



COMMUNITY
HEALTH NETWORK
OF WASHINGTON

Washington
Association of
COMMUNITY
& MIGRANT
HEALTH
CENTERS

FOR IMMEDIATE RELEASE

Washington Legislature Passes Budget Saving Critical Health Care Programs

Seattle, WA, April 12, 2010 –The Washington State Legislature today passed a critical budget that preserves funding for important primary care safety net programs and provides a bridge to federal health care reform and coverage expansions in 2014. The 2010-11 budget maintains funding for Basic Health, Disability Lifeline (formerly General Assistance-Unemployable), Community Health Services grants, adult dental care and maternity support services for Medicaid recipients, and Apple Health for Kids.

“We are pleased that the legislature stepped up and made the tough choices that were required to keep the health care safety net intact. Along with community health centers, these programs provide the foundation for ensuring that vulnerable low-income populations have access to cost-effective health care services. Maintaining our state programs is critical as health care reform takes shape on the national stage,” said Mary Looker, Chief Executive Officer of the Washington Association of Community & Migrant Health Centers.

“Legislators made responsible decisions that will help our state recover from this economic crisis. Without new revenue streams, which account for only eight percent of the solution to the biennial budget deficit, we would have witnessed the wholesale elimination of highly successful programs like Basic Health that save our state money in the long run. By helping people stay healthy, we keep them out of our emergency rooms and control costs,” said Lance Hunsinger, Chief Executive Officer of Community Health Network of Washington.

Over the last two years, the recession has left Washington state with less revenue, unemployment at 9.5 percent and an uninsured population swelling to more than 900,000. These factors, combined with more than \$1 billion in health care funding cuts in 2009, have placed a tremendous strain on the state’s health care system. While the 2010-11 budget will help keep community health centers operational and programs open, the demand for services is at an all time high. Nearly 100,000 people are on the wait list for Basic Health, and community health centers have seen a 14 percent increase in uninsured patients over the last year.

“While this budget is a step in the right direction, we’re not out of the woods yet. Our state’s economy is still reeling from the recession, and 2011 will be another tough year,” said Thomas Trompeter, Chief Executive Officer of HealthPoint. “We need to preserve the strong foundation our state has in place until Federal health care reform is fully realized in 2014.”

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For more than 15 years, Community Health Network of Washington (CHNW) and the Washington Association of Migrant and Community Health Centers (WACMHC) have advocated on behalf of community health centers and the patients they serve. Today, Washington’s community health centers serve 695,000 patients at over 140 clinic sites across the state. It is the community health center mission and federal mandate to serve all

people regardless of their ability to pay. Washington's health centers provide access to high-quality, affordable care to Washington's most vulnerable people and families, including one quarter of the state's uninsured population.

Community Health Network of Washington (CHNW)

Founded by community health centers in Washington State, Community Health Network of Washington (CHNW) is a community health center-focused delivery network, whose mission is to improve the health status of our communities through the provision of high-quality, affordable, community-based health care to underserved individuals and families.

The Washington Association of Community & Migrant Health Centers (WACMHC)

WACMHC is a non-profit organization, formed in 1985, to advocate on behalf of the low-income, uninsured, and underserved populations of Washington State served by community health centers. These health centers serve low income and other persons with limited access to health care.

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