

Commentary: Extend the funding for health centers

By Jana Eubank, For the Express-News Aug. 12, 2020



A nurse with a community health center in Connecticut administers a COVID-19 test. Community health centers provide care to all who need it, regardless of ability to pay.

Photo: Ned Gerard /Hearst Connecticut Media

This week is National Health Center Week, a celebration of the work and impact of the country's community health centers.

Yet amid the celebrations of these 50-year-old-plus institutions and their vital role in our nation's health care system, a threat to their future lurks. Unless Congress acts before November to extend the Community Health Center Fund, which provides more than \$180 million annually to Texas' community health centers, hundreds of thousands of Texans will lose access to essential health care.

Initially a demonstration project under President Lyndon B. Johnson's War on Poverty, community health centers — or federally qualified health centers — have evolved into sophisticated providers of primary, chronic, mental health, substance use, dental, vision and pharmacy care, as well as programs and services that promote health and well-being. They provide care to all who need it, regardless of ability to pay, and serve as medical homes for the most vulnerable and underserved. Today, there are more than 1,400 federally qualified health centers, or FQHCs, across the country, including 73 in Texas that care for 1.5 million people each year.

In the health care community, we often talk about “access to care” and assess policies according to whether they will enhance or inhibit the availability and affordability of health care, particularly for those with lower incomes or disabilities, the elderly, veterans, homeless individuals or those without health insurance. For FQHCs, increasing access to care means making it physically, financially, linguistically and culturally accessible.

Texas’ 73 community health centers, or CHCs, operate more than 570 sites in frontier, rural and urban neighborhoods where need is greatest and medical care is most lacking. CHCs use a sliding fee scale so that income is not a deterrent to getting essential care. To eliminate linguistic, environmental and other barriers, CHCs provide enabling services, which are essential to making health care attainable and to achieving good health. These enabling services include transportation, interpretation, health education, environmental health risk reduction and assistance with enrolling in insurance coverage.

The CHC care model is effective at both generating cost savings and improving care outcomes. Annually, they generate \$24 billion in savings for the health care system. By providing timely, affordable and accessible primary care, chronic care management and prenatal care, CHCs reduce avoidable and costly hospital emergency department visits, admissions and readmissions, and the risk of low birth weight deliveries, and improve maternal and newborn outcomes.

And CHCs have been, and will continue to be, indispensable amid COVID-19. They have tested more than 160,000 people, relieving the burden on local public health departments and hospital emergency departments. They have also kept their doors open — often through telehealth — so no Texan loses access to essential health care.

Continuing this work depends on stable and reliable federal funding. While health centers rely on numerous funding sources, including third-party reimbursement, the Community Health Center Fund is foundational to their ability to provide care.

This week, we celebrate the legacy of CHCs. We ask Congress to join us by passing a long-term funding bill to secure the Community Health Center Fund so that legacy can continue.

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