Ohio Association of Community Health Centers
House Finance Committee
Testimony on Substitute House Bill 166 – May 2, 2019

Chairman Oelslager, Ranking Member Cera and Members of the House Finance Committee, thank you for the opportunity for the Ohio Association of Community Health Centers (OACHC) to provide testimony on Substitute House Bill 166.

The Ohio Association of Community Health Centers (OACHC) represents all of Ohio’s 55 Federally Qualified Health Centers and FQHC Look-Alikes (more commonly referred to as Community Health Centers, or CHCs), providing care to more than 780,000 Ohioans across 345 healthcare delivery sites spread throughout the state. Community Health Centers are non-profit health care providers that deliver affordable, quality comprehensive primary care to medically underserved populations, regardless of insurance status.

For more than 50 years, Community Health Centers have provided integrated whole person care, often times providing dental, behavioral, pharmacy, vision and other needed supplemental services under one roof.

Health Center patients are among the nation’s most vulnerable populations – people who are isolated from traditional forms of medical care because of where they live, who they are, the language they speak, and their higher levels of complex health care needs. With a proven record of delivering high-quality, low-cost health care, coupled with a strong presence in vulnerable/highest need communities – including impoverished urban neighborhoods, small towns and rural counties where poverty and unemployment are historically high -- Health Centers produce positive results for their patients and the communities they serve while their costs of care rank among the lowest.

Support and Growth for Front-Line Providers
According to U.S. Department of Health and Human Services, Health Resources and Services Administration Bureau of Health Workforce, there will be a 1,200 primary care practitioner shortage by 2025. Further, the Congressional Budget Office notes that there will be an 18 percent increase in demand of primary care physicians through 2023. Coupled with the United States not only facing a shortage but also a maldistribution of primary care physicians, this deficit is of particular concern given that the elderly population continues to grow, and many rural, poor, and minority communities remain medically underserved. However, fewer medical school graduates are choosing primary care as a specialty today than in the past.

The above statement is true not just for physicians, but for many primary care providers. Progress is being made to find students, but there is a growing shortage of clinical sites in the community in which to train them. Recognizing that need, Community Health Centers, along with the Administration and the General Assembly, created the FQHC Primary Care Workforce Initiative (PCWI) during the FY16-17 operating budget.
This line item, housed in the Department of Health, is the only primary care workforce strategy exclusively targeting underserved populations in the state. The funds are used to provide a stipend to the Community Health Centers who bring on primary care students (medical and dental students, APNs, PAs, and behavioral health) for clinical rotations and expose students to the advanced Patient Centered Medical Homes (PCMH) model of practice and provide a standardized, high-quality educational experience. Checks and balances are built into the program to ensure quality rotations are provided: only Community Health Centers nationally recognized as a PCMH are eligible to participate, and the stipend to the Health Center is only awarded if the student rates their experience 4 out of 5 or higher in their student evaluation. This Program helps health centers address the loss of productivity associated with precepting students.

To date the program is at teaching capacity. Our three-year data (July 1, 2015 to June 30, 2018) shows:

- 40 participating Health Centers
- 3,076 Students Precepted
- 92 Health Professional Programs representing 50 schools/universities placed students
- Student evaluations of their clinical experience received at the Health Center averaged 4/5

Ohio’s Community Health Centers stand ready to expand access to high quality, affordable primary and preventive care to underserved Ohioans, and are training needed health care professionals who will stimulate economic activity in some of our most economically hard-pressed communities.

Substitute HB 166 unfortunately does not include funding for the Ohio Primary Care Workforce Initiative (ODH Line 440-465). Now more than ever before, we must grow our primary care workforce, not remove capacity to do so particularly in our underserved areas. Therefore, we respectfully request funding for this critical pipeline initiative (OPCWI) be fully restored back to 2016/17 funding levels so Ohio Community Health Centers can continue to teach, inspire and put to work our next generation of the primary care workforce.

Summary
In closing, as we think about reinventing our health care delivery system to emphasize prevention and primary care, push to deliver more cost-effective and patient-centered comprehensive care for all Ohioans, including those on their path to recovery, Community Health Centers are uniquely positioned to continue to lead this transformation and make it a reality. We look forward to partnering with the Ohio General Assembly to keep Ohio healthy. On behalf of our 55 member Health Centers and 780,000+ patients served, the Ohio Association of Community Health Centers appreciates the opportunity to submit testimony on Sub. HB 166. Please contact Julie DiRossi-King at jdirossi@ohiochc.org; 614.884.3101 with questions or further information.