



National Health Reform brings with it the promise of increased access to medical insurance, and the increased need for a strong network of primary care providers available to serve patients. Rhode Island's ten community health centers are preparing to step up to the challenge.

Rhode Island's ten community health centers, in 27 locations throughout the state, have a long history of providing high-quality, low-cost primary health care to Rhode Islanders. In 2009, the health centers provided care for over 120,000 patients.

Health Reform and Community Health Centers

The *Patient Protection and Affordable Care Act*, signed into law on March 23, 2010, and its companion reconciliation bill, signed into law on March 30, 2010, call for increased access to insurance for Americans, as well as increased access to primary care through the community health centers and others.

- **Funding for community health centers** across the country will increase by \$9.5 billion over next five years. This funding will help the health centers expand to meet the growing need for primary care services.
- **Construction** at community health centers across the country will be funded in the amount of \$1.5 billion over five years. This funding will help the health centers with capital needs created by expanding services.
- Primary care practitioners, like doctors, nurses and dentists, will have access to expanded funding for **National Health Service Corps**. The \$1.5 billion in loan repayments and scholarships over next five years will help encourage newly trained providers to practice in primary care settings like health centers.
- **Medicaid eligibility** will expand to include all otherwise eligible individuals with incomes under 133% of the Federal Poverty Level (this includes single adults with annual incomes under \$14,404) by 2014.
- National health reform will **increase individual access to the private insurance market**. Children will be able to remain on their parents' insurance until they are 26 years old; this provision goes into effect in September 2010, but is being phased in by many insurance companies immediately. Also effective immediately, children with preexisting conditions cannot be denied insurance. Annual or lifetime limits on coverage are prohibited, as are rescissions. Also, coverage of preventive health services must have no cost-sharing or co-pays for appointments like check-ups. When the insurance market reforms are fully effective, most by 2014, insurance will be mandatory. There will be a health insurance exchange where people can find the best health insurance options for themselves.
- Numerous provisions expand the **medical home model of care**. In the Patient Centered Medical Home, patients are active participants in their health care. The medical home uses a physician-led medical team approach that coordinates all aspects of a patient's care. The team provides for all the patient's health care needs, for all states of life, or appropriately arranges care with other qualified professionals.
- Pilot programs for wellness and other demonstration projects are featured in the legislation.