August 8, 2006

Randall L. Johnson, Chair
Citizens’ Health Care Working Group
7201 Wisconsin Avenue
Suite 575
Bethesda, MD 20814

Dear Mr. Johnson:

This letter is in response to the interim recommendations put forth by the Citizens’ Health Care Working Group (CHCWG) on June 1 of this year. I am writing on behalf of our 23 Federally Qualified Health Center (FQHC) corporations, who together provide high quality primary care to almost a million Americans living in poor, underserved regions of the state of Georgia.

According to the preamble of the Working Group’s interim recommendations, the legislation that convened the CHCWG “emphasizes the need to bring the views of everyday Americans to the job of creating a better health care system. In previous health care reform efforts, too little has been heard from the public…” In the same spirit, legislation has mandated that FQHCs answer to policy boards, a majority of whose members must be active patients at the center that they represent.

In both of the above instances, Congress wrote laws that ensure that the voices of everyday consumers be heard in the ongoing debate around the organization and delivery of health care. GAPHC shares the Working Group’s core belief in empowerment of the consumer as a solution to our nation’s daunting health care problems. Nevertheless, we are concerned that if the language in the second recommendation calling for, “expanding and modifying the Federally Qualified Health Center concept to accommodate other community-based health centers and practices” remains unchanged, future health care reform efforts will take little heed of the views of everyday Americans.

According the Office of Management and Budget, FQHCs are among the ten most successful federal programs—_the most_ successful of the Department of Health and Human Services programs. For over thirty years, FQHCs have garnered bipartisan support while retaining the only “patient democracy” in existence. GAPHC stands firmly behind the Working Group’s recommendation to expand the availability of sensible community-based primary care, and to coordinate those efforts across Federal agencies.
and programs, but not at the cost of allowing our system of payments to be changed in order to accommodate other health care entities. GAPHC attributes the success of FQHCs to the empowerment of our patients; we ask that this message be reflected in the final recommendations of the CHCWG, as it is in both of our organizations' charters.

Sincerely,

Duane A. Kavka
Executive Director
The Georgia Association
For Primary Health Care

cc: Daniel Hawkins, National Association for Community Health Centers