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North Carolina Community Health Center Association Calls on Elected Officials to Develop Health Insurance Coverage for North Carolina's Uninsured

Currently, North Carolina community health centers serve approximately 200,000 uninsured patients statewide with primary care services. Many people who are uninsured show up to our clinics with conditions that have grown worse over time due to a lack of insurance. The vast majority of these people are the working poor that make too little to afford the cost of health insurance premiums, and make too much for Medicaid. They are caught in the "coverage gap."

Closing the Coverage Gap is Good for a Growing Economy

Though North Carolina's economy is growing, that growth is across many sectors including low-wage service jobs and those in the gig economy. Many people in these jobs do not have coverage through their employers. North Carolina should offer its residents, new and old, affordable, reliable access to regular primary and preventive care (as well as access to specialists and other needed services), so that we can keep the economy growing sustainably.

Access to Health Care is Necessary to Curbing the Opioid Epidemic & Addressing Behavioral Health Problems

Effective treatment solutions for opioid require a holistic approach. Having health insurance coverage for medical and behavioral health care is essential to treatment success and avoidance of relapse. Behavioral health challenges may result in barriers to employment, sustaining a healthy family, and keeping one's home. Maintaining ongoing access to behavioral health services are important for many people with significant behavioral health struggles.

Medicaid Expansion Has Been Cost Effective for Other States

In a May 1 [Op-Ed in the Raleigh News & Observer](#), Wake Forest School of Law Professor Mark Hall writes: "The strong balance of objective evidence indicates that actual costs to states so far from expanding Medicaid are negligible or minor, and that states across the political spectrum do not regret their decisions to expand Medicaid."

NCCHCA Has Supported Prior Efforts to Close the Gap

Last year, NCCHCA endorsed HB 662, Carolina Cares, a **conservative approach to covering the uninsured**. This bill, introduced by Representatives Lambeth, Murphy, Dobson, and White sought to empower patients to access affordable, high quality, and innovative primary and preventive care.

Though we prefer a solution that does not require work requirements, we support it because it:

- Would allow 300,000+ working people in the coverage gap to gain affordable coverage.
- Empowers patients by encouraging participation in preventive care and wellness programs.
- Would not cost the state anything, as it will receive funding through (a) federal match, (b) participant contributions, and (c) state assessments, including hospital assessment.

NCCHCA will continue to support bipartisan solutions to close North Carolina's coverage gap and help us maintain a healthy workforce and support a growing economy.

Community Health Centers are community-based and [patient-directed](#) organizations that deliver comprehensive, culturally competent, high-quality primary health care services. Health centers also integrate access to pharmacy, mental health, substance abuse, and oral health services in areas where economic, geographic, or cultural barriers limit access to affordable health care services. Health centers deliver care to the Nation's most vulnerable individuals and families, including people experiencing homelessness, agricultural workers, residents of public housing, and the Nation's veterans.

The North Carolina Community Health Center Association (NCCHCA) is the state's Primary Care Association. Formed in 1978 by the leadership of community health centers, NCCHCA is comprised of membership from each of the 40 health center grantees, aspiring health centers and other partners. Board membership is open to all Federally Qualified Health Center Grantees and Look-alikes. These health center grantees and Look-alikes operate over 220 clinical sites and served over 500,000 patients in 2016.