

## May 18, 2011 - MUP (Three Groups - Regular, Simplified and Streamlined)

### MUA/P Criteria

- 1) Factors indicative of the health status of a population group
- 2) Ability of the residents of a population group to pay for health services
- 3) Access to these health services
- 4) Availability of health professionals to residents of a population group

**Streamlined Groups** (used to be one group, now divided into two – streamlined and simplified)

#### Description

Established MUP groups are assumed to meet 3 criteria (health status, ability to pay and access to care) and need to demonstrate availability by population count only. It should not be necessary for applicants to have to repeat well-established justification that specific groups meet MUA/P criteria. Streamlining saves HRSA, PCOs and local applicants considerable time and resources.

#### Groups

- Sect 330 - already named in statute. 330 program legislation provides automatic MUP if awarded special pop CHC grant.
- American Indians (Native American, Native Alaskan) - unique population of sovereign nations within the United States. U.S. government promised continual access to health care.

#### Criteria

Availability (local population count) - No explicit RSA population floor; simply require that it be of sufficient size to support the federal resources to which it might be assign

### Simplified Groups

#### Description

Groups established by HHS legislation. These groups are assumed to meet 3 criteria (health status and access to care via legislation; poverty via national poverty rate), and need to demonstrate provider availability locally. Allows for identification of specific groups that are already recognized by HHS as meeting two of the MUA/P criteria.

*Criteria for legislation re: health status and access to care pending.*

#### Groups

- Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, PL 101-381
- Combating Autism Act of 2006
- Developmental Disabilities Act
- The Traumatic Brain Injury Act of 2008 (P.L. 110-206)
- Disadvantaged Minority Health Improvement Act

#### Criteria

Poverty (national) – Simplified groups must meet poverty threshold of 5% above 100% national poverty rate. Current HPSA regulations consider 20% below poverty as an area/group in high need. At time of new regulations development, the national normative poverty rate is approximately 14.5% (2009 ACS estimate). Five percent above the 2009 national rate equals the current twenty percent poverty threshold. By setting a standard rather than a specific numerical threshold, the requirement can fluctuate as poverty rate increases or decreases over time. We have also reviewed the data and it looks like it fits with what we know about underserved populations. The standard poverty data source will be the ACS, but if data is not available in ACS, the group may cite a national data set supported by a federal agency and compare poverty level to ACS standard for that year (or that group of years).

Availability (local)

Provider: *waiting for workforce report re: ratios so that we can adjust for population*

Population (same as Streamlined): No explicit RSA population floor; simply require that it be of sufficient size to support the federal resources to which it might be assign