



Community  
Health Center  
Association of  
Connecticut



Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

# Health-Related Legislation & Concerns

Presented by:

Deb Polun – Community Health Center Association of Connecticut  
and Sean King – Office of the Healthcare Advocate



Community Health Center  
Association of Connecticut

*Federally-Qualified Health Center*

=

*FQHC*

=

*Community Health Center*

=

*CHC*

=

*Health Center*





Community Health Center  
Association of Connecticut

Federally qualified health centers provide medical, dental and behavioral health services to people regardless of:

- ***Age***
- ***Insurance***
- ***Immigration status***
- ***Ability to pay***

***No Insurance?***

***Pay on a sliding fee scale  
based on your income!***

***No one is turned away.***



Community Health Center  
Association of Connecticut



In addition, FQHCs must:

- provide enabling services, like transportation, translation and referrals to specialists
- provide sliding fee discounts
- have Boards of Directors, the majority of whom must be patients
- and meet a total of 19 program requirements





## Community Health Center Association of Connecticut

### FQHC Funding Sources:

- Patient revenue: Medicaid, Medicare, commercial insurance, self-pay
- Federal funds: total of \$5.1 billion for Federal Fiscal Year '17
- State funds: Some states also provide funding, including Connecticut.
  - Currently, this occurs through grants from the Department of Public Health (DPH), totaling \$358,728. Governor Malloy has proposed eliminating the DPH grants.
- Fundraising/Public and private foundation grants



Community Health Center  
Association of Connecticut

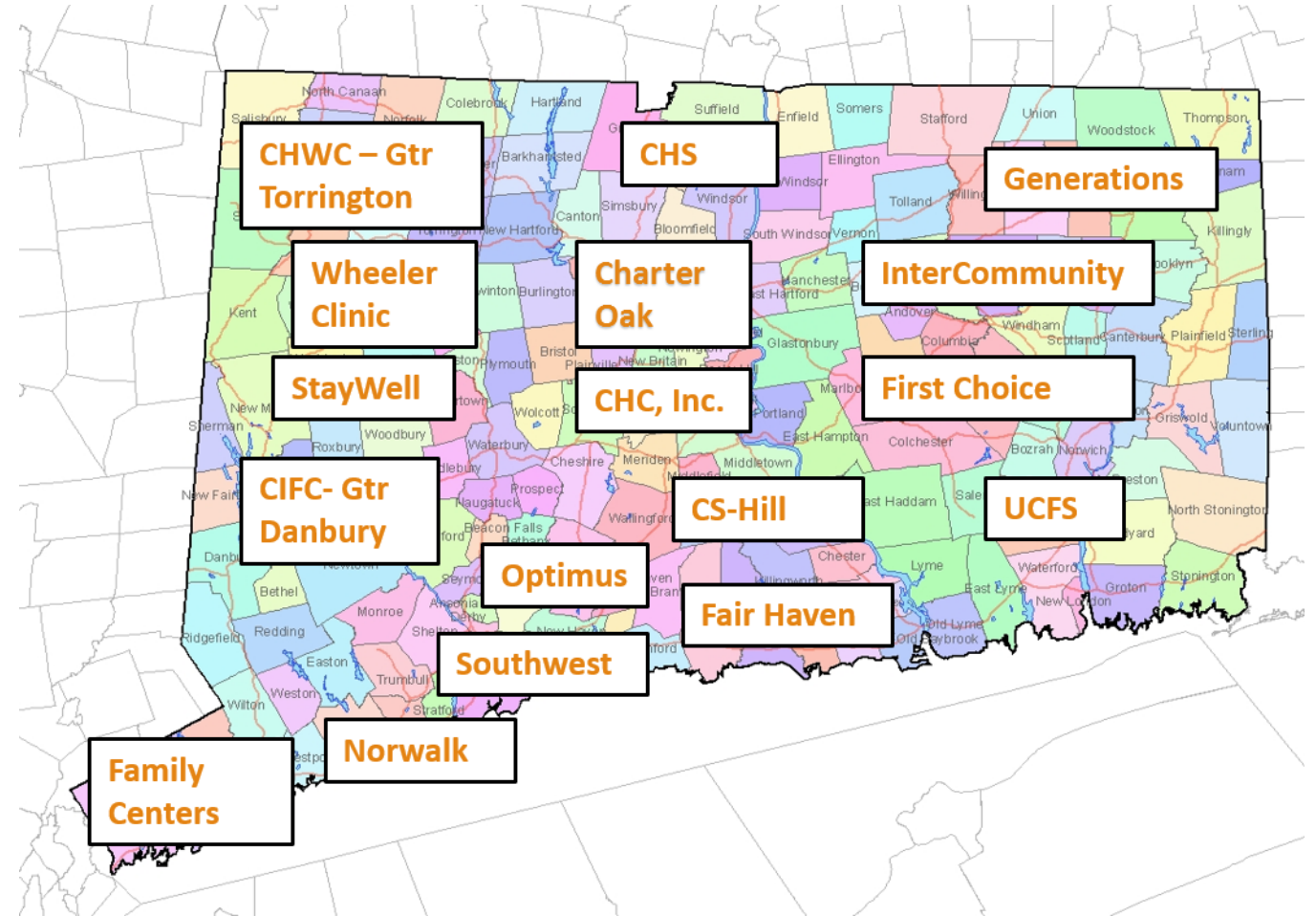
## The Facts (Connecticut, 2016):

- 17 Federally-Qualified Health Center (FQHC) organizations across the state, with over 300 sites (16 330-funded, 1 look-alike)
- Over 376,000 patients – with over 1.8 million visits, including primary care, dental and behavioral health!
- FQHCs are a major provider of primary care in Connecticut – and also a critical component of the safety net.



# Community Health Center Association of Connecticut

## Connecticut's FQHCs





Community Health Center  
Association of Connecticut

***State Concerns for FQHCs and School-Based Health Centers:***

- Reduction in HUSKY A Income Eligibility
- Cap on Dental Services for HUSKY Adults
- Reductions in Grant Funding through DMHAS
- Reductions in School-Based Health Center Funding through DPH





Community Health Center  
Association of Connecticut

## ***Federal Concerns for FQHCs:***

- ACA Repeal/Replacement
  - Medicaid
  - Pre-existing conditions
  - ACA Plans, Marketplaces
- CHIP Reauthorization
- **330 Funding Cliff**



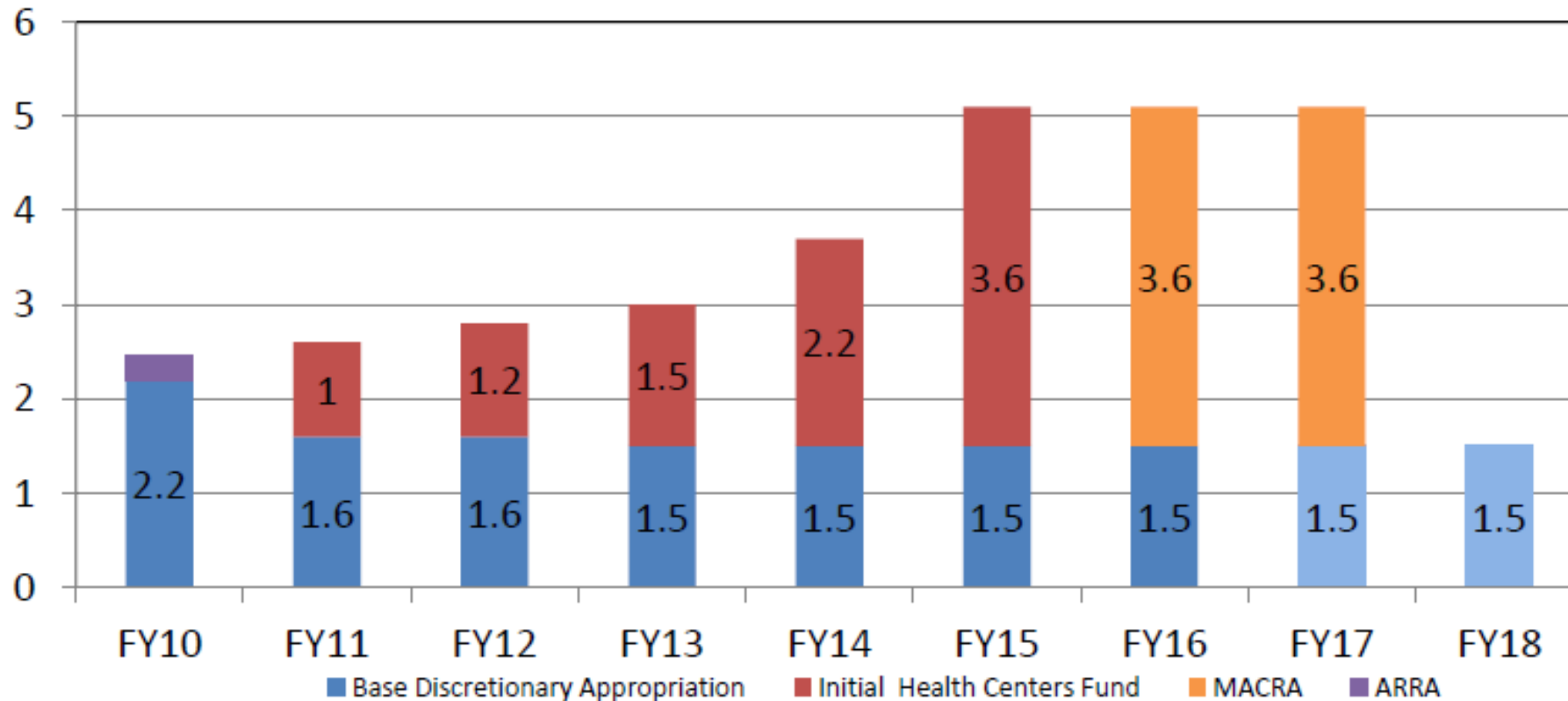
# Community Health Center Association of Connecticut



NATIONAL ASSOCIATION OF  
Community Health Centers

## The Health Centers Funding Cliff

Community Health Centers Operational Funding, FY 2010 – FY 2018





Community Health Center  
Association of Connecticut

***Potential Impact of Funding Cliff on Connecticut  
(includes direct and indirect impact of funding loss):***

- \$91 Million in lost revenue
- 530 staff laid off
- 90,545 patients lose access to care



Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

# 2017 Health-Related Legislation in CT

- PA 17-131 – An Act Preventing Prescription Opioid Diversion and Abuse
  - Increases data sharing between state agencies to study opioid abuse and overdose deaths
  - Facilitates destruction/disposal of unused medication by utilizing home health care RNs
  - Implements electronic prescription requirements for controlled substances
  - Allows patients to file a voluntary non-opioid form in their medical record to avoid opioids
  - Limits opioid prescriptions to minors to five day max
  - Expands provider obligations to communicate risks of opioids to all patients
  - Requires fully insured carriers to cover medically necessary detox, based on ASAM criteria
  - Allows pharmacists to administer opioid antagonists pursuant to a physician standing order



Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

# 2017 Health-Related Legislation in CT

- PA 17-241 – An Act Concerning Contracts Between a Pharmacy and a Pharmacy Benefits Manager(PBM) . . .
  - Prohibits contracts between a pharmacy and a PBM from including provisions that prevent or penalize pharmacists for disclosing
    - cost of prescription medications;
    - availability of alternative medications that are therapeutically equivalent; or
    - alternative methods of purchasing that are less expensive
  - Limits patient cost for prescriptions to the lesser of: co-pay, allowable amount, or cash price
  - Violations are CUTPA violations, enforceable also by CID



Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

# 2017 Health-Related Legislation in CT

- PA 17-241 – An Act Concerning . . . The Bidirectional Exchange of Electronic Health Records and the Charging of Facility Fees
  - Expands existing prohibition against certain terms in network provider agreements that restrict disclosures of consumer cost information
  - Requires bidirectional exchange of EHR by hospitals upon request of a patient or provider over secure connection
  - Requires facility fee notices to contain a contact number for information regarding financial liability, including facility fee estimate
  - Requires additional information regarding facility fees to be provided to patients by hospital-based facilities at time of scheduling



Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

# 2017 Health-Related Legislation in CT

- PA 17-154 – An Act Concerning Participating Provider Directories . . .
  - Expands prior law requiring insurance carriers to publish provider directories that identify network providers who accept new patients on outpatient basis
- PA 17-228 – An Act Concerning Step Therapy to Treat Stage IV Metastatic Cancer
  - Prohibits carriers from requiring step therapy for cancer drugs prescribed to treat Stage IV metastatic cancer if FDA approved



Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

# 2017 Health-Related Legislation in CT

- PA 17-55 – An Act Concerning Health Insurance Coverage for Fertility Preservation for Insureds Diagnosed with Cancer
  - Amends definition of “infertility” to remove qualifier that individual is “presumably healthy” in order to access infertility benefits under fully insured plans
- PA 17-198 – An Act Concerning . . . Preferred Provider Networks
  - Applies network adequacy requirements to dental and vision carriers





Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

# 2017 Health-Related Legislation in CT

- PA 17-115 – An Act Concerning Consumer Protection in Eye Care
  - Requires patients to receive and in-person evaluation and eye exam before initial prescription or renewal of prescription for contact lenses
- PA 17-146 – An Act Concerning DPH Revisions to the Public Health Statutes
  - Creates a task force to study shortage of psychiatry workforce in CT
  - Creates working group to implement a mobile integrated health care program for paramedics to provide community based health care within scope of practice



Community  
Health Center  
Association of  
Connecticut

***To learn more about  
Connecticut's FQHCs:***

Deb Polun: [dpolun@chcact.org](mailto:dpolun@chcact.org)

[www.chcact.org](http://www.chcact.org)

860-667-7820



***And be social with us!***

[@cthealthcenters](https://twitter.com/cthealthcenters)

[www.facebook.com/CHCACT](http://www.facebook.com/CHCACT)



Office of the  
Healthcare  
Advocate  
STATE OF CONNECTICUT

***To learn more about  
the Office of the  
Healthcare Advocate:***

Sean King: [Sean.King@ct.gov](mailto:Sean.King@ct.gov)

[www.ct.gov/oha](http://www.ct.gov/oha)

866-466-4446

***And be social with us!***

[@State\\_of\\_CT\\_OHA](https://twitter.com/State_of_CT_OHA)

[www.facebook.com/State-of-Connecticut-Office-of-the-Healthcare-Advocate-301102456997](http://www.facebook.com/State-of-Connecticut-Office-of-the-Healthcare-Advocate-301102456997)

