

ONE HUNDRED FOURTEENTH CONGRESS
Congress of the United States
House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

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WASHINGTON, DC 20515-6115

Majority (202) 225-2927
Minority (202) 225-3641

July 13, 2016

Tom Van Coverden
President and CEO
Chair of the Board
National Association of Community Health Centers
7501 Wisconsin Ave., Suite 1100W
Bethesda, MD 20814

Dear Mr. Van Coverden:

Congress has repeatedly expressed strong bipartisan support for the nationwide network of health centers in the federal Health Center Program that help provide a health care safety net for Medicaid beneficiaries, people who are uninsured, and others who may have difficulty obtaining access to health care. Annual funding for the Health Center Program has nearly tripled during the past decade, from approximately \$1.8 billion to about \$5.1 billion, from FY 2006 through FY 2016. In 2015, Health Center Program grants helped fund more than 1,300 health centers, which operated over 9,000 service delivery sites across all states and served 22.9 million patients.

As you know, to receive program funds, health center grantees must comply with a number of program requirements, including requirements related to governance, management, and the provision of services. To help health centers comply, the National Association of Community Health Centers (NACHC) receives funding through a cooperative agreement from the Health Resources and Services Administration (HRSA) to provide training and technical assistance to health centers across the country. Thus, NACHC plays an important role in helping health center grantees understand, and adhere to, federal requirements.

Given NACHC's role in advising and guiding health centers, we were deeply troubled by the findings from a recent investigation conducted by the Office of Inspector General (OIG) for the Corporation for National & Community Services (CNCS), the federal agency that oversees AmeriCorps. The OIG's findings raise serious questions about NACHC's interpretations of the prohibition on the use of federal funds for abortion services. As you know, consistent with the

longstanding Federal statutory restriction, commonly known as the Hyde Amendment, health centers are prohibited from using federal funds for abortion services.¹

Yet, the OIG found that between 2013 and 2015, NACHC allowed a few AmeriCorps members to provide emotional support (doula care) to women during abortion procedures at three New York City clinics.² Even worse, the OIG noted that “NACHC had disregarded the direction of CNCS’s General Counsel in 2010 to include in its training materials and member agreements the abortion prohibition precisely as stated in the Serve America Act.” NACHC’s willful deviation from CNCS’s directive is very concerning. In fact, it is even more disconcerting that NACHC ignored this guidance, even after a 2011 Congressional hearing following CNCS’s disclosure that two other grantees had committed abortion-related prohibited activities.

Given the OIG’s findings and NACHC’s previous lapses of judgment with respect to following guidance on this issue, I am concerned NACHC appears to be failing to meet all its obligations in helping health centers comply with Federal statutory and regulatory requirements in a timely manner. Recipients of federal dollars have a basic duty to adhere to federal requirements.

NACHC’s actions to date sent the wrong signal to health center grantees, to Congress, and other stakeholders. At best, NACHC’s continued problems providing accurate information on compliance with federal requirements are troubling and unacceptable. At worst, NACHC’s seemingly lackadaisical approach to this serious issue may foster a culture of indifference and neglect in which grantees are not required to meet their responsibilities.

As a strong supporter of the health center program, I believe NACHC needs to take remedial actions to rectify concerns regarding NACHC’s failures to properly communicate statutory prohibitions on the use of federal funds for abortion services. If NACHC takes timely steps to address concerns and put in place new protocols to prevent future violations, this will help repair broken trust. Therefore, in the interest of correcting previous errors and demonstrating good faith toward future compliance, I request NACHC:

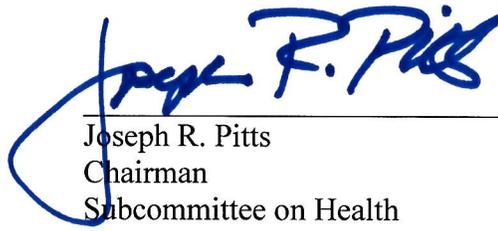
1. No longer provide any funding to, or place HealthCorps members at, the NY clinic through their AmeriCorps program
2. Identify all sources of federal funding, including the amount and purpose of each source of funds
3. For each source of federal funding, document all steps (including training, changes to guidance, etc. for NACHC staff and federal grantees they advise) they are taking to ensure the events that transpired do not occur again.

If you have any questions about this request, please contact Adrianna Simonelli with the Committee on Energy and Commerce at (202) 225-2927.

¹ There are exceptions on this prohibition on the use of federal funds in cases of rape, incest or endangerment of the mother’s life.

² <https://www.cncoig.gov/news/closed-cases>, Case ID: 2016-003

Sincerely,



Joseph R. Pitts
Chairman
Subcommittee on Health