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Ensuring Access to Health Care by FQHC's As States Re-Open in Covid-19

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Abstract

One in Five Americans utilizes FQHC's (Federally Qualified Health Center's) services in the US for their primary care, preventive and community health needs. Medicaid and FQHC health center programs have been partners at the forefront of addressing population health needs for over 50 years. While testing, contact tracing in time of COVID crisis is helping rural FQHC patients, there are other vital Medicaid services that are both available right now and ripe for enhancement to ensure the accessibility of services during and after the COVID-19 emergency. A primary example is Non-Emergency Medical transportation (NEMT). Community Health Centers must focus on NEMT usage to ensure access to care for rural patients as states re-open. This short commentary defines NEMT and ways FQHCs can enhance it as Medi-caid benefit, as sates reopen in COVID-19.

Despite the news of states reopening, COVID-19 has had devastating impacts on the overall economy and population health in ways that will take years or even decades to overcome. Growing numbers of people are unemployed, under or uninsured or unable to pay for health care. Consequently, largest safety net programs for coverage and care, Medicaid and Community Health Centers/ Federally Qualified Health centers (FQHCs), have been under enormous and mounting pressure to fulfill their critically important roles in the response to the public health emergency [1].

Medicaid provides health and long-term care coverage for over 70 million adults and children, or 1 in 5 Americans. States and the federal government fund the program jointly. Health centers serve as the primary care safety net for over 29 million adults and children, including 1 in 5 of Medicaid beneficiaries. By mission and mandate, they provide health care and enabling services to individuals regardless of their ability to pay.

Medicaid financing ensures that health centers are able to provide high-quality care to vulnerable populations, including a state's Medicaid enrollees. The Medicaid and health center programs have been partners at the forefront of addressing population health needs for over 50 years. While testing, contact tracing in this time of crisis, there are other vital Medicaid services that are both available right now and ripe for enhancement to ensure the accessibility of services during and after the COVID-19 emergency. A primary example is non-emergency medical transportation (NEMT).

What is non-emergency medical transportation (nemt)?

During the COVID-19 emergency, lack of transportation frustratingly reemerged as a barrier to care for low-income Americans. When the pandemic struck, patients lost their personal vehicles due to financial difficulties. Many others avoided the risks of ride-sharing or public transit options, which have also been substantially reduced. Finally, technology barriers make the use of telehealth especially challenging. Taken together, health centers were among the many providers to experience a steep decline in patient visits [2].

Fortunately, the Medicaid program has long recognized lack of transportation as a barrier, which is why state

Medicaid agencies are required to ensure necessary transportation to and from providers via NEMT. In addition to providing the benefit, states must describe how they will deliver the NEMT benefit in their Medicaid state plan. Some states choose to deliver NEMT directly, while others may deliver the benefits through a broker program or under contract with individuals or entities.

Ways to Enhance the Medicaid Nemt Benefit

Coverage is complex and access to care is highly susceptible to one's comprehension of the coverage labyrinth. The Medicaid NEMT benefit is often overlooked despite its demonstrable need and proven value. Some practical steps that health centers can take to help ensure

the availability of NEMT services, working with their partners at state Primary Care Associations (PCAs) and Health Center Controlled Networks (HCCNs), include

a. Reviewing the Medicaid state plan to understand how your state makes operational the NEMT assurance requirement.

b. Obtaining written guidance from the state on how Medicaid beneficiaries can access NEMT.

c. Sharing up-to-date information about the Medicaid NEMT benefit on their FQHC website and ensure that outreach and enabling services staff are equipped with and sharing that information

d. Working cooperatively with their state Medicaid agency to resolve NEMT access issues for FQHC users

e. Monitoring state proposals to waive NEMT through 1115 waiver demonstrations, and section 1135 COVID Emergency state plan amendments

f. Working with your state to determine NEMT flexibilities it would be willing to offer through an 1115(a) waiver demonstration and/or section 1135 Medicaid Disaster Relief for the COVID-19 National Emergency State Plan Amendment

Forge Ahead With Existing Tools And Space For Innovation

As safety net programs, FQHCs and providers continue to step up to address the mounting challenges before us, it is critical that we first ensure existing tools are fully maximized, such as NEMT.

Conflict Of Interest Statement

I, Dr. Miku Sodhi, as sole author certify that I have NO affiliations with or involvement in any organization or entity with financial interest (such as honoraria; educational grants; participation in speakers' bureaus; membership, employment, consultancies, stock ownership, or other equity interest; and expert testimony or patent-licensing arrangements), or non-financial interest (such as personal or professional relationships, affiliations, knowledge or beliefs) in the subject matter or materials discussed in this manuscript.

References

1. Coronavirus Preparedness and Response Supplemental Appropriations Act (2020) Families First Coronavirus Response Act, Coronavirus Aid, Relief and Economic Security Act (CARES Act), P.L. No. 116-136.
2. HHS issued wide-ranging waivers of Medicare requirements under the authority of Section 1135 of the Act on March 13, 2020, and has progressively extended the waivers.

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