

POLICY & ADVOCACY

FINANCING REFORM/ VALUE-BASED CARE

For Community Health Centers



32.5M+

Patients Served at CHCs Annually \$63.4B

Generated by CHCs in **Economic Activity**

\$25.3B

Saved by CHCs Annually for Medicaid & Medicare Programs

FINANCING REFORM

Community health centers (CHCs) are strugaling to survive under current financing structures which do not allow the flexibility necessary to deliver the highest quality primary care. CHCs are eager to take on more responsibility for patient care and costs.

VALUE-BASED CARE

Value-based care, a payment model that rewards healthcare providers for the quality of care they give to patients, shows promise. Unfortunately the models implemented to date often do not allow CHCs the autonomy and flexibility to make an impact.



GUIDING PRINCIPLES

- Policymakers should support CHCs moving toward greater responsibility for the patients in their care.
- Public and private payers should focus on a population health approach that rewards value, not volume
- Value-based care at CHCs should facilitate team-based care that leverages all providers proven to deliver effective service.









OUR POLICY PRIORITIES

FINANCING REFORM/ VALUE-BASED CARE

Together, with our members and your support, we can realize positive change across the healthcare system in the following ways:

- Congress should examine the most effective ways to finance primary care
- Continue to provide opportunities to 2 test new financing arrangements for CHCs through Centers for Medicare & Medicaid Innovation
- CMS should partner with states seeking to establish, expand, or improve their 3 alternative payment models with CHCs
- CMS should clarify and improve policy related to Medicaid managed care organizations' ability to support CHCs



