



October 19, 2023

Senator Bernie Sanders
Chairman
Senate Committee on Health, Education,
Labor, and Pensions
United States Senate
Washington, DC 20510

Senator Roger Marshall
Ranking Member
Subcommittee on Primary Health and
Retirement Security
United States Senate
Washington, DC 20510

Dear Chairman Sanders and Ranking Member Marshall,

On behalf of the 1,487 Community Health Centers nationwide, I write to express National Association of Community Health Centers (NACHC)'s strong support for the *Bipartisan Primary Care and Health Workforce Act*. We look forward to continuing to work with you as the bill progresses and pushing for a robust bipartisan legislative package that includes increased funding for health centers and primary care workforce programs.

Health centers have provided high-quality, affordable primary and preventive care, dental, behavioral health, pharmacy, vision, and other complementary services to America's most vulnerable patients for nearly sixty years. They represent the best part of the nation's health system. Today, 1,487 health center organizations have more than 15,000 locations, employing over 300,000 qualified and dedicated staff. Additionally, the health center model reflects the most diverse part of our health system with locations in big cities and suburbs, to small towns and frontier, island, and rural communities. That diversity extends to our patients, almost two-thirds of whom are racial or ethnic minorities, and the payers they work with, from Medicare, Medicaid, commercial plans, and self-pay patients.

Earlier this year, a NACHC report spotlighted that barriers to healthcare in underserved communities prevent more than 100 million Americans from accessing primary care.¹ Having a usual source of primary care is associated with decreased emergency department use, lower healthcare costs, and improved health outcomes. Health centers are part of the solution to fixing these disparities in access to care. NACHC is thrilled that the *Bipartisan Primary Care and Health Workforce Act* realizes the potential of health centers to improve access to primary care in communities across the country.

As you know, funding within the Community Health Center Fund has stayed static or decreased due to budget sequestration for the last five years. This is despite the growth in the number of sites operated and the number of patients being seen by health centers. Earlier this year, NACHC published research showing how rising costs and a growing patient population have eroded the

¹ "Closing the Primary Care Gap: How Community Health Centers Can Address the Nation's Primary Care Crisis," February 2023. Available at: <https://www.hcadvocacy.org/wp-content/uploads/2023/02/Closing-the-Primary-Care-Gap-Full-Report-2023-digital-final.pdf>.

purchasing power of the Community Health Center Fund.² Additionally, NACHC has released findings showing how additional resources would allow Community Health Centers to deepen their services to current patients by expanding access to mental and behavioral health, substance use disorder, vision, and oral health services.³

The *Bipartisan Primary Care and Health Care Workforce Act*'s increased funding levels demonstrate a strong commitment to existing health centers through a 15 percent base grant adjustment. This allocation of resources would enable health centers to adjust to rising costs due to inflation and tight labor market conditions that have led to significant new costs. Additionally, your legislation would support health centers' ability to expand operating hours, increase mental and behavioral health services, and set up new school-based service sites. The commitment of \$3 billion for capital projects would allow Community Health Centers to expand facilities, especially for increased dental and mental health services. There is no doubt these historic investments would reduce the burden of illness, mitigate health disparities, and reduce overall healthcare spending across the country.

Additionally, NACHC has long called on Congress to make further investments in the primary care workforce and create new innovative programs to support the development of pipeline and career development programs to boost recruitment and retention.⁴ As such, NACHC strongly supports provisions in your legislation that would triple funding for the National Health Service Corps and support 20,000 new loan repayment awards and 2,100 scholarship per year for healthcare students, residents, and professionals. Your bill's five-year extension of the THCGME program will help train up to 2,800 new physicians by 2031. NACHC is also excited about Section 212 of the bill, which would support innovative and replicable community-led workforce solutions that are building the next generation of healthcare professionals in communities nationwide.

Again, NACHC appreciates your steadfast support of health centers and strongly supports the *Bipartisan Primary Care and Health Workforce Act* because of its important investments in our primary care system. I commend you for your leadership on these important issues and look forward to working with you to enact bipartisan solutions for our nation's health and economic challenges.

Sincerely,



Kyu, Rhee, M.D., MPP
President and Chief Executive Officer

² "The Overlooked Decline in Health Center Funding," National Association of Community Health Centers, March 2023. Available at: https://www.hcadvocacy.org/wp-content/uploads/2023/03/OverlookedDeclineCHCFunding_2023.pdf.

³ "2023 Health Center Service Expansion," National Association of Community Health Centers, February 2023. Available at: https://www.hcadvocacy.org/wp-content/uploads/2023/03/ServiceExpansion_IssueBrief_2023.pdf.

⁴ "Health Center Workforce: Caring for Today's Patients, Preparing for Tomorrow," March 2023. Available at: https://www.hcadvocacy.org/wp-content/uploads/2023/03/Workforce_PolicyPaper_2023.pdf.