

Testimony
Health Care Reform Review Committee
Representative Keiser– Chairman
January 15, 2014
Community HealthCare Association of the Dakotas

Chairman Keiser, members of the Health Care Reform Review Committee, I am Larry Shireley, Director of Policy and Community Planning for the Community HealthCare Association of the Dakotas (CHAD). CHAD is the primary care association for federally qualified health centers (FQHCs), commonly referred to community health centers (CHCs), for both North and South Dakota.

There are currently four CHCs in North Dakota with 11 clinic sites providing primary medical care services in North Dakota; Valley Community Health Centers based in Northwood, Family HealthCare based in Fargo, Northland Community Health Center based in Turtle Lake, and Coal Country Community Health Services based in Beulah. In addition, Migrant Health provides primary health care services for migrant workers and their families in multiple sites including Grafton and Moorhead, MN. In 2013, the CHCs were provided funding by the Health Services Resources Administration (HRSA) to conduct outreach and enrollment activities including employing Certified Application Counselors to assist with enrollment in the Marketplace.

The CHCs have hired 8 persons who have become, or are completing, training to be Certified Application Counselors (CACs). In addition, some of the CHCs are hiring temporary workers to become CACs. According to their reports submitted to HRSA for, the ND CACs indicated they provided enrollment assistance for 1,135 individuals from

October 1 – December 31, 2013. An estimated 223 of the persons they assisted enrolled in the Marketplace. This number is likely an underestimate of those who actually enrolled since there is no definitive method to determine enrollment.

The CACs report that the issues associated with the Marketplace website in October created frustrations for them and the public. However, since the enhancement of the website, the CACs report considerable improvement in its functionality, increased accessibility and interest of the public. The Medicaid Expansion enrollment has not been as “seamless” as one would have hoped, but the Department of Human Services has been very helpful in working with the CACs to answer questions and assist applicants. Despite these issues, comments such as, “thank you, I went to the doctor and my insurance was exactly what it was supposed to be” or “my husband and I have been married for 30 years and this is the first time we have had health insurance” make the efforts worthwhile.

Mr. Chairman and Members of the Committee, this concludes my testimony and I will be happy to answer any questions.