



NATIONAL ASSOCIATION OF  
Community Health Centers



America's Voice for Community Health Care

## Agenda



- NACHC and Health Centers
- Collaboration Models
- Social Determinants of Health



## National Association of Community Health Centers (NACHC)

- Founded in 1971
- **Mission:** To promote the provision of high quality, comprehensive and affordable health care that is coordinated, culturally and linguistically competent, and community directed for all medically underserved populations.
- Voice of America's Health Centers:
  - Research-based advocacy
  - Education about the mission and value of health centers
  - Training/TA to health center staff and boards
  - Clinical Workforce, Innovation, Performance

3

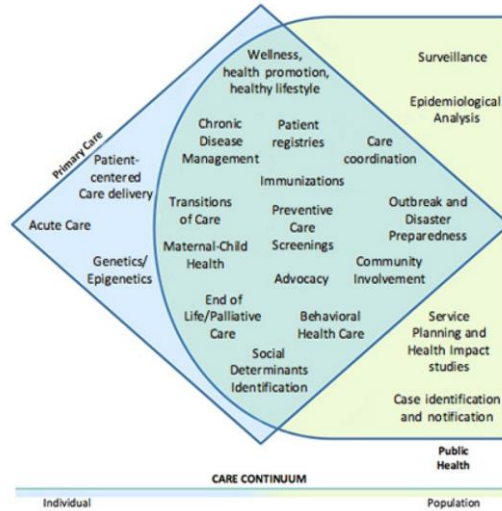


## NACHC Priorities

- Shift from Volume to Value Based Payment
- Integrate public health, oral health and behavioral health with primary care
- Invest in the workforce of the future to work in emerging models
- Alignment of measures across systems of care: Payers, NQF, CMS, CDC, HRSA/BPHC, ONC, USPSTF/ACIP

5

## Public Health and Primary Care Integration



Source: AAFP Integration of Primary Care and Public Health Work Group. Integration of Public Health and Primary Care (Position Paper). Available: <http://www.aafp.org/about/policies/all/integprimcareandpublichealth.html>

6

## Health Center Profile

- 1,375 health center organizations
- 9,300 delivery sites
- 20,000 clinicians
- 24 M patients per year in 13 people in the US)
- 92.5% are low-income patients
- 49% are rural
- 98% using EHRs





## Health Centers

### **Include:**

- Community Health Centers
- Health Care for the Homeless Centers
- Migrant Health Centers
- Primary Care Programs in Public Housing
- School-based Health Centers

*Each health center is an independent, 501(c)(3), non-profit*

7



## Health Centers

### **Five Essential Elements**

1. Located in *high-need areas*
2. Provide *comprehensive* health and related services (especially “enabling services”)
3. *Open to all* residents, regardless of ability to pay, with sliding scale fee charges based on income
4. Governed by *community boards*, to assure responsiveness to local needs
5. *Follow performance and accountability requirements* regarding their administrative, clinical, and financial operations

8

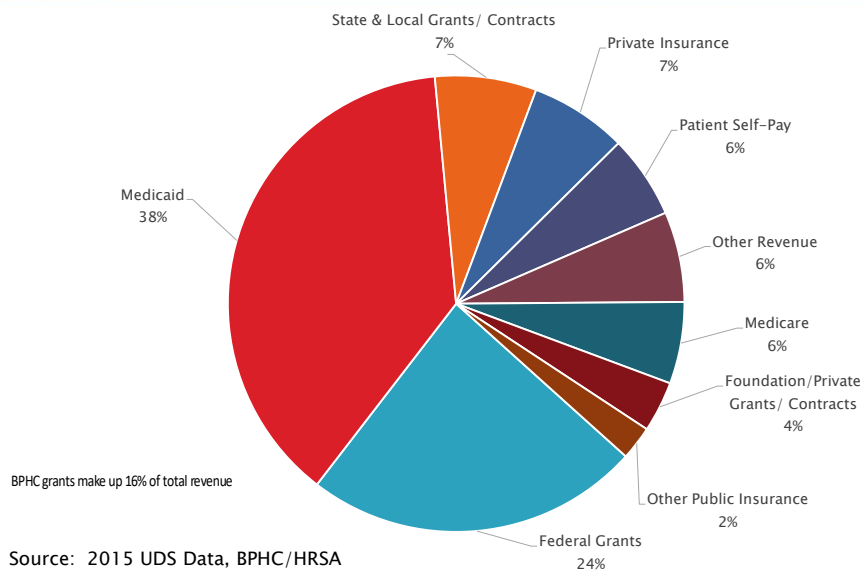
## Health Centers

### Governed by: A Board of Directors

- Reflect community served
- 51% or more must be health center patients

9

## Health Center Funding



10

## Health Center Services

- **Health Services related to:**
  - Family Medicine
  - Internal Medicine
  - Pediatrics
  - Obstetrics
- **Diagnostic Laboratory and Radiologic Services**
- **Dental Screenings**
- **Pharmaceutical Services**
- **Referrals to Other Providers**
- **Patient Case Management**
- **Enabling Services: Translation, Transportation, Outreach, and Health Education**

11

## Health Center Program Growth

	2010	2015	% Change
<b>Number of Grantees</b>	1,124	1,375	+22.3
<b>Total Patients</b>	19,469,467	24,295,946	+24.8
<b>Total Visits</b>	77,069,234	96,951,585	+25.8

Source: 2015 UDS Data, BPHC/HRSA

12

## Patient Characteristics

### Age and Gender

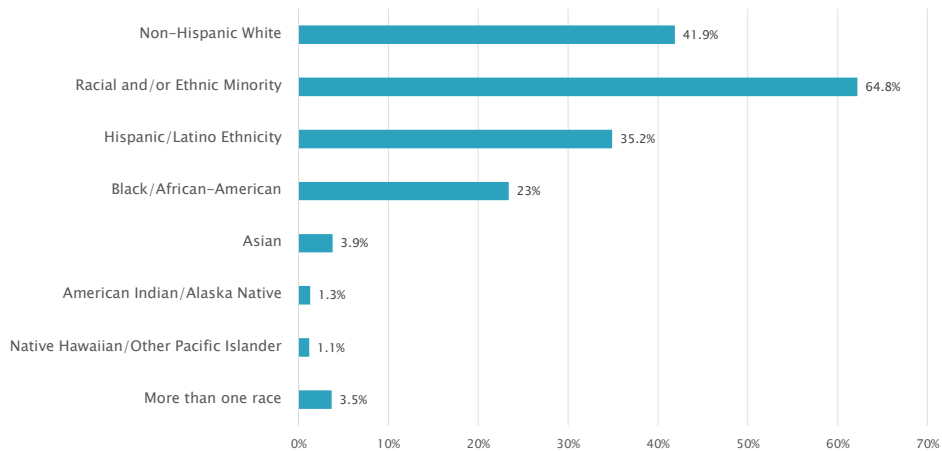
Age Group	Male	Female	Total	% Change
Under 18	3,786,434	3,803,015	7,589,449	+6.1
18-64	5,637,199	9,148,357	14,785,556	+5.8
<b>65 and Over</b>	770,520	1,150,421	1,920,941	<b>+10.0</b>
Total	10,194,153	14,101,793	24,295,946	+6.2
Percent	42.0	58.0		

Source: 2015 UDS Data, BPHC/HRSA

13

## Patient Characteristics

### Race/Ethnicity

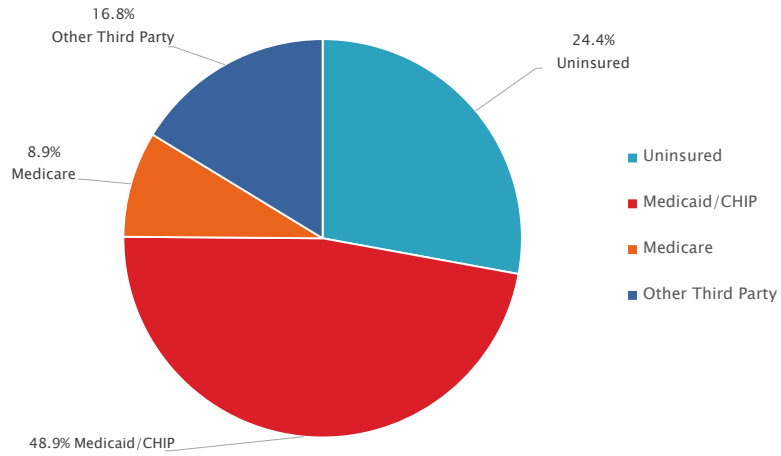


Source: 2015 UDS Data, BPHC/HRSA

14

# Patient Characteristics

## Insurance Status

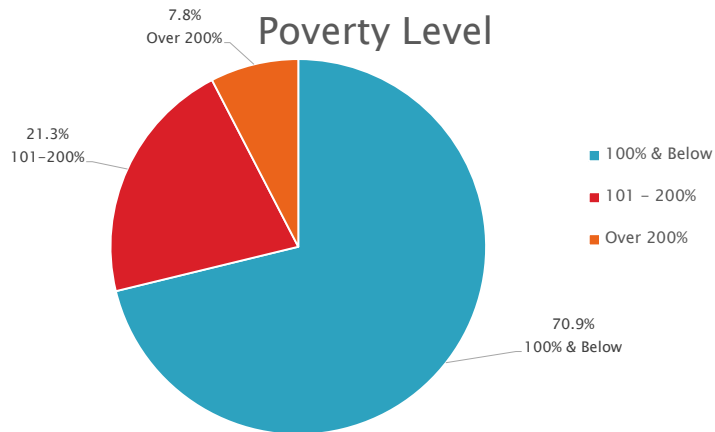


Source: 2015 UDS Data, BPHC/HRSA

15

# Patient Characteristics

## Income as a Percent of Federal Poverty Level



Source: 2015 UDS Data, BPHC/HRSA

16

## Most Frequent Primary Medical Visits

Diagnosis	# Patients
Hypertension	3,993,203
Diabetes	2,118,178
Depression/Other Mood Disorders	1,939,489
Asthma	1,190,679
Otitis Media/Eustachian Tube Disorders	822,929

Source: 2015 UDS Data, BPHC/HRSA

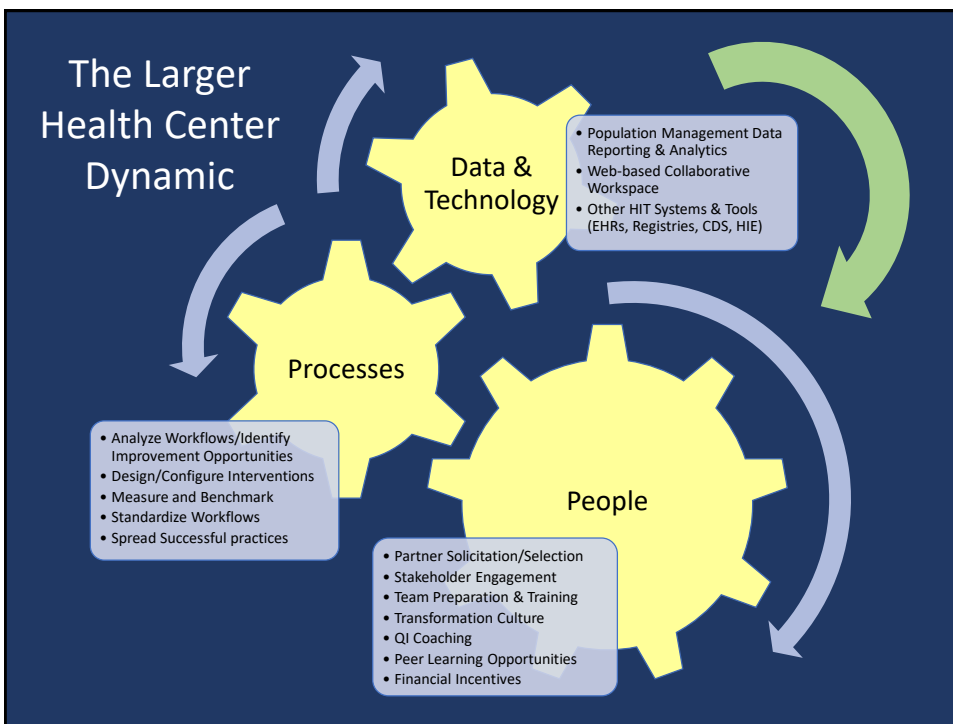
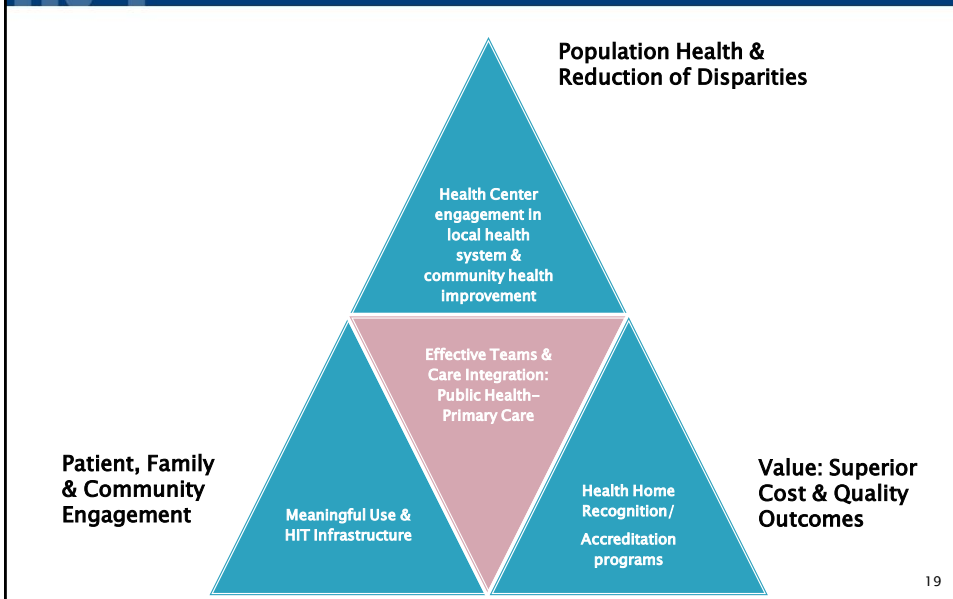
17



Health System  
Transformation:  
*Policy, Partners,  
Payers, Providers,  
Patients*

26

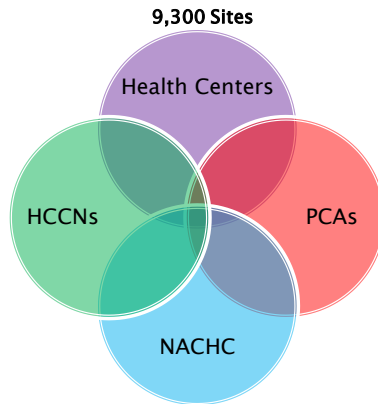
# Health Home and Transformation Framework



## National Health Center Infrastructure: Commitment to Mission, Data, and Quality

### Health Center Controlled Networks (70)

- Data Warehousing
- EHR adoption and upgrade Training
- Workflow
- EHR Optimization
- Regulatory Compliance & Reporting (UDS)
- Clinical quality performance analysis/feedback



### Primary Care Associations (52)

- Communication Infrastructure
- Committees
- New Health Centers
- Health Reform and ACO development
- BPHC: FQHC 330 Program Requirements
- Quality:
  - Coaching
  - Peer Learning
  - Training & Technical Assistance

**NACHC:** Research-based advocacy and Education about the mission and value of health centers. T/TA to HCCNs, PCAs, health center staff and boards. Develop community and public health alliances to increase access to primary care for the safety net.

21

22



- Collaboration Models
- Social Determinants of Health

*"I left private practice to work in health centers to do what I believe in to improve the health of my patients. In private practice I had to do it alone, in health centers I have an entire national and state infrastructure to support the work."*

"Model Partnership"

- CA Public Health Adult Imm



## Why?

- Built on Trust
- Foundation in Primary Care
- Framed in Value-Based Payment
- Use the Expanded Care Team
- Regular structured Communication



## HOW?

- **Start** *Partner with the Primary Care Association to design implementation and sustainability with health centers*
  - Contact the Medical Director or QI lead
  - PCAs broker relationships with health centers
- **Define** *mutually beneficial and reinforcing activities*
- **Share** *public health data with PCAs and health centers*
- **Health centers are mission driven:** *build on the mission and care for their patients*



## Results

- 3 Health Center Controlled Networks (HCCN) with member health centers are beta testing CAIR 2.
- CA Public Health provided health center immunization data to (HCCN)
- CA Public Health presented to CA PCA Medical Directors
- Joint presentation planned for CA Quality Conference to include CA Public Health, HCCNs, Health Centers
- CA PCA meets monthly with CA Public Health

## Why Partner with PCAs, HCCNS, and NACHC?

- **Collaborative partnership** in a complex environment of Health System Transformation
- **Leverage existing infrastructure** with partners, payers, providers and patients in primary care
- **Reach to the field** of 24,000,000 patients, 20,000 clinicians, and 9,300 sites
- **Architects of the new models** of health care to improve population health
- **Efficiency and consistency**

43

28



- Social Determinants of Health

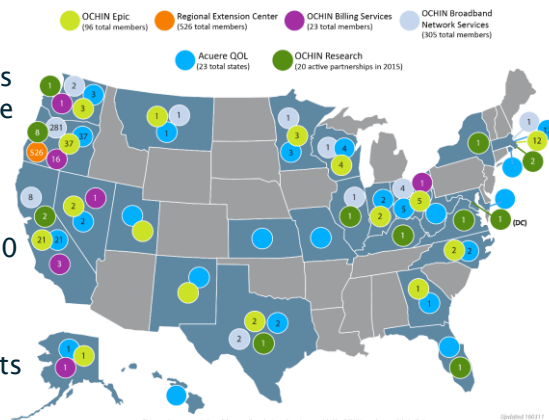
## About OCHIN

- One of the nation's Largest Health Center Controlled Networks (HCCN) (EPIC)
- Provide EHR/IT, analytics, billing, quality improvement, and consulting services
- Customers: Federally Qualified Health Centers, Rural Health Centers, County Health Depts, and nonprofit clinics
- Conduct Research

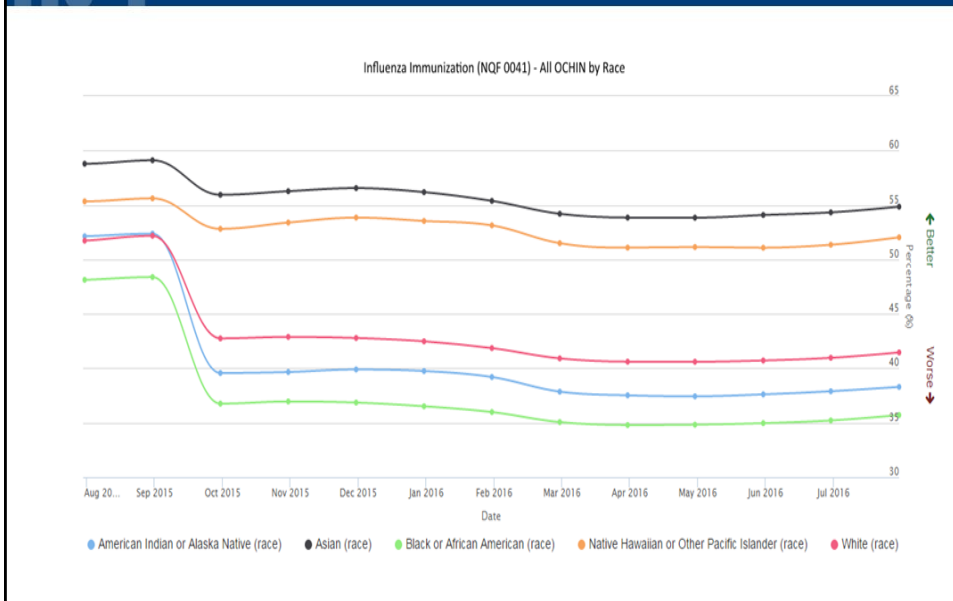
WE ARE OCHIN

## About OCHIN

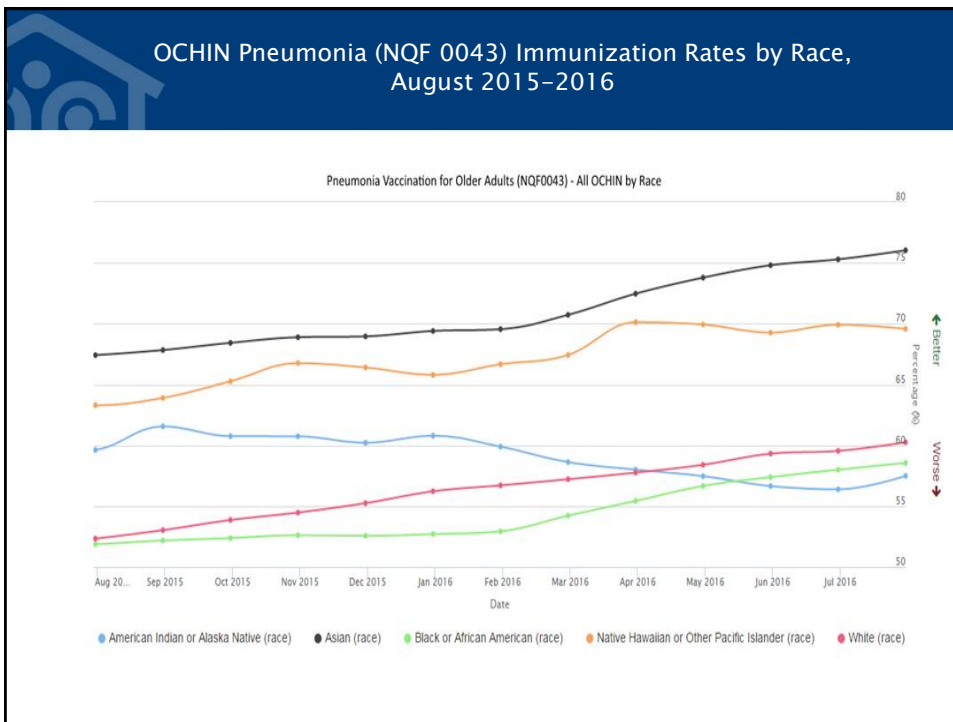
- 95 member organizations across 18 states nationwide
- Approximately 500 clinic locations
- Approximately 4,000 primary care providers
- 900K unique patients and 3.2M visits in 2015



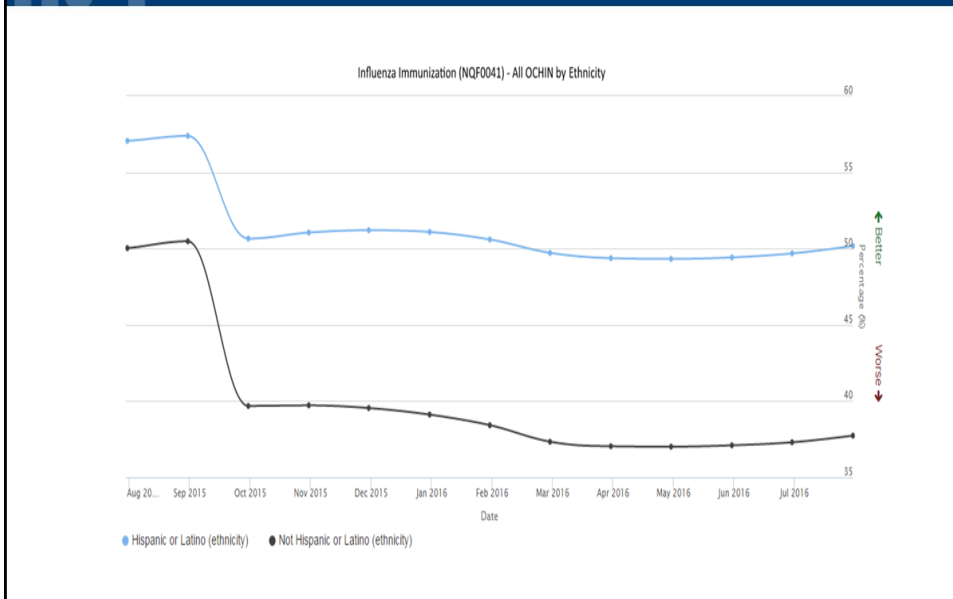
## OCHIN Influenza (NQF 0041) Immunization Rates by Race August 2015–2016



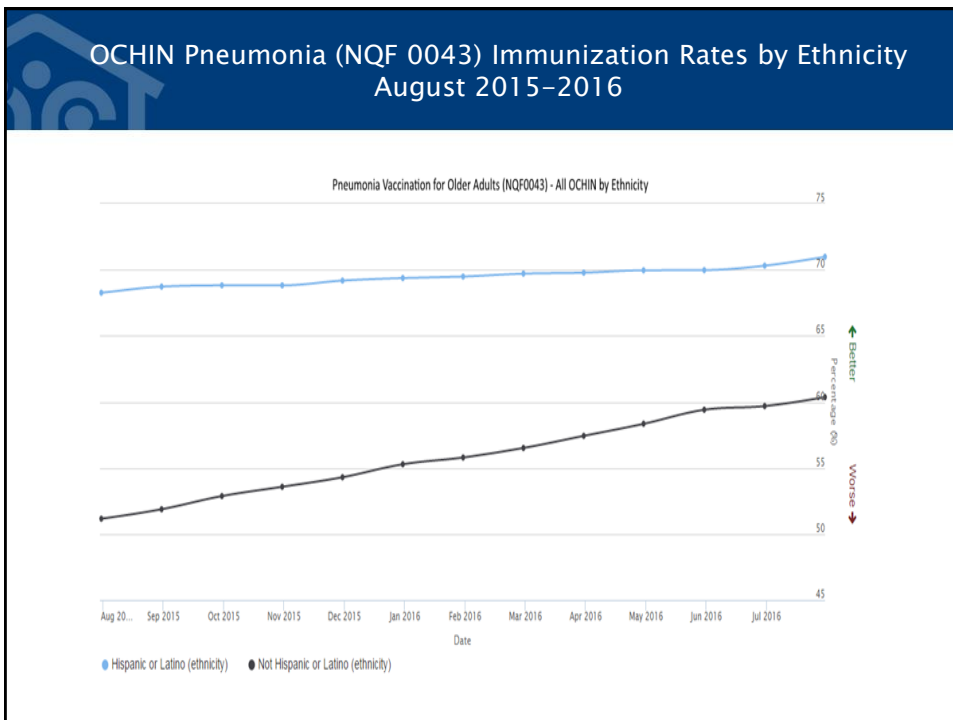
## OCHIN Pneumonia (NQF 0043) Immunization Rates by Race, August 2015–2016



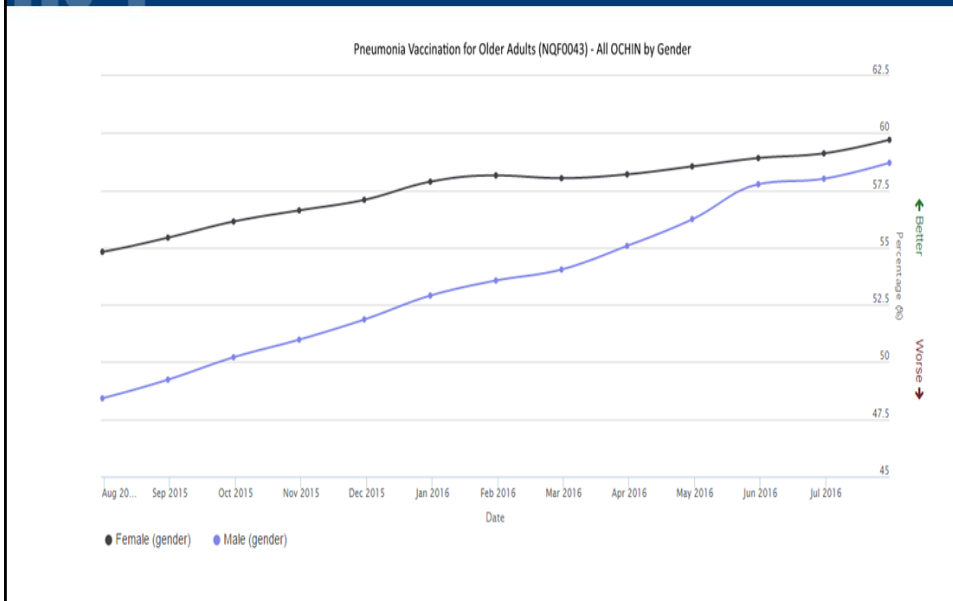
## OCHIN Influenza (NQF 0041) Immunization Rates by Ethnicity August 2015–2016



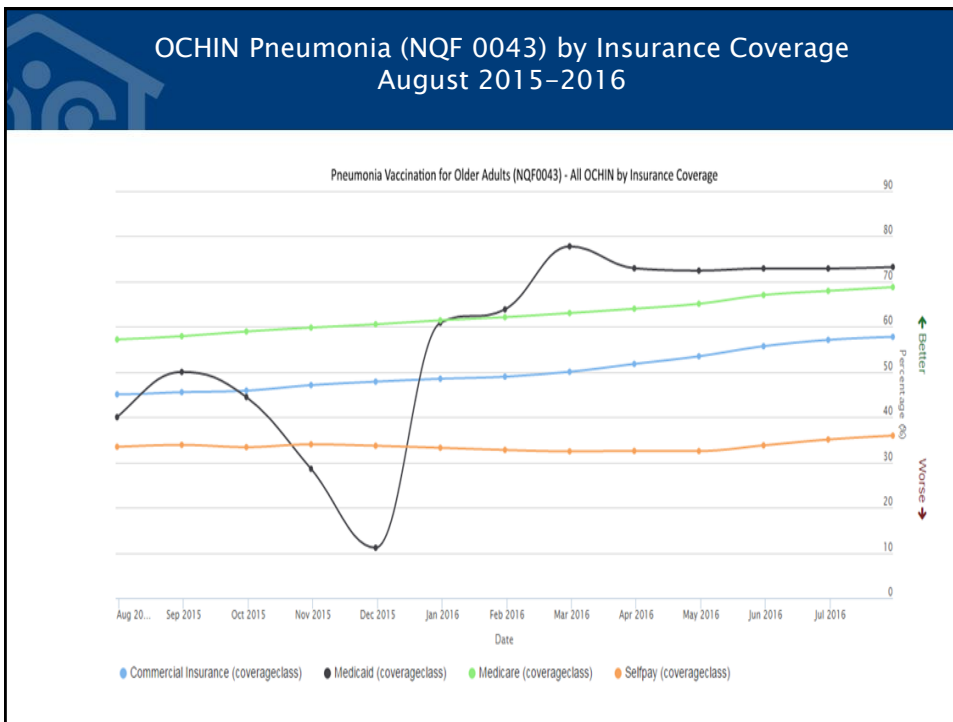
## OCHIN Pneumonia (NQF 0043) Immunization Rates by Ethnicity August 2015–2016



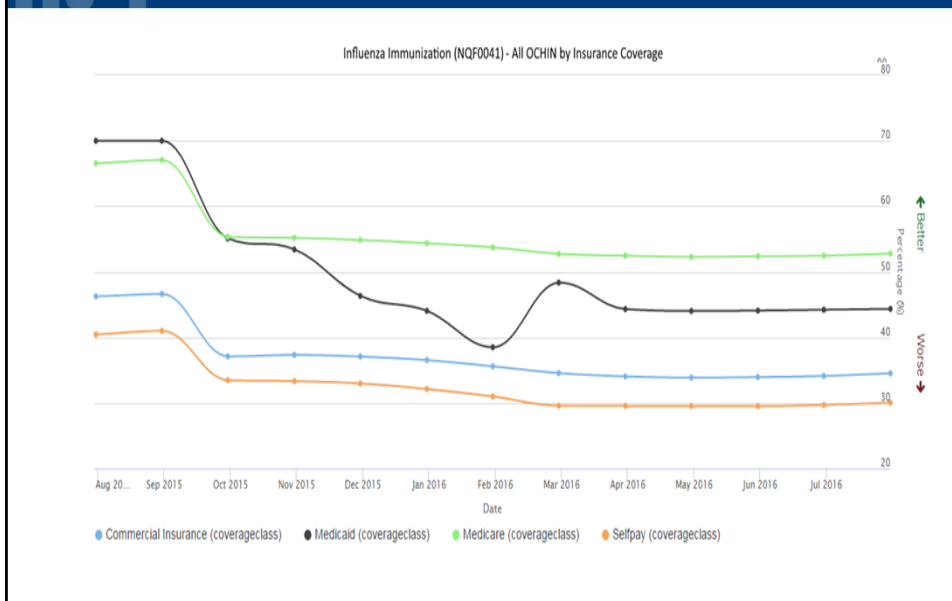
## OCHIN Pneumonia (NQF 0043) Immunization Rates by Gender August 2015-2016



## OCHIN Pneumonia (NQF 0043) by Insurance Coverage August 2015-2016



## OCHIN Influenza (NQF 0041) by Insurance Coverage August 2015–2016



## Resources

- Research and Data <http://www.nachc.org/research-data.cfm>
- HRSA BPHC 2015 UDS Manual  
<http://bphc.hrsa.gov/datareporting/reporting/2015udsmanual.pdf>
- Your Health Center Quality Management Plan  
[http://www.nachc.com/client/documents/clinical/Clinical\\_NMD\\_Your\\_QM\\_Plan.pdf](http://www.nachc.com/client/documents/clinical/Clinical_NMD_Your_QM_Plan.pdf)
- CDS/QI Worksheets <https://www.healthit.gov/sites/default/files/eCQI-Worksheet-Ambulatory-Essential-05-15.pdf>
- Partnerships between FQHCs and Local Health Departments for Engaging in the Development of a Community-Based System of Care.  
<https://www.nachc.com/client/PartnershipsBetweenFederallyQualifiedHealthCentersAndLocalHealthDepartmentsforEngagingInTheDevelopmentOfACommunityBasedSystemOfCareNACHCOctober2010.pdf>
- Buyers Guide to Business Intelligence Tools  
[https://mylearning.nachc.com/diweb/gateway/init/1/f/catalog\\*2Fitem\\*2Ffid\\*2FFPB0115TTA1](https://mylearning.nachc.com/diweb/gateway/init/1/f/catalog*2Fitem*2Ffid*2FFPB0115TTA1)



Thank You

Kathy McNamara  
301-347-0400  
kmcnamara@nachc.com