



September 19, 2017

The Honorable Paul Ryan, Speaker of the House
 The Honorable Senator Tammy Baldwin
 The Honorable Senator Ron Johnson
 The Honorable Congressman Mark Pocan
 The Honorable Congressman Ron Kind

The Honorable Congresswoman Gwen Moore
 The Honorable Congressman James Sensenbrenner
 The Honorable Congressman Glenn Grothman
 The Honorable Congressman Sean Duffy
 The Honorable Congressman Mike Gallagher

Dear Members of Wisconsin’s Congressional Delegation,

We know there is much to do in the month of September, but we urge you to address the expiration of funding for Federally Qualified Health Centers (FQHCs), the National Health Service Corps (NHSC), the Children’s Health Insurance Program (CHIP), the Medicare Low-Volume Hospital Adjustment (LVA) and the Medicare Dependent Hospital (MDH) designation by the September 30 deadline. As partners and stakeholders in support of public, community, and population health in Wisconsin, we rely on these programs to serve Wisconsin’s most vulnerable residents.

Our FQHC partners care for the primary care, behavioral health, oral health and other needs of our state’s most vulnerable residents. FQHCs and other safety net entities, in turn, rely on the NHSC to ensure they have providers willing to practice in underserved rural and urban areas of the state. The Children’s Health Insurance Program (CHIP) supports access to care for uninsured kids whose families may not be eligible for Medicaid. The LVA and MDH rural hospital adjustments were established to recognize the vital role of rural hospitals serving Medicare beneficiaries. These adjustments help to sustain and improve access to care in rural communities throughout the state.

FQHCs, the NHSC, CHIP, the LVA and the MDH were funded through MACRA for the past two years. Unless Congress acts before September 30, funding for each of these programs will expire, resulting in a 70% cut to federal funding for FQHCs, the elimination of the NHSC, the elimination of the CHIP program, and the elimination of the rural hospital adjustments.

We urge you to act swiftly and decisively to secure funding for FQHCs, the NHSC, CHIP, the LVA and MDH by the September 30 deadline.

The impact in Wisconsin would be severe. FQHCs in Wisconsin receive \$41.4 million annually to provide care on a sliding fee scale for low-income people in Wisconsin, to provide enabling services like transportation and care management, and to develop services in other high priority areas like substance abuse services. With a 70% cut, FQHCs in Wisconsin would receive just \$12.1 million annually – and those critical services would be slashed. We estimate that over 30,000 patients would lose access to care in Wisconsin alone and the viability of several FQHCs would be threatened. Without a fix, the NHSC program would be eliminated, and would impact 150 FTE clinicians, including nearly 50 FTE dentists, that are placed in high need areas of Wisconsin. Access to health care for Wisconsin children and families will also be jeopardized if Congress fails to authorize additional CHIP funding. The estimated impact of could be as much as \$113 million in state fiscal year 2018-2019. Finally, access to care in rural areas will be impacted without LVA and MDH adjustments. The LVA impacts 10-20 Wisconsin hospitals annually. The MDH impacts 200 hospitals nationally, including several in Wisconsin each year.

During this time of heightened ambiguity in the health care sector, we need these safety net programs now more than ever. **Again, we ask that you take action by ensuring that FQHCs, the NHSC, CHIP, the LVA and the MDH have stable and level funding by the September 30 deadline.**

Thank you in advance for your consideration and action.

Sincerely,

Stephanie Harrison
CEO
Wisconsin Primary Health Care Association

Eric Borgerding
President and CEO
Wisconsin Hospital Association

Tim Size
Executive Director
Rural Wisconsin Health Cooperative

Robert Foulks
Interim CEO
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Nancy Eggleston
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John Eich
Director
Wisconsin Office of Rural Health

cc: Governor Scott Walker
Linda Seemeyer, Secretary, Department of Health Services
Michael Heifetz, Medicaid Director, Administrator, Division of Health Care Access and Accountability