SAMPLE OP-ED

WORD COUNT: 495

A virulent flu season is underway and the number of opioid overdoses continues to climb, yet our public health is more vulnerable than ever because Community Health Centers like [NAME OF HEALTH CENTER] are running out of time and money. Critical funding for our program expired on October 1st 2017. Since then, all health centers have been operating under a “funding cliff.” This phrase alone would lead one to think that this is an issue solely about money. It is much more. It is about people and how decisions made (or left unmade) by Congress can have a ripple effect.

When people are sick, they need an accessible place to go for affordable care. At [NAME OF HEALTH CENTER] we are doing everything we can to ensure our doors remain open and our patients receive the best quality of care – but it isn’t easy. [USE THIS SPACE TO DESCRIBE HOW THE FUNDING CLIFF IS AFFECTING YOUR HEATLH CENTER].

We are not the only ones. Health centers around the country are facing tough choices. They are laying off staff, cutting back services, such as treatment for opioid addiction or onsite ultrasounds for pregnant mothers and planning for site closures.

The U.S. Department of Health and Human Services (HHS) has projected that the impact of the funding cliff will result in the closure of 2,800 health center sites and the loss of health care access for 9 million patients. This is the reality of now.

 Health care for more than 27 million people is being run on a month-to-month basis because Congress has failed to extend funding for our program. Vendors cannot be paid. Doctors cannot be recruited or coaxed to remain in some of the most rural and medically underserved areas. Mobile health vans may not have the gas money to drive to the hardest to reach populations. Medicines or other supplies cannot be purchased beyond the next month.

This is not how a health system should run – particularly the Community Health Center program that has served the nation so well in terms of saving lives and dollars. Health centers like ours have been in place for more than 50 years, opening access to care and providing a more affordable option for preventive care than a hospital emergency room. Not only do we generate $24 billion in health care cost savings, we are also innovators who work with community partners to respond to public health crises, such as the opioid epidemic and the recent disasters that struck Texas, Florida, California and Puerto Rico.

There is little doubt that health centers have contributed significantly to cost savings for the American taxpayer. Our record of success is why our program has earned bipartisan support from U.S. Presidents and lawmakers. And here’s the bitter irony behind the health center funding cliff: most everyone agrees that Congress should extend funding and act now. Lawmakers must move beyond the political debate and focus on public health.