Dear Congressional Leaders:

On behalf of the national organizations listed below, our membership, leadership, employees, customers and patients, we are writing to urge Congress to act immediately to avert a potentially disastrous disruption within our health care system. The scheduled expiration, at the end of FY2015, of dedicated funding streams supporting the operations of Community Health Centers, scholarships and loan repayments through the National Health Service Corps, and primary care training in Teaching Health Centers represents a significant threat to the nation’s primary care infrastructure. We urge Congress to act during the upcoming lame duck session to extend funding for these critical programs in a way that averts this “primary care cliff” and ensures the stability and viability of access to health care in thousands of communities nationwide.

The federal Health Centers program supports the operations of nearly 1,300 health center organizations nationwide, operating sites in more than 9,000 communities. Governed by community boards, health centers deliver a range of primary and preventive care services – including medical, oral health, behavioral health, pharmacy and vision services. Health centers serve as integrated “health care homes” for more than 22 million patients, including nearly 7 million children and more than 268,000 veterans. Health centers employ more than 156,000 Americans, and generate both economic impact and overall cost savings to the health care system measured in the billions of dollars. Were these reductions to go ahead, health centers would lose up to 70 percent of total federal funding, causing site closures, staff layoffs, and most importantly, a loss of access to care for millions of patients.

The National Health Service Corps (NHSC) plays a vital role within a primary care system strained by provider shortages and barriers to access. The NHSC provides scholarships and loan repayment to primary care practitioners – physicians, nurses, physician assistants, oral health and behavioral health professionals – who make a multi-year commitment to service in underserved communities. In 2012, the NHSC placed more than 10,000 providers in Health Professional Shortage Areas (HPSAs) across the country. NHSC providers are a critical element of the primary care workforce, not just in health centers, but in a variety of other care settings in
underserved urban and rural communities. The funding stream that currently supports the NHSC is set to expire at the end of FY2015 – meaning that without action, the program will end completely.

Teaching Health Centers (THCs) are community-based primary care training programs committed to preparing health professionals to serve the health needs of underserved communities. Beginning in 2010, Congress authorized dedicated funding to support the direct and indirect medical education expenses for training residents in new or expanding community-based primary care residency programs. Teaching Health Centers are located in a variety of settings, including urban, rural, and Tribal communities, and serve populations such as veterans and their families, minority communities, older adults, children, and adolescents. During the 2014-2015 academic year, 63 Teaching Health Center Graduate Medical Education (THCGME) programs in 24 states will support more than 550 medical residents. According to the Health Resources and Services Administration (HRSA), physicians trained in health centers are more than three times as likely to work in a health center and more than twice as likely to work in an underserved area as those not trained at health centers. All funding for the THCGME program is set to expire at the end of FY2015, but the recruitment of new residents is being impacted now. Because of this funding uncertainty, the completion of training for many current residents and the admission of new residents are in serious jeopardy.

Taken together, these critical programs generate thousands of jobs, create much needed economic impact in urban and rural communities, and serve as the foundation of access to a health care system moving toward prevention, wellness, quality and cost-savings. The collective impact of the primary care cliff, if not addressed, would be devastating not only to the provider organizations and health professionals directly impacted, but to the patients and communities served by those providers, and to the health care system as a whole. Even now, health centers, residency programs and communities are stifled by the uncertainty caused by this looming funding cliff.

We strongly urge Congress to act during the upcoming lame duck to address the looming shortfall in each of these programs, which work both independently and synergistically to undergird our nation’s health care system, in order to ensure the stability and viability of that system moving forward. We welcome the opportunity to work with Congress to address this vital issue impacting our nation’s health care system.

Sincerely,

National Association of Community Health Centers
9to5
AIDS United
American Academy of Family Physicians
American Academy of Physician Assistants
American Association for Marriage and Family Therapy
American Association of Colleges of Osteopathic Medicine
American Association of Teaching Health Centers
American Cancer Society Cancer Action Network, Inc.
American College of Nurse-Midwives
American College of Osteopathic Internists
American College of Physicians
American Congress of Obstetricians and Gynecologists
American Dental Association
American Dental Education Association
American Dental Hygienists Association
American Federation of State, County and Municipal Employees
American Geriatrics Society
American Medical Student Association
American Nurses Association
American Optometric Association
American Osteopathic Association
American Public Health Association
American Thoracic Society
America's Essential Hospitals
Asian American Psychological Association
Association for Community Affiliated Plans
Association of Asian Pacific Community Health Organizations
Association of Clinicians for the Underserved
Association of Departments of Family Medicine
Association of Family Medicine Residency Directors
Association of Maternal & Child Health Programs
Benco Dental
Breast Cancer Action
Capital Impact Partners
Capital Link
Coalition on Human Needs
Commissioned Officers Association of the U.S. Public Health Service
Community Health Center Capital Fund
Community Reinvestment Fund, Inc.
CSH
Dignity Health
Enterprise Community Loan Fund
Every Child Matters
Families USA
Farmworker Justice
First Focus
GLMA: Health Professionals Advancing LGBT Equality
Health Outreach Partners
Hepatitis Foundation International
IFF
League of United Latin American Citizens
Local Initiatives Support Corporation
Low Income Investment Fund
Mercy Loan Fund
NAADAC, the Association for Addiction Professionals
National AHEC Organization
National Alliance on Mental Illness
National Alliance to End Homelessness
National Asian Pacific American Families Against Substance Abuse
National Association for the Education of Homeless Children and Youth
National Association of Counties
National Association of County and City Health Officials
National Association of Pediatric Nurse Practitioners
National Center for Farmworker Health
National Coalition for Asian Pacific American Community Development
National Coalition for the Homeless
National Coalition on Health Care
National Council for Behavioral Health
National Development Council
National Health Care for the Homeless Council
National Immigration Law Center
National Kidney Foundation
National Law Center on Homelessness & Poverty
National Low Income Housing Coalition
National Network for Oral Health Access
National Network for Youth
National Rural Health Association
National Urban League
National Viral Hepatitis Roundtable
National WIC Association
Nonprofit Finance Fund
North American Primary Care Research Group
OCA - Asian Pacific American Advocates
Opportunity Finance Network
Oral Health America (OHA)
Partners for the Change
Partners for the Common Good
Physician Assistant Education Association
Primary Care Development Corporation
Resources for Human Development
RESULTS
School-Based Health Alliance
Single Stop USA
Society of General Internal Medicine
Society of Teachers of Family Medicine
Southeast Asia Resource Action Center
Special Olympics
Summit Health Institute for Research and Education, Inc.
The Housing Partnership Network
The Reinvestment Fund
Trust for America's Health
USAAction
Welch Allyn

Cc:
The Honorable Harold Rogers, Chair, House Committee on Appropriations
The Honorable Nita M. Lowey, Ranking Member, House Committee on Appropriations
The Honorable Fred Upton, Chair, House Committee on Energy and Commerce
The Honorable Henry Waxman, Ranking Member, House Committee on Energy and Commerce
The Honorable Dave Camp, Chair, House Committee on Ways and Means
The Honorable Sander M. Levin, Ranking Member, House Committee on Ways and Means
The Honorable Barbara Mikulski, Chair, Senate Committee on Appropriations
The Honorable Richard Shelby, Ranking Member, Senate Committee on Appropriations
The Honorable Tom Harkin, Chair, Senate Committee on Health, Education, Labor and Pensions
The Honorable Lamar Alexander, Ranking Member, Senate Committee on Health, Education, Labor and Pensions
The Honorable Ron Wyden, Chair, Senate Committee on Finance
The Honorable Orrin Hatch, Ranking Member, Senate Committee on Finance