensure thoughtful, coordinated responses to complex proposals.
STAY ENGAGED AND IN-THE-KNOW

facebook.com/HCAdvocacy
Twitter: @HCAdvocacy

Sign up for the weekly Washington Update, calls to action, and other important advocacy communications at

www.hcadvocacy.org/join
What can I do Now?

Be prepared to ramp up advocacy efforts!

- National call-in days
- Urgent email campaigns/action alerts
- OP/ED
- Social media push
  - Remember #RedAlert4CHCs?
• Without sustainable and predictable funding, health centers will continue to experience operational and service related impacts, placing our patients’ care in jeopardy.

• For example, at my health center...(tell your local story about recruitment challenges, layoffs, cutbacks on programs and services, etc.).

• Health centers are small businesses and need to be able to plan for the future, we cannot wait until the last minute to know whether or not the funding will be there.
ONLINE RESOURCES

NACHC Policy Papers

State and Congressional District Maps, State Fact Sheets

NACHC Blog

NACHC Webpage

NACHC Fact Sheets

For these and other materials, go to www.nachc.org/policy-matters
RECURSOS EN ESPAÑOL

www.hcadvocacy.org/defensor

Seminarios de internet

Presentaciones

Folletos, infographics

Imagenes para medios sociales

Hoja de compromiso
SIGN UP FOR THE MONTHLY SPANISH NEWSLETTER

• Monthly newsletter, written in Spanish, for health center advocates
  • Upcoming events
  • Action Alerts
  • Health Awareness themes
  • Advocacy tips
  • and more!

• Have ideas? ¿Tienes ideas? We welcome your feedback!

• Email grassroots@nachc.org to get added to the list!
AG WORKER ACCESS CAMPAIGN UPDATE
WHAT IS THE CAMPAIGN?

• The Ag Worker Access Campaign is a national initiative to increase access to quality healthcare for America’s Agricultural workers and their families.

• Overarching Goal
  • Increase # of Ag worker users to 2 million AG Workers.
Sign up to be part of the Campaign!

JOIN THE AG WORKER ACCESS CAMPAIGN

I CARE ABOUT AMERICA'S AGRICULTURAL WORKERS
www.ncfh.org/ag-worker-access

NCFH
National Center for Farmworker Health, Inc.
WHAT ARE THE CAMPAIGN GOALS?

- **Overarching Goal**
  - Increase # of Ag worker users to 2 million

- **Health Center Level Goal**
  - Increase the # of Ag workers served by 15% each year, over the next five years

<table>
<thead>
<tr>
<th>Year</th>
<th>Ag Worker Users</th>
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<tbody>
<tr>
<td>2013</td>
<td>790,226</td>
</tr>
<tr>
<td>2014</td>
<td>892,056</td>
</tr>
<tr>
<td>2015</td>
<td>910,172</td>
</tr>
<tr>
<td>2016</td>
<td>957,529</td>
</tr>
<tr>
<td>2017</td>
<td>972,251</td>
</tr>
<tr>
<td>2018</td>
<td>995,232</td>
</tr>
<tr>
<td>2019</td>
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## HOW WILL THE GOALS BE ACHIEVED?

<table>
<thead>
<tr>
<th>Strategy 1: “Credit Where Credit is Due”</th>
<th>• Accurately identify and report ALL Ag worker patients being seen in health centers, regardless of whether the health center receives migrant health funds</th>
</tr>
</thead>
</table>
| Strategy 2: “Open Hearts, Open Doors, Open Access” | • Reach out to Ag workers who are not currently being served  
• Develop partnerships & collaborations with other community-based providers that result in increased access for Ag workers  
• Develop innovative strategies designed to reach more Ag workers |
| Strategy 3: “Build Capacity to Sustain Growth” | • Ensure sufficient funding to support potential growth in services needed to serve an increase in the number of Ag workers served (primary care, dental, substance use disorder and mental health treatment, pharmacy & enabling services) |
WHO SHOULD BE INVOLVED?

• Everyone should get involved!
  • All Community & Migrant Health Centers throughout the U.S. that serve Ag workers & their families
  • All individuals, organizations & networks that share a commitment to this special population
WHO IS INVOLVED?

• Campaign Task Force
  • 21 members representing health centers, primary care associations, health center-controlled networks, NCAs, and organizations representing education, housing, and labor

What are they doing?

▶ In general, guiding Campaign activities to increase access to care for MSAWs.
  ▶ Identifying challenges
  ▶ Exploring and launching innovation
  ▶ Formulating recommendations
  ▶ Supporting collaboration and coalition building
  ▶ Identifying and disseminating promising practices
WHO IS INVOLVED?

Coalitions being developed to Increase Access to Care:

• 3 PCAs – Washington, Colorado, NWRPCA
• 2 HC networks – Central Valley Health Network & Central Coast Health Network in California
• 2 Voucher Programs - KS & GA
• 19 Health Centers from CA, WA, NY

What are they doing?

► Participating in training, migrant health action planning, quarterly network calls, sharing UDS information 2x/year to track outcomes, & sharing knowledge, tools and resources
HOW DO WE CONTINUE TO BUILD ON THIS MOMENTUM?

COLLABORATE! COLLABORATE! COLLABORATE!

SHARE PROMISING PRACTICES WITH EACH OTHER

RECRUIT AND DEVELOP MORE INCREASE ACCESS CHAMPIONS
### HOW CAN WE ALL SUPPORT THE CAMPAIGN?

<table>
<thead>
<tr>
<th>Individuals</th>
<th>Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sign up to be part of the Campaign</td>
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</tr>
<tr>
<td>Share the importance of the Campaign with your friends &amp; colleagues</td>
<td>Establish Board resolution to affirm your organization's commitment to increasing access to the target population</td>
</tr>
<tr>
<td>Get others involved in this initiative – Schools, churches and synagogues, migrant education, migrant &amp; seasonal head start, farmworker housing projects, business community, policy makers</td>
<td>Promote local, regional and/or statewide partnerships and collaborations with other organizations that serve this population</td>
</tr>
<tr>
<td>Follow &amp; promote the Campaign on social media channels</td>
<td>Promote the Campaign on your website, during presentations, etc.</td>
</tr>
<tr>
<td>+ Other</td>
<td>+ Other</td>
</tr>
</tbody>
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CAMPAIGN RESOURCES

• Campaign Webpage (NCFH.org)
  • NCFH Tools & Templates
    • Informational Campaign PPT
    • Board Resolution Template
    • Migrant Health Program Self-Assessment Tool
    • MH Action Planning Training & TA
    • Memorandum of Understanding Template
    • Ag Worker Identification Patient Education Digital Tool
    • Archived MSAW Identification, Registration & Reporting webinars (in English & Spanish)
AG WORKER ACCESS 2020 TASK FORCE

• Task Force Co-Chaired by: NACHC/NCFH/NWRPCA

• Composed of Individuals representing:
  • National Organizations: NACHC; NCFH; Farmworker Justice; Health Outreach Partners; National Migrant/Seasonal Head Start Collaboration Office;
  • State/Regional Primary Care Associations – NWRPCA, CO, AZ, CA, FL, NC, MA
  • Community/Migrant Health Centers – NY, TX, IL, PA,
  • Farmworker Housing Projects – Tierra Del Sol
  • Faith/Based Community – Keystone Farmworker Health Program – PA
  • Others: ? Farmers/Growers; Policy Makers; Business Community
CAMPAIGN RESOURCES

- **NCFH Website**
- **Campaign Webpage**
- **NCFH Tools & Templates**
  - Policies & Procedures
  - Registration forms
  - Intake and registration questions to ask
  - Staff training resources
  - Digital Stories on Ag Worker patient registration
NATIONAL TRAINING RESOURCES

The following National Cooperative Agreements (NCAs) offer training and resources to health centers serving the Ag Worker population:

- Farmworker Justice
  [http://www.farmworkerjustice.org](http://www.farmworkerjustice.org)

- Health Outreach Partners
  [http://www.outreach-partners.org](http://www.outreach-partners.org)

- National Association of Community Health Centers
  [http://www.nachc.com](http://www.nachc.com)

- Migrant Clinicians Network
  [http://www.migrantclinician.org](http://www.migrantclinician.org)

- MHP Salud
  [http://www.mhpsalud.org](http://www.mhpsalud.org)

- National Center for Farmworker Health
  [http://www.ncfh.org](http://www.ncfh.org)
Sign up to be part of the Campaign!

JOIN THE AG WORKER ACCESS CAMPAIGN

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Questions?

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