

National Medicaid Congress



FQHCs and Quality of Care

Developing a Culture of Quality throughout the Health Center Program

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Today's Presentation



National Overview

- Health Center Program Performance
- Primary Health Care Focus

Primary Health Care Updates

- Policy
- Funding
- Quality and Data
- 2010 Priorities

Additional HRSA Resources





Improve the health of the Nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality primary health care services





Health Center Requirements



Community Need:

 Located in medically underserved areas (MUA) or serves medically underserved populations (MUP)

Services:

- Provide comprehensive primary care services
- Provide enabling services such as education, translation and transportation that promote access to health care
- Services available to all with fees adjusted upon ability to pay

Management and Finance:

 Meet performance and accountability requirements regarding administrative, clinical, and financial operations

Governance:

 Governed by a community board composed of a majority (51%) of health center patients who represent the population served

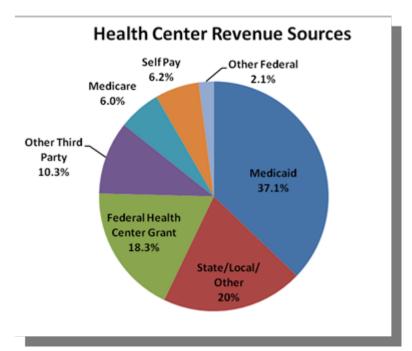


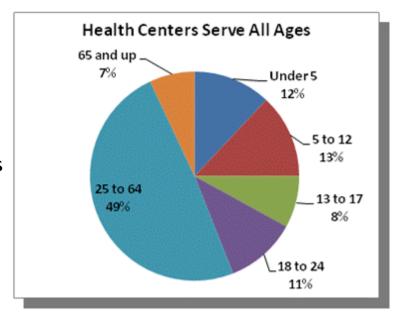
Health Center Program Overview Calendar Year 2008



17.1 Million Patients

- 92% Below 200% poverty
- 38% Uninsured
- 40% Racial Minority; 33% Hispanic
- 934,000 Homeless Individuals
- 834,000 Migrant/Seasonal Farmworkers
- 157,000 Residents of Public Housing





67 Million Patient Visits

- 1,087 Grantees half rural
- 7,500+ Service Sites

Over 113,000 Staff

- 8,441 Physicians
- 5,100 NPs, PA, & CNMs



Health Center Program National Presence







Health Center Performance Calendar Year 2008



Among Health Center Patients:

- 65% entered prenatal care in the first trimester
- Rate of low birth weight babies (7.6%) continues to be lower than national estimates (8.2%)
- 70% of children have appropriate immunizations
- 73% Diabetic Patients with HbA1c <= 9
- 62% Hypertensive Patients with Blood Pressure <= 140/90
- \$588 Cost per Patient; \$129 per Visit



For more information: http://www.bphc.hrsa.gov/about/performancemeasures.htm

Source: Uniform Data System, 2008



The Affordable Care Act



- The Affordable Care Act (ACA) provides \$11 billion in funding for the operation, expansion, and construction of health centers throughout the Nation.
- This increased funding will double the number of patients seen by health centers over the next 5 years, making primary health care available for an additional 20 million people.



The Affordable Care Act



- Other key ACA provisions for health centers:
 - Teaching Health Centers
 - Funding for National Health Service Corps
 - Nurse-Managed Health Clinics
 - Community-Based Collaborative Care Networks
 - Medicare Payment Changes



Quality Health Care



Health care that is...

...safe, effective, patient-centered, timely, efficient, and equitable.



BPHC QI Strategy Framework



Inputs/ Resources

HRSA

Health Centers

HC Partners

Other HHS & Fed. Agencies

Local & National Stakeholders

Activities

Develop TA & QI Support Infrastructure

Facilitate HIT Adoption & Integration

Strengthen Eval.
& Innovation
Infrastructure

Facilitate
Communication
& Collaboration

Output

TA & QI Support
Available &
Coordinated

HIT Adopted & Used Meaningfully

Eval. & Innovations On-going

Collaborations & Partnerships Strengthened

Impact

Health Centers Transformed for QI

Care & Services
Coordinated
Regionally

QI Efforts
Aligned Locally
& Nationally

Outcome

(HCs providing care that is...)

Safe

Effective

Efficient

Patient-Centered

Timely/ Accessible

Equitable





Provide TA to Support QI

- Training and Technical Assistance
 - BPHC TA website
 - Webinars/Conference Calls
 - Direct TA through National Cooperative Agreements and Partners
- Policy Guidance
 - QI Template
- Risk Management Support





Support HIT Adoption

- EHR adoption through Health Center Controlled Networks and CIP (ARRA)
- Work with Federal partners on meaningful use, Beacon Community, Regional Extension Centers.





Evaluation and Innovations

- Assure quality through data
 - BPHC: UDS, HC Quarterly Reports, Patient Surveys, FTCA Claims, Site visits, Accreditation
 - Other sources: HAB, NCA
 - Public health & community data
- Identify Best-Practices
 - Performance measurement and analysis
 - Case studies
- Translational Research and Demonstrations
 - CHARN, PBRN
 - CMS FQHC APC Demonstration





Alignment and Integration through Partnerships

HRSA

- BCRS: National Health Services Corps.
- BHPr: Health Professions Training, Teaching Health Centers
- HAB: Ryan White
- MCHB: Title V, Healthy Start
- ORHP: RHC and Critical Access Hospitals
- Office of Health IT and Quality
- Office of Special Health Affairs





Alignment and Integration through Partnerships

- Federal Partners
 - HHS: OS, AHRQ, CMS, SAMHSA, CDC, IHS
 - Federal wide: ONDCP, VA, HUD, DOE, USDA, etc.
 - States and local governments
- Private Partners
 - Various stakeholder groups
 - Foundations
- National Accreditation and Recognition



Packaging the Activities



Patient-Centered Medical Homes/ Advanced Primary Care

- Align with and influence national standards
- Build on existing & emerging programs.
- Provide incentives and TA to become PCMH
- Support evaluations & innovations
- Partner with key stakeholders



Packaging the Activities



Work with HCCNs & PCAs to...

- Support successful EHR adoption
- Prepare HCs for meaningful use
- Support participation in Health Information Exchanges
- Support participation in Practice Based Research Networks
- Utilize EHRs to facilitate quality improvement and risk management



Packaging the Activities



Health Centers as Public Health Interventions

- Adopt population health approaches
 - Support community needs assessment (e.g. Health Landscape, CHSI, Match, etc.)
 - Examine HC impact on community health and health systems as a whole
 - Partner with public health departments, services and organizations
 - Leverage clinical data to inform population health



Contact Information



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