

Testimony:

In Support of House Bill 1012, with the 2025-27 Health & Human Services Executive Budget Recommendation for Appropriations to Federally Qualified Health Centers

House Appropriations Committee Human Resources Sub Committee Representative Jon Nelson, Chair January 27, 2025

Chairman Nelson, Vice Chair Stemen, and Members of the Committee:

My name is Shannon Bacon, and I serve as Director of External Affairs with the Community HealthCare Association of the Dakotas (CHAD). For over 35 years, CHAD has served as the non-profit primary care association representing our member Federally Qualified Health Centers (also known as community health centers) across North Dakota and South Dakota. These non-profit, community-driven clinics provide high-quality primary and preventive care to all individuals, regardless of their ability to pay. Health centers provide a sliding fee scale to individuals who are uninsured or underinsured, and they also provide care to individuals with a variety of insurance types.

I appreciate the opportunity today to express our members' appreciation for previous state appropriations and to ask for your continued support, as recommended by the Department of Health and Human Services executive budget in House Bill 1012.

Here in North Dakota, five FQHCs provide care at 22 delivery sites in 20 communities, located in both rural and urban areas of our state. Rural health centers support a community's ability to retain local health care options, enabling people to access hometown primary care. In urban areas, they tend to care for underserved populations. FQHCs work to fit into the fabric of each community they serve, and they do that by building partnerships and working to strengthen and support existing services while filling gaps in care and addressing community-based needs.

In 2023, our member health centers provided comprehensive primary care, including medical, dental, behavioral health, and substance use treatment to over 36,000 unique patients with over 126,000 visits. Nearly 40% of these patients have Medicaid and 16% are uninsured. A recent study found that, on average, Medicaid patients receiving care at a health center saved the health care system 24% annually.



You'll hear directly from our member Northland Health Centers today about the real impact of these appropriations on their patients and communities. In addition, I want to share a few highlights of how this funding is helping our fellow North Dakotans:

- Coal Country Community Health Centers has utilized these state appropriations to support their Community Care Services program, which provides personalized chronic care management services to aging seniors. Participants receive support from nurses, a social worker, and a community health worker, to help them achieve their chronic care management goals and maintain independence in their homes. This can include referrals to community resources, nursing check-ins by phone or in-person, and coordination of care between the patients' pharmacy, specialists, testing centers, hospitals, and more.
- Family HealthCare has used state appropriations to expand medical, dental, and behavioral health services in innovative ways. This includes a new primary care clinic in LaMoure, which was established in 2024 through a partnership with LaMoure Public Health Unit.
- And thanks to state appropriations, Family HealthCare has been able to expand
 mobile health unit services, including the addition of optometry services. Their mobile
 health unit makes visits to schools, head start programs, and more. With two exam
 rooms, it is equipped to provide high-quality, comprehensive medical and dental
 care.
- Spectra Health has leveraged state appropriations to expand access to primary medical, behavioral health, and dental care. This includes expansion of psychiatric services within primary care through a Collaborative Care Model. In this model, a registry of patients with certain behavioral health diagnoses is created and discussed in regularly scheduled team meetings with a consultant psychiatrist. The psychiatrist reviews provider notes, patient history, and other information to provide recommendations on medications, laboratory testing, and treatment goals. Formal recommendations are recorded in the patient record as a resource for any member of the team. In addition to the regularly scheduled meetings, any team member can request a "curbside" consult regarding a patient who may not be demonstrating improvement or who has a more emergent need. This access to specialty consultation allows for faster, more efficient and cost-effective care for patients who would otherwise wait weeks to months for a specialist appointment.

These are just a few examples of how state funds are being used efficiently and effectively to improve access to care and reduce the costs of avoidable emergency or specialty care.



From both a health and economic perspective, health centers are a smart investment.

Today, we ask for your continued support for appropriating funds to community health centers, as listed in the 2025-27 Health & Human Services Executive Budget Recommendation. This will allow us to expand our reach, invest in our communities, and fill gaps in care, all while contributing to the economic vitality of local communities.

Thank you for your consideration, and next you will hear from our member Northland Health Centers about the impact of this funding on their patients. I also welcome any questions.

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