Fall 2026 Grassroots Advocacy Toolkit

ACH | ADVOCATES FOR COMMUNITY HEALTH

LOCAL VOICES. NATIONAL IMPACT.

Protect 340B. Strengthen funding. Build the workforce.

Congressional outreach | Media relations | Social media

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Take action this week

Bring federal policy home. Show Congress what is at stake for your patients and community.

1

HAVE 5 MINUTES?

Make a call

Call 1-877-224-2015, name a service supported by 340B savings and ask for support to pass the 340B Rebate Model Delay Act

2

HAVE 15 MINUTES?

Send a personal email

Connect a policy priority to care in your community.

3

HAVE ONE HOUR?

Start a conversation

Request a meeting, invite a site visit, or pitch a reporter.

Close the loop

Share congressional responses and next steps with ACH at info@advocatesforcommunityhealth.org

OUR POLICY ASKS

- **Thank you for increasing funding to a $4.6 billion yearly rate in 2026 for the Community Health Center Fund, and for increasing funding for the National Health Service Corps and the Teaching Health Centers Graduate Medical Education Program.**

- Health Center Funding: Please take immediate action to increase the Community Health Center Fund to $7.87 billion annually for at least three years. We also ask that $2.88 billion be allocated in discretionary funding for the Health Center Program in Fiscal Year 2027. Action to support health centers at the highest possible investment is more urgent than ever before.

- National Health Service Corps Funding: Please act immediately to invest at least $950 million in mandatory funding annually through a multi-year reauthorization for the National Health Service Corps. This investment will go directly into rural and underserved communities, supporting the workforce necessary to ensure ongoing access to care for patients and communities when and where they need it most.

- 340B Drug Discount Program: We ask that Congress act immediately to pass the 340B Rebate Model Delay Act and comprehensive 340B reform legislation that increases transparency and accountability for participating entities and ensures program stability and longevity for safety net providers. Continued delay to comprehensive reform has a disproportionate impact on health centers and a dire ripple effect on patient access to care and sustained access. Please tell your members of Congress that you do NOT support piloting a rebate model in the 340B Program.

- Workforce Development: Please cosponsor the Developing the Community Health Workforce Act, HR 8629. This legislation strengthens and expands the community health center workforce by providing funding, flexibility, and policy tools to recruit, train, and retain health center staff, especially in rural and underserved communities.

TALKING POINTS

1. Thank you for increasing funding to a $4.6 billion yearly rate in 2026 for the Community Health Center Fund, and for increasing funding for the Teaching Health Centers Graduate Medical Education (THCGME) program in fiscal year 2026, with gradual increases until it is funded at $300 million in FY29, and an increase for the National Health Service Corps (NHSC) mandatory funding to $350 million for 2026.

2. **<u>Health Center Funding:</u> We urge lawmakers to make a strategic investment in the Community Health Center Fund by increasing the CHCF to $7.87 billion annually for at least three years. We also ask that $2.88 billion be allocated in discretionary funding for the Health Center Program in Fiscal Year 2027.**

    - Congress must fund the Community Health Center Fund with a strong baseline and regular increases to shore up this critical safety net when it expires on December 31, 2026.
    - Together with increased annual appropriations, an increased Community Health Center Fund will allow health centers to grow in four key areas: operations, infrastructure, workforce, and innovation.
    - Over a third of Americans do not have access to primary care, which has been shown to prevent and control chronic diseases. A bold investment in the Health Center Program fills a very real need – greater access to the gold standard of primary care for healthy American communities.
    - CHCs are the best investment you can make in health care, saving money by preventing costly complications, creating jobs, and keeping Americans healthy. o Research shows that for every $1 invested in primary care, like the care provided at health centers, $13 is saved in downstream costs through the prevention of expensive complications and emergency room visits.
        - Further, the Congressional Budget Office recently reported that funding CHCs leads to more cost-effective patient care than the care than patients would otherwise receive, saving billions for the Medicaid and Medicare programs.
        - CHCs are non-profits as well as community-owned and operated, with patient-led boards that ensure the needs of the local community are met.

3. **<u>National Health Service Corps Funding</u>: ACH urges Congress to invest at least $950 million in mandatory funding annually through a multi-year reauthorization for the National Health Service Corps to ensure that rural and underserved communities can access high-quality health care.**

    - As a nation, we are facing severe health care workforce shortages, particularly in underserved and rural communities.
    - Investing in the National Health Service Corps builds long-term capacity through scholarships and loan repayment programs to health care professionals who serve where they are needed most.

TALKING POINTS

- Today, over 18,000 NHSC clinicians are delivering primary, dental, and mental health care at 8,400 community health centers, reaching 18.9 million patients.
- The National Health Service Corps helps health centers recruit and retain a skilled, mission-driven workforce, from front office staff to physicians and behavioral health providers.
- On average, each additional National Health Service Corps behavioral health staff was associated with a reduction of $3.55 of behavioral health care costs per visit at community health centers. In rural health centers, they saved $7.95 per visit.

4. 340B Drug Discount Program: We urge Congress to pass comprehensive 340B reform legislation that increases transparency and accountability for participating entities and ensures program stability and longevity for safety net providers.

- Non-profit community health centers are a prime example of the intent behind the 340B program's creation: to maximize federal investment and expand care to underserved communities as effectively as possible.
- Health centers only make up about 6% of the purchases in the 340B program, but their participation has an outsized impact on their ability to serve their communities.
- A recent analysis of ACH member data shows that one in every four 340B dollars supports care for rural Americans.
- These resources are reinvested directly into patient services, including:
  - Keeping rural clinics open
  - Expanding telehealth services
  - Operating mobile and school-based clinics
  - Providing transportation and other enabling services
  - As required by law and regulation, CHCs reinvest every dollar of program income (including 340B savings) back into patients and their care.
  - Data has shown that health centers' grants and payer reimbursements consistently fail to cover the cost of the comprehensive services provided at community health centers. 340B savings can help make up for this shortfall.
  - Health centers rely on 340B to help stretch federal dollars to serve underserved communities - the intent of the program - but program benefits are eroding due to the actions of manufacturers, PBMs, and insurance companies, and the rebate model being advanced by HHS.

- **340B Program Reform**
  - Reform of the 340B Program is long overdue, but it must be achieved without destabilizing our country's safety net.
  - We will support reform legislation if it results in a net positive impact for health centers, and if the process is clear, transparent, and inclusive.

TALKING POINTS

- It should hold entities accountable for the use of their 340B savings, and entities should be required to maintain auditable records to document compliance.
- We are committed to working with lawmakers, 340B program stakeholders, and other interested parties to identify policy changes to restructure this program in a way that most benefits patients and their communities.

- **340B Rebate Model Pilot Program**

  - **The ACH-led, bipartisan 340B Rebate Model Delay Act was introduced in the House on October 9, 2026 which would delay the rebate model for two years for all covered entiries.**
  - The proposed Rebate Model Pilot Program will require community health centers and other covered entities to pay the "sticker price" when they purchase drugs, as opposed to receiving the discounted price, as the program is currently structured.
  - The Pilot Program puts an unfair financial burden on health centers - the entities that can least afford it.
    - UPFRONT COST - Health centers are projecting increased costs in the hundreds of thousands of dollars to go out of pocket for drugs.
    - LOST SAVINGS - Others are saying they will forgo prescribing certain medications to patients, so health centers will lose access to savings and patients will lose access to medications.
    - ADMINISTRATIVE BURDEN - The increased administrative burden and financial risk is expected to be significant and will limit health centers' ability to provide high-quality and comprehensive care using 340B savings.
      - Health centers will have to add senior-level staff with the experience and sophistication to track rebates across multiple different models, third-party administrators (TPAs), and contract pharmacies. They will need to submit data reports and submit disputes when manufacturers do not comply.
    - **Please tell your members of Congress that you support the 340B Rebate Model Delay Act and you do not want a rebate model**

5. The Developing the Community Health Workforce Act, HR 8629 (HOUSE ONLY)

- Please cosponsor the Developing the Community Health Workforce Act, HR 8629.
- This legislation strengthens and expands the community health center workforce by providing funding, flexibility, and policy tools to recruit, train, and retain health center staff, especially in rural and underserved communities.
- Health centers serve nearly 34 million patients nationwide, yet workforce shortages threaten access to care, especially in rural and underserved communities.
- All communities need a strong CHC workforce to ensure timely, accessible, and high-quality care.
- Investing in local talent builds a sustainable healthcare pipeline that strengthens communities for the long term with job creation, greater efficiency, and better patient outcomes.

TALKING POINTS

- H.R. 8629 creates a sustainable healthcare workforce pipeline, offering:
  - Priority for Rural & Underserved Communities: The bill prioritizes National Health Service Corps assignment applications associated with health centers and rural health clinics.
  - Local Workforce Loan Repayment & Grant Funding: Through new grants and loan repayment options, CHCs can better recruit, retain, and train needed providers.
  - Support for Grow-Your-Own Workforce Development: Integrates CHCs into federal apprenticeship programs and supporting partnerships with local community colleges. This enables hiring from within, creating more local jobs, and ensuring longer-term stability for patients.
  - Expanded Clinical Capacity: Partnerships between hospitals and CHCs will support training of more medical residents in community-based settings by allowing qualifying hospitals to expand their resident training capacity.
  - Enhanced Team-Based Care: The bill authorizes reimbursement for behavioral health, peer support, and case management services under Medicare & Medicaid, expanding access to integrated, team-based care. By authorizing reimbursement for behavioral health practitioners, case managers and other specialists, staff can work at the top of their license, reducing provider burnout and improving care for rural and underserved populations.

HOW TO ENGAGE WITH YOUR LEGISLATORS

Meeting With Your Legislators

No one is more qualified to help guide members of Congress as they create, debate, and enact health care policy than those who deliver quality care to patients every day. Consider meeting with your federal legislators in your district to advocate for CHC funding in your community.

- Find contact information for your Representative's office by visiting: http://house.gov/representatives
- Find contact information for your Senator's office by visiting: https://senate.gov/senators/senators-contact.htm.
- You can also contact your Senator or Representative's office by calling the U.S. Capitol Switchboard at 202-224-3121 and asking for your Senator or Representative's office.

If you need help setting up a meeting, please contact ACH at info@advocatesforcommunityhealth.org.

Email Template for Meeting Request

Dear [Senator/Representative] [Last Name],

I hope you are well. My name is [Your Name], and I serve as [Your Title/Role] at [Your Organization], a community health center serving [brief description of the population or area you serve].

I'm reaching out to respectfully request a meeting with you or your staff to discuss the urgent need for Community Health Center funding reauthorization. As you know, CHCs are the backbone of primary care for nearly 34 million people nationwide—including [number] right here in your district. Without timely reauthorization and stable long-term funding, the services our patients rely on—from preventive care to chronic disease management—are at serious risk.

We would be grateful for the opportunity to share how this funding directly supports your constituents and what's at stake if Congress does not act. We are happy to meet at your convenience, either in person or virtually, and will accommodate your schedule.
Thank you for your leadership and your ongoing support of community health centers. I look forward to the opportunity to connect.

Please let me know what dates work well for [Senator/ Representative] to meet. I value [Senator/Representative] name's leadership in keeping our patients and community name healthy.

Sincerely,
[Name, Title]

HOW TO HOST YOUR LEGISLATORS

Coordinating a Site Visit

Site visits are a great way to show your lawmaker the impact of the services you provide to the community, and the impact that funding cuts will have on your ability to deliver those services.

To make a site visit request, visit your Senator's or Representative's official website and go to the "Contact" or "Services" tab to locate a "Meeting Request" or "Schedule a Visit" form.

Sample Site Visit Agenda (60 minutes)

- 10:00 AM – Welcome remarks from the CEO
- 10:15 AM – Tour of facility and introduction to key staff
- 10:30 AM – Discuss funding and impacts
- 10:45 AM – Photo and formal policy ask
- 11:00 AM – Meeting concludes

Email Template for Site Visit Request

Dear [Senator/Representative Last Name],

I hope this message finds you well. On behalf of [Name of Health Center], I would like to extend a warm invitation to visit our facility here in [City/Town] to see firsthand the impact of Community Health Center funding on the families and communities you represent.

Community Health Centers like ours provide high-quality, cost-effective care to nearly 34 million Americans, including veterans, working families, children, and individuals in rural, urban, and underserved areas. In [Your District/State], we serve [# of patients served annually]—many of whom would have few or no options for care without us.

With CHC funding up for reauthorization in December 2026, recent legislation passed to reduce Medicaid funding, and a 340B Drug Pricing Program Rebate Model set to take effect in 2027, this is a critical moment for the future of our sustainability. We would welcome the opportunity to show you how federal investments directly support patient care, job creation, and cost savings in your district. It's also a chance to hear directly from patients and providers about what's at stake.

We are flexible and happy to work with your team to find a convenient date and time.

Please let us know if we can schedule a visit in the coming weeks. We deeply appreciate your leadership and look forward to the opportunity to connect in person.

Warm regards,
[Your Full Name]
[Title]

LEVERAGING THE MEDIA

Proactively Engaging the Media with Storytelling

Attention builds power that can result in change. Using the media to communicate what funding means in your community can activate citizens to support these policy requests to legislators.

The media responds strongly to personal stories. Whenever possible, engage the media by sharing your stories about how these policies will affect your patients and services through real-life case studies and personal testimonials. Weaving data into personal stories can help to provide broader insight at a more emotional level.

Ways to Engage the Media

.
A proactive approach involves consistent personal outreach to reporters and editors. Check websites for specific health policy reporter contacts, submit a "news tip" for your story, or tag reporters and outlets in your social media.

Consider the variety of tools that can be used for sharing information with media including:

- Media alert/advisory about an event
- Press release
- Media pitch for a specific story
- Fact sheet
- Media Kit

There are additional options to advocate for health centrs in a local newspaper or magazine by using the following:

- Letter to the editor
- Op-ed
- Blogs

Media Outreach Ideas

Consider using date hooks to create story angles. Awareness days are additional opportunities to engage with policymakers, the media, and community stakeholders.

Non-Traditional Outreach

If a legislator visits your health center, offer to write an article they can use in their newsletter that goes out to all the constituents in the district.

Media Dos and Don'ts

Do:

- Be aware of a reporter's deadline and provide contact info where you can follow-up quickly. Today's 24/7 news requires quick responses.
- Provide a contact person that can be reached at any time.
- Do tailor a media pitch to each reporter and don't send blanket emails.
- Be a resource even if you do not know the answer to a question.

Don't:

- Presume reporters know what your health center does in your community.
- Use too much industry jargon which can be confusing.

MEDIA OUTREACH TOOLS

Op-Eds

Instructions for Use:
These templates are designed for Community Health Centers (CHCs) and Primary Care Associations to submit to local newspapers.

Submission Tips:

- Replace all bracketed placeholders with your health center's real name, services, and data.
- Add one or two specific, local statistics (patients served, uninsured rate, Medicaid share) — local numbers resonate more than national ones.
- Keep a consistent byline: either your CEO, board chair, or a patient/board member for a personal angle.
- Confirm your local paper's word limit and submission process (many require 600–750 words and a headshot).

MEDIA OUTREACH TOOLS

Op-Ed Template - CHCs Are Getting Hit From All Sides

Title: Community Health Centers Can't Afford to Be Left Behind

Across the country, Community Health Centers quietly deliver one of the greatest returns on investment in our health care system. From rural/urban areas to YOUR CITY/TOWN, these centers provide essential primary care to nearly 34 million Americans —including veterans, working families, seniors, and people in areas where hospitals are far away and doctors are in short supply.

Now, this vital part of our health care infrastructure is at risk. Unless Congress acts, funding for Community Health Centers will expire on December 31, 2026, threatening the stability of a model that works—for patients, taxpayers, and communities alike.

Community Health Centers aren't government-run clinics. They are locally governed, fiscally disciplined nonprofits that stretch every dollar. They reduce health care costs by keeping people out of emergency rooms and managing chronic conditions before they become crises. In fact, they save the health care system over $24 billion each year—a smart investment by any measure.

They also serve a critical role in rural America, where health care access is declining and hospital closures are rising. CHCs step in where the private market has retreated, making sure rural communities aren't left behind. They support thousands of jobs in health care and related industries, keeping people healthy and economies strong.

Most importantly, reauthorizing CHC funding is not a partisan issue. It has earned support from both sides of the aisle for 60 years, because it reflects shared values: fiscal responsibility, local control, and service to those in need.

Lawmakers have consistently championed policies that are cost-effective and community-based. This is one of them. Congress should act now to reauthorize long-term, stable funding for Community Health Centers, because strong, healthy communities are the foundation of a strong, healthy nation.

[Your Name]
[Title]
[Health Center Name]

MEDIA OUTREACH TOOLS

Op-Ed Template - 340B

Title: Pause the 340B Rebate Model Before It Puts Patients at Risk

For three decades, the 340B Drug Pricing Program has helped Community Health Centers (CHCs) provide affordable medications and essential services to the nation's most vulnerable patients. The program's upfront discounts allow us to stretch scarce federal resources, reinvest savings into primary care, and ensure patients with chronic illness can actually afford the drugs they need to stay healthy.

That foundation is now under threat.

On January 1, 2027, the Health Resources and Services Administration (HRSA) plans to launch the 340B Rebate Model Pilot Program. Under this model, CHCs will no longer receive upfront discounts. Instead, we will be required to pay full, often extremely high, Wholesale Acquisition Cost for certain drugs and then wait for a manufacturer rebate from pharmaceutical companies.

For large systems, a delay in reimbursement may be manageable. For CHCs—especially in rural America—it is unworkable. Most health centers cannot absorb the financial shock of paying full price upfront. This threatens our ability to provide life-saving and life-changing medications, maintain services, and keep clinics staffed and open.

The model also adds new administrative burdens at a time when health centers are stretched thin. Increased reporting, claims tracking, and reconciliation requirements will pull staff away from patient care and strain already limited resources.

Health center leaders across the country have been clear: the rebate model will destabilize the safety net and harm the very patients 340B was designed to protect. CHCs represent a small part of the overall 340B program savings (just under 6%) but the program has an outsized impact on health center patients and communities .The program works because the savings are immediate and predictable, not delayed and uncertain.

There is still time to prevent this harm. We urge members of Congress to support and pass the 340B Rebate Model Delay Act introduced on October 9, 2026 in the House which would delay the rebate model for two years for all covered entities to give Congress enough time to consider comprehensive reform.

Protecting upfront discounts is essential to preserving access to medications, sustaining primary care services, and ensuring that underserved communities are not left behind. Health centers stand ready to serve. But we cannot do it with a policy that undermines the very resources that make our mission possible. Now is the moment to act, before patients pay the price.

[Your Name]
[Title]
[Health Center Name]

MEDIA OUTREACH TOOLS

Letter to the Editor Template - 340B

NOTE: NEWSPAPERS ARE MORE INCLINED TO PRINT IF YOUR LETTER RESPONDS TO A SPECIFIC ARTICLE THEY PUBLISHED.

Dear Editor:

Your recent article about healthcare (INSERT HEADLINE AND DATE OF PUBLICATION HERE), misses the growing threat to the nation's Community Health Centers and their patients.

Healthcare ranks among voters' top concerns this election season. For many of our patients, the choice is stark: fill a prescription or buy groceries. At [HEALTH CENTER NAME], a federal program called 340B helps them avoid that choice.

340B allows health centers to buy medications at steep discounts and reinvest the savings in patient care. At our center, that pays for [LOCAL SERVICES, e.g., dental care, behavioral health and transportation to appointments].

But starting Jan. 1 st, all of that could change. A federal rebate model will require health centers to pay full price for certain drugs and then wait for repayment from the drug companies. Any delay or dispute could leave us short of funds to restock our pharmacy shelves or make payroll. In effect, we would be giving free loans to some of the most profitable companies in the world. This comes just as Medicaid work requirements are projected to cost health centers an estimated $35 billion.

There is some relief: a bipartisan bill from U.S. Reps. Rob Bresnahan (R- PA) and Debbie Dingell (D-MI) would delay the rebate model for two years. I urge our leaders in Congress to support The 340B Rebate Model Delay Act.

[NAME]
[TITLE, HEALTH CENTER NAME]
[CITY]

SOCIAL MEDIA POLICY ASKS

Today, almost all legislators and policymakers have an X.com account and actively engage on it with their constituents, making it a powerful tool for advocacy.

Identify key collaborators to follow and reach out to these accounts directly on the platform about your work. The goal is for them to engage and share your message.

Advocacy Social Media Posts

1. Fund Community Health Centers

Every day, our health center provides affordable, high-quality care to people in our community, regardless of their ability to pay.

But we can't continue meeting growing demand without stable federal funding.

We're asking Congress to:
✅ Increase the Community Health Center Fund to $7.87 billion annually
✅ Provide $2.88 billion in FY2027 Health Center Program funding

Investing in community health centers is one of the smartest investments Congress can make.

@Rep_____ @Sen_____ We hope you'll continue supporting health centers and the patients we serve.

#ValueCHCs #PrimaryCare

2. Protect the 340B Program

Every 340B dollar goes back into patient care.

At our health center, 340B helps us:
✔️ Keep clinics open
✔️ Expand behavioral health
✔️ Provide affordable medications
✔️ Reach rural communities

We're asking Congress to protect and strengthen the 340B program while opposing policies like the proposed rebate model that would make it harder for health centers to care for patients. We urge Congress to support H.R. 10770, the 340B Rebate Model Delay Act today.

@Rep_____ @Sen_____ #340B

SOCIAL MEDIA POLICY ASKS

Advocacy Social Media Posts

3. Pause the 340B Rebate Model

Protect 340B. Protect patient care.

The bipartisan 340B Rebate Model Delay Act (H.R. 10770) would pause the rebate model for two years and preserve upfront drug discounts for safety-net providers.

We're asking Congress to protect and strengthen the 340B program while opposing policies like the proposed rebate model that would make it harder for health centers to care for patients.

XX urges Congress to support the bill.

@Rep_____ @Sen_____ #340B

Sample Social Media Resources for 340B Rebate Model Delay Act

As Congress considers pivotal changes this fall, the future of 340B, the Community Health Center Fund, and workforce innovations depends on your voice as a local constituent. This social media toolkit offers plug-and-play, nonpartisan content and assets to help you and your CHC communications team advocate. Included are:

- **Draft posts focus on 340B rebate model risks and offer opportunities for you to include human-interest narratives, where possible.**
- **Custom text and graphic options allow for quick localization. If you have questions, please contact ACH.**
- **Remind followers of ACH's easy-to-use advocacy hotline (1-877-ACH-2015) with links to:**
  - **ACH's Call-In Day page: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/**
  - **ACH's grassroots advocacy hub page: https://advocatesforcommunityhealth.org/get-involved/grassroots-advocacy-resources/**

ACTION STEPS:

1. **Use the content & graphics below and tailor to suit your health center. Add your CHC's name/community details where relevant.**
2. **Schedule your posts over time. Repeated messages matter.**
3. **Tag your local lawmakers with their official handles and encourage your leadership, staff, and community to call 1-877-ACH-2015 to advocate for health centers' policy priorities.**
4. **Tag ACH so we can engage with your content!**

Thank you for your leadership and support in protecting primary care and affordable healthcare access for all communities!

Theme	LinkedIn/Facebook	Twitter/X	Suggested Graphic Resource
340B Advocacy	Every day, 340B savings allow health centers to serve patients, regardless of their ability to pay. But proposed legislation puts these critical resources at risk. 📞 Call 1-877-ACH-2015 (toll-free) and tell your Congressional leaders to protect local primary care access. Support H.R. 10770! First Comment: Find resources and download sample talking points, call-in scripts, and more: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	340B savings ensure no patient is turned away from care, but proposed legislation puts these resources at risk. Protect local healthcare access: 📞 Call Congress at 1-877-ACH-2015 First Comment: Find resources and download sample talking points, call-in scripts, and more: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	#1 Preserve Local Care

340B in your community	Did you know? At [YourCHCName], every savings dollar from the 340B Drug Discount Program goes straight back into patient care. It funds our [tailor as needed: our mobile clinics, our pharmacy services for patients, our telehealth program], and keeps the doors open to primary care in [YourState]. Bipartisan leaders in Congress are stepping up to protect this essential program that is at no cost to taxpayers. But we need your help! 📞 Call 1-877-ACH-2015 (toll free) to tell your representative to support H.R. 10770, The 340B Rebate Model Delay Act.	Every 340B savings dollar at [YourCHCName] goes straight into patient care —funding mobile clinics & pharmacy services in [State] at $0 cost to taxpayers. Tell Congress to protect local primary care! 📞 Call 1-877-ACH-2015 to support H.R. 10770 The 340B Rebate Model Delay Act.	#1 Preserve Local Care Or #2 Custom Option
340B Call in	Forcing health centers to pay full sticker price for drugs under the proposed 340B Rebate Pilot risks hundreds of thousands in upfront costs to local clinics like [YourCHCName]. Please tell your representatives to enact a 2-year pause on the 340B rebate pilot to protect safety-net care for the people of [StateName]. It takes 2 minutes. Please call today! 1-877-ACH-2015 (toll free) 📞 <u>First comment:</u> Get talking points and tips here: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	Forcing health centers to pay full sticker price for drugs under the proposed 340B Rebate Pilot risks $100k+ in upfront costs for [CHCName]. Please ask your reps to protect safety-net care in [State]. 📞 Call 1-877-ACH-2015 (takes 2 mins and get talking points below) <u>First comment:</u> https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	#1 Preserve Local Care Or #2 Custom Option
Thank you and asks	Community health centers are America's largest primary care network, providing essential care to millions of families in rural and underserved areas. Thank you to our congressional leaders for supporting CHCs and $4.6B for the CHC Fund for 2026. To keep our healthcare workforce strong and our center doors open in [YOUR State or Area], we are asking lawmakers to: 1️⃣ Support Long-Term Health Center Funding before it expires on December 31 2️⃣Invest $950M annually in the National Health Service Corps. 3️⃣Co-sponsor H.R. 8629, the Developing the Community Health Workforce Act. 4️⃣ Pause the 340B Rebate Model Pilot for 2 years for health centers. Health centers build healthy communities. Find out what's at stake this fall. Learn more: https://advocatesforcommunityhealth.org/get-involved/grassroots-advocacy-resources/	Thank you Congress for $4.6B in the CHC Fund in 2026! To keep health center doors open in [State], we urge lawmakers to: 1️⃣ Support long-term CHC funding before 12/31 2️⃣ Invest $950M in NHSC 3️⃣ Cosponsor H.R. 8629 4️⃣ Pause the 340B Rebate Pilot for 2 yrs. 🔗: https://advocatesforcommunityhealth.org/get-involved/grassroots-advocacy-resources/	3 – ACH thank you policy priorities graphic

Thank you Congress for funding	From dental care to primary medicine, community health centers offer complete, integrated healthcare for local families in [StateName]. [CHCName] thanks Congress for $4.6B in the CHC Fund for 2026 and urge reauthorization by December 31 and multi-year investment ($7.87B/yr) to meet the growing local demand. [Tag Your Official Rep Handles if Relevant]	From dental to primary medicine, [CHCName] provides complete healthcare for [State] families. Thank you, Congress, for $4.6B in the CHC Fund in 2026! We urge reauthorization before 12/31 and multi-year investment ($7.87B/yr) to meet growing demand. [Tag Official Rep Handles as relevant]	#3 – ACH thank you policy priorities graphic
340B advocacy call-in	Driving an hour for a prescription isn't an option for many of our rural and elderly neighbors in [STATENAME]. 340B savings allow [CHCName] to run mobile clinics and deliver low-cost medicines directly to patients in [County/Service area/State name]. Bipartisan bills like H.R. 10770 **The 340B Rebate Model Delay Act** protect this care. Call your representative today and tell them to protect rural health access: Support HR 10770, the bipartisan 340B Rebate Model Delay Act. 📞 1-877-ACH-2015 (toll free) First comment: Find more resources, including a script with talking points, here: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	Driving an hour for meds isn't an option for rural neighbors in [State]. 340B savings allow [CHCName] to bring mobile clinics & low-cost care straight to patients. Protect local health access: Support H.R. 10770 the bipartisan 340B Rebate Model Delay Act! 📞 Call 1-877-ACH-2015	#1 Preserve Local Care Or #2 Custom Option
340B rebate model bill advocacy	Patients shouldn't have to choose between groceries and their life-saving meds. But people in [YourState or Community Name] do. The proposed 340B Rebate Pilot forces health centers like [YourCHCName] to pay full sticker price upfront, and threatens affordable pharmacy access. Help us protect affordable medications. 📞 Call 1-877-ACH-2015 to ask your lawmaker to support HR 10770 with a 2-year pause on the proposed 340B Rebate Model Pilot. (🔗 to talking points in the first comment) First Comment: Talking points and other downloads: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	No one in [State or Community Name] should have to choose between groceries and life-saving meds. The proposed 340B Rebate Pilot forces [CHCName] to pay full price up front, threatening affordable pharmacy access. Help protect local care: 📞 Call 1-877-ACH-2015 & ask Congress for a 2-year pause! (🔗 to talking points below) First Comment: Talking points and other downloads: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	#1 Preserve Local Care Or #2 Custom Option

340B bill advocacy	Growing up in [State/Community name], [provider name/title or I if first-person post] knew firsthand how hard it was for local families to find a doctor nearby. Today, [DrName/ProviderName/I] work(s) on the front lines at [CHCName], delivering primary care to hundreds of neighbors who wouldn't otherwise have a regular place for care. Our providers are the backbone of community health, but staffing shortages, diminishing reimbursements, and changes in federal policies are straining the safety-net across the country. Please urge your lawmakers to support H.R. 10770, The 340B Rebate Model Delay Act to protect access to affordable healthcare. First Comment: Talking points and other downloads: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	Growing up in [Community], [ProviderName/I] knew how hard finding local care was. Today, [ProviderName/I] deliver(s) primary care to hundreds of neighbors at [CHCName]. Staffing & policy strains threaten our entire healthcare safety net. Urge Congress to support HR 10770, The 340B Rebate Model Delay Act & protect local care! First Comment: Talking points and other downloads: https://advocatesforcommunityhealth.org/ach-policy-advocacy/national-call-in-day/	#2 Custom Option

Graphics (Square)

[#1 Preserve Local Care]

#2 - Custom Option

Editable Canva template for your use.

[#3 ACH Policy Priorities & Thanks to Congress]