August 30, 2006

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

Dear Mr. Johnson:

Thank you for the opportunity to comment on the Citizens’ Health Care Working Group interim recommendations for how to make quality health care more accessible and affordable to every American (released June 2, 2006). I am the Chief Executive Officer of Lamprey Health Care in Newmarket, New Hampshire. Lamprey Health Care is a community-based and community-governed nonprofit organization providing cost-effective primary health care, prevention, education and/or social services to our community. The Working Group would categorize me as a neighborhood health clinic.

Although I am pleased with most of the interim recommendations, I am disappointed to learn that the proposal to expand neighborhood health clinics (which was the second most popular option among the 23,000 people who participated in Working Group events and garnered a 79% approval level) was barely mentioned as a viable concept/proposal despite national agreement that expanding neighborhood health clinics is a high priority. In addition, the Working Group recommends steps to “expand and modify the Federally Qualified Health Center (FQHC) concept to accommodate other community-based health centers and practices serving vulnerable populations.” In choosing to recommend that the existing FQHC payment system be changed to accommodate those other entities, the Working Group has wandered into an area that has been the source of considerable Congressional debate and deliberation in recent years. Community health centers have been characterized as entities that are governed by policy boards, a majority of whose members are active patients who receive care at their health center. This feature marks the only place in the American health care system where those receiving the care of an entity are empowered by law to decide how that care is organized and delivered. Because of this uniqueness, Congress has consistently rejected taking such action.

I recognize and respect the importance of the Working Group’s efforts to the essential task of making our health care system work for all Americans, and I very much support that work. That is why I urge you to reconsider this Working Group recommendation and elevate the neighborhood health clinics to a level consistent with what the citizens voted on in their national meetings. Neighborhood health clinics have enormous bipartisan support and are a very favored health care delivery system.

Sincerely,

Ann H. Peters
Chief Executive Officer

AHP/mlg