

COMMUNITY HEALTH CENTERS & HEALTH REFORM

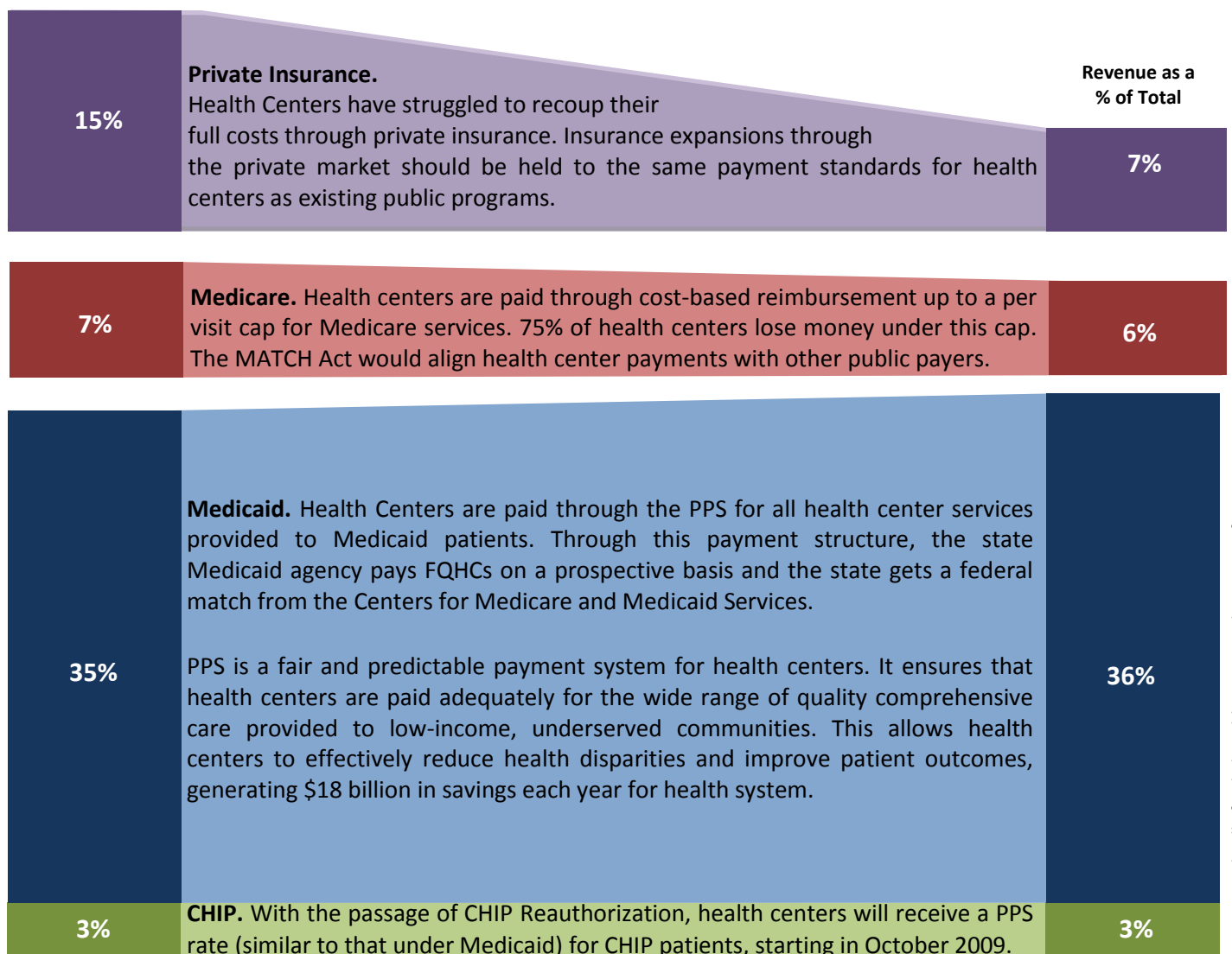
Extending Payment Protections for Federally Qualified Health Centers

Today, Federally Qualified Health Centers (FQHCs) are the principal providers of care for 1 of every 8 Medicaid recipients, 1 of every 9 enrollees in the Children's Health Insurance Program (CHIP), and more than 1 million Medicare beneficiaries. These public programs depend on Health Centers to deliver quality care to their beneficiaries and Health Centers have produced savings of more than 30 percent for their publicly insured patients.

Bipartisan majorities in Congress have widely recognized the importance of the Federally Qualified Health Center (FQHC) Medicaid Prospective Payment System (PPS) and recently created a similar payment structure under CHIP. The Medicare Access to Community Health Centers (MATCH) Act of 2009 (H.R. 1643/S. 648) would align health center payments across all current public payers. **As Congress moves toward broader health reform, it is critical that this alignment take place among all sources of health care payment to ensure that Health Centers can continue to provide affordable, accessible, high quality health care for their patients, regardless of payer source.**

Patients as a
% of Total

Health Center Patients & Revenues: 3rd Party Payers



Source: Federally-funded Health Centers only. 2007 Uniform Data System, BPHC, HRSA, DHHS.