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Congressional inaction could strand millions without health care

By Lora Hines | February 19, 2015



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Gary Coronado/Staff

Dr. Peter Palmieri, of the pediatrics group, examines Fatimah Hussein, seven, while her mother Hiba Kadham and newborn brother Mosa Hussein, 20-days, looks on, at HOPE Clinic, a community health center established by the Asian American Health Coalition, Tuesday, Feb. 10, 2015, in Houston, Texas. (Gary Coronado / Houston Chronicle)

Millions of low-income Americans - both insured and not - could lose medical, dental and mental health services if Congress fails to reauthorize spending billions of dollars on the national network of community health centers.

The centers, including about 85 in the Houston area, are charged with increasing medical access by providing services in poor urban and rural neighborhoods. They were begun 50 years ago as part of President Lyndon Johnson's War on Poverty, and provisions in the Affordable Care Act dramatically increased federal support.

But the ACA portion of that funding is now up for reauthorization. If Congress fails to act on it by Sept. 30, the clinics cumulatively could lose more than half of what they currently receive, forcing almost all of them to close, cut services or raise fees to survive. Their patients, some of the nation's neediest who often have few other affordable health care alternatives, probably would resort to using hospital emergency rooms for medical treatment, costing billions of dollars, advocates and experts said.

"Then, we will all end up paying," said Daniel Hawkins, senior vice president of public policy and research for the National Association of Community Health Centers in Bethesda, Md. "We will all pay a lot more later."

In 2011, Congress set aside \$11 billion under the health law to distribute to the health centers over five years to expand services as more people became insured and needed providers to care for them. That funding, which expires after Sept. 30, has supplemented about \$1.5 billion in discretionary funding community health centers have received annually.

Community Health Centers used to receive nearly \$2.2 billion annually before passage of the Affordable Care Act.

Without action, more than 1,300 health center organizations that operate about 9,000 sites serving an estimated 23 million patients nationwide will face dramatic budget shortfalls and many could close or lay off staff by the end of the year, Hawkins said. Centers depend on Medicaid and federal, state and local grants and contracts.

"It's pretty bad," Hawkins said of the situation. "About 1.1 million people will lose care. The funding supports care for a lot of people who are working hard every day, trying to make ends meet."

In Texas, more than 70 community health center organizations provide care at about 350 clinics, treating nearly 1.1 million Texans, regardless of ability to pay.

Although community health centers historically have received bipartisan support, finding a funding solution won't be simple, experts and advocates said. House members and senators elected based on vehement opposition to the Affordable Care Act probably won't support another round of mandatory funding under the law. Members fiercely opposed to annual appropriations increases also won't be easily swayed.

"What I find perplexing is the funding kept increasing, then it got soft," said Devon Herrick, a senior fellow at the National Center for Policy Analysis, a conservative Dallas think tank. "They've been deepening funding for them and then made funding in 2016 uncertain."

In 1965, Congress approved funding for the first two neighborhood health center projects, one in Boston and the other in the Mississippi Delta town of Mound Bayou, about 100 miles southwest of Memphis.

Community health centers experienced some of their most significant growth under President George W. Bush, whose administration opened and expanded almost 1,300 clinics across the country.

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No matter whether they're in the heart of Houston's bustling Chinatown or in the more rural Conroe area, these centers often are the only place for low-income residents, especially those without transportation, to go for treatment of chronic conditions, cancer screenings or prenatal and pediatric care.

According to Hawkins' organization, community health centers save taxpayers about \$24 billion annually in emergency room treatments, hospital stays and specialty care by providing preventive care.

Even as millions of people buy insurance or receive government health coverage under the Affordable Care Act, community health care centers still provide care for millions of people in communities with few provider choices.

In a study released last summer, researchers at the Milken Institute School of Public Health at George Washington University found community health centers will have to reduce services or close without renewed funding at a time where millions more people have become insured or gained health coverage under Medicaid.

"A shortfall in federal grants after the 2015 funding cliff would leave health centers unable to sustain current caseloads, sharply damaging primary care access for the insured and uninsured alike and potentially leading to more costly increases in specialty, emergency and inpatient care," the report states. " ... Continued growth of community health centers is a critical element of policies to support the primary care infrastructure of the nation."

Lawmakers have been aware of the impending community health center funding cliff for at least a year. U.S. Reps. Gene Green, D-Houston, and Kay Granger, R-Fort Worth, collected 250 signatures on a letter in support of finding a solution. Green said the dramatic loss of community health center funding would be "devastating" to residents in his east Houston district, an area that needs more services, not less.

"There is a high number of people who work without having insurance," he said. "Loss of funding could end up costing literally tens of thousands of dollars."

"People are talking about the problem," said Jose Camacho, executive director of the Texas Association of Community Health Centers. "But no legislation has been drafted. There are areas of the state where we are the only provider in the county. I'm fearful it may take a rude awakening before Congress realizes what a vital resource it's squandering."

In east Houston, more than 10,000 patients seek care annually from El Centro de Corazon's three clinics, which provide medical, dental and mental health services. Most of them are poor and uninsured.

On a recent morning, patients began filling the waiting room at El Centro's Magnolia health center. The patients, mostly young women, watched a Spanish-language talk show on Univision as they waited. They were unaware of the precariousness of the center's financial status.

"This is one of Houston's poorest areas," said Marcie Mir, El Centro's CEO. "We have a sliding scale. People pay what they can. Sometimes that's \$5. We will not turn them away because they cannot pay."

Mir said the organization could lose as much as \$1.2 million in funding for its annual \$1.7 budget if Congress can't find a solution. She and other community health center leaders have said little publicly about the funding dilemma because they don't want to scare patients, Mir said. She and her organization's board of directors started discussing it about six months ago.

"This has been an eye-opener for me," Mir said of the potential funding crisis. "Of how big of an impact this can have on us and in Houston. It becomes a scary thought. There's no way we could make (the loss) up."

El Centro patient Mireya Gonzalez said she would lobby to ensure the clinic receives the money it needs. Through an interpreter, the 36-year-old Houston mother of three said a friend referred her to El Centro three years ago. Gonzalez, an uninsured small business owner, said she likes the clinic because it's clean and the staff is friendly.

"It would be harder for me because the other clinics are more expensive," Gonzalez said. "I would have to think about where to go. Not just me, everybody."



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Reporter

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