



HRSA/ONC Beacon Health Center Collaboration

FY 2011 Supplemental Funding for Health Centers in the Beacon Communities Catchment Areas

Carlene Randolph

Health Information Technology – Branch Chief

U.S. Department of Health and Human Services

Health Resources and Services Administration

Bureau of Primary Health Care



Agenda



- Overview of Beacon Community Health Center Supplemental Funding
 - Eligibility requirements
 - Electronic submission process
 - Funding application requirements
 - Program narrative
 - Budget presentation
- Examples of Health Centers and Beacon Collaboration
- Technical assistance contacts
- Overview of Beacon Community Program funded by the Office of the National Coordinator for Health Information Technology (ONC)
- Questions & Answers



Supplemental Funding Overview



- Purpose:
 - To enable health centers to participate in community-wide health care improvement initiatives that contain a strong information technology component. The recipient health centers are expected to use the supplemental funds to collaborate with Beacon Community Program grantees and improve their individual health center's capacity to share data and information within the Beacon Community.
- Project period: 1 year
- HRSA Electronic Handbook (EHBs) deadline: July 29, 2011 by 8:00 PM ET
- Eligible applicants are existing Health Center Program grantees operating at least one site within a Beacon Community Program service area as defined by counties and zip codes.



Submission Process



- E-mail notifications that the Beacon supplemental funding request is available for submission have been sent to Health Center Project Directors.
- The funding request will be completed in HRSA's Electronic Handbooks (EHB) only.
- Grantees submit the supplemental funding request in EHB using the Prior Approval Request module within the H80 Grants Handbook. The User Guide is included with the Supplemental Funding Announcement.



Application Requirements



- Application requirements
 - Program narrative 3-5 pages
 - Budget
 - Letter of support from the Beacon Community



Program Narrative



- Performance improvement goals
- Key clinical and non-clinical interventions
 - How the interventions will lead to expected outcomes, including improved capacity to share data and information within the Beacon Community
- Action plan with timelines
- Privacy and security approach
- Sustainability approach



Budget Presentation



- Budget Form (SF-424A)
 - One-year budget period
- Budget narrative/line-item justification
 - Describe each cost element and explain how it contributes to meet project objectives
 - Explain how this additional funding will not supplant other Federal funds (i.e., Capital Improvement Program or Health Center Controlled Network)
- Sustainability approach
 - Short description of the health center's approach for continuing quality improvement activities beyond the supplemental funding



Examples of Quality Improvement Initiatives



- Advance alignment with Meaningful Use standards
- Support to improve Quality Improvement Plans
 - Performance metrics
 - Quality Reports
 - Workflow redesign
- Improve capacity to share data and information within the Beacon Community
- Strengthen governance structures
- Support for sustainability plans
- Support for Privacy and Security
 - Comply with HHS standards



Technical Assistance Contacts



- Electronic submission questions
 - BPHC Helpline BPHCHelpline@hrsa.gov or 1-877-974-2742

- Program related questions
 - Anna Poker: BPHC_HIT@hrsa.gov or 301-443-1866

- Budget related questions
 - Brian Feldman: BFeldman@hrsa.gov or 301-443-3190



Contacts



Carlene Randolph

Health Information Technology – Branch Chief
U.S. Department of Health and Human Services
Health Resources and Services Administration

Bureau of Primary Health Care
5600 Fishers Lane, Rm. 15C-26

Rockville, MD 20857

Telephone: 301-443-2874

CRandolph@hrsa.gov



HRSA/ONC Beacon Health Center Collaboration

Aaron McKethan

Beacon Community Program Director

U.S. Department of Health and Human Services

Office of the National Coordinator

Office of the Secretary



Beacon-Health Center Collaboration Aims



- To build and strengthen capacity for quality improvement efforts utilizing health information technology
- To facilitate community-wide driven efforts to improve population health
- To reduce health disparities and improve access—address vulnerable populations
- To increase scalability of quality improvement across the community



Beacon Community Program



- **ONC allocated \$265 million over 3 years to 17 communities, including \$15M for technical assistance and evaluation, to demonstrate the feasibility and the health care delivery benefits of widespread HIT adoption and exchange of health information.**
- **Core aims of the program:**
 - **Build and strengthen health IT infrastructure as a foundation to improve quality of care, health outcomes, and cost efficiencies;**
 - **Demonstrate that health IT-enabled interventions and community collaborations achieve concrete cost/quality performance improvements;**
 - **Test new innovations to improve health and health care**

Beacon Communities





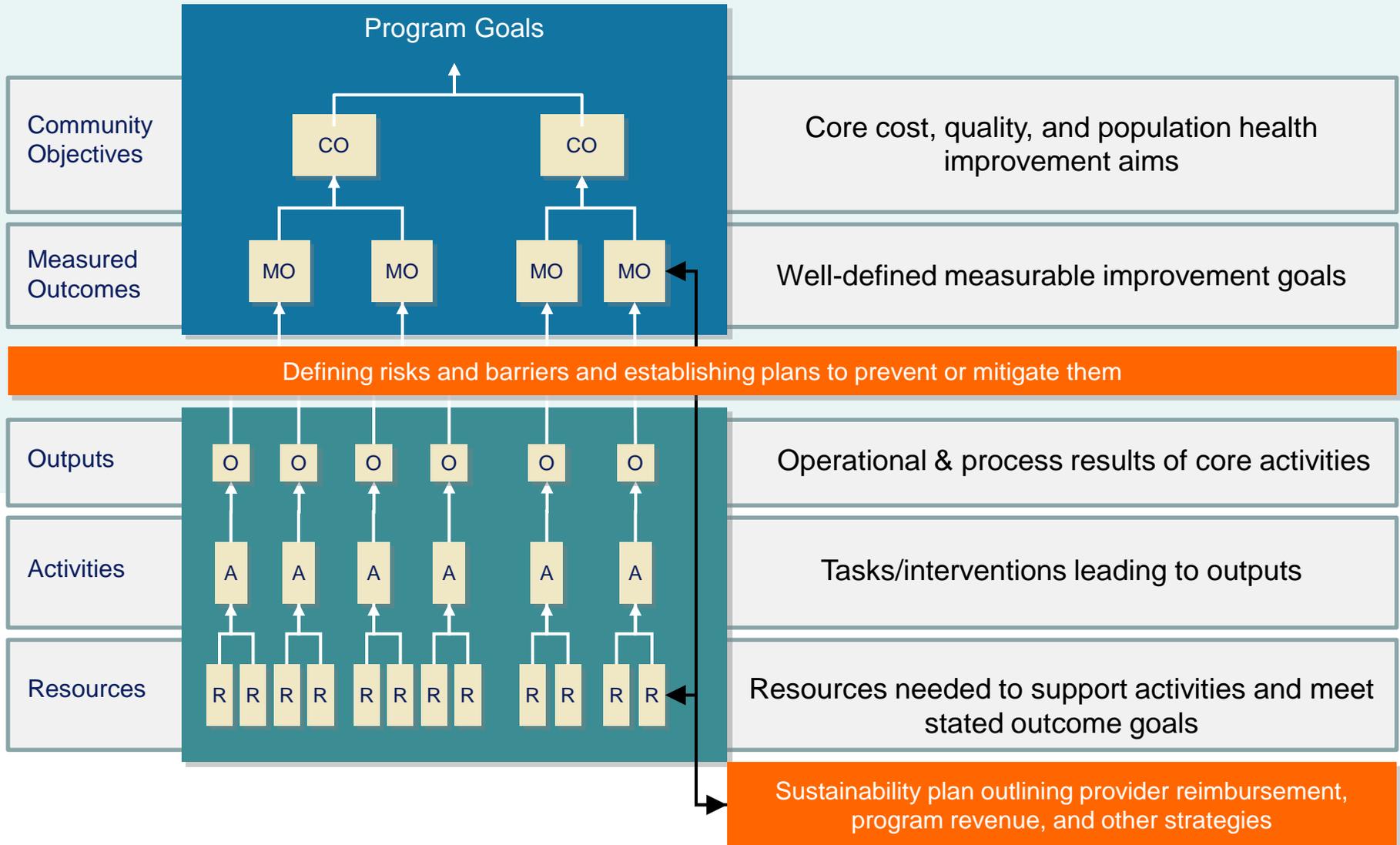
Organization / Location



Lead Organization	Location
Community Services Council of Tulsa	Tulsa, Oklahoma
Delta Health Alliance	Stoneville, Mississippi
Eastern Maine Healthcare System	Brewer, Maine
Geisinger Clinic	Danville, Pennsylvania
Greater Cincinnati HealthBridge	Cincinnati, Ohio
HealthInsight	Salt Lake City, Utah
Indiana Health Information Exchange	Indianapolis, Indiana
Inland Northwest Health Services	Spokane, Washington
Louisiana Public Health Institute	New Orleans, Louisiana
Mayo Clinic College of Medicine	Rochester, Minnesota
The Regents of the University of California, San Diego	San Diego, California
Rhode Island Quality Institute	Providence, Rhode Island
Rocky Mountain Health Maintenance Organization	Grand Junction, Colorado
Southeastern Michigan Health Association	Detroit, Michigan
Southern Piedmont Community Care Plan	Concord, North Carolina
University of Hawaii at Hilo	Hilo, Hawaii
Western New York Clinical Information Exchange	Buffalo, New York



Beacon Community Program Logic Model



2010

- Governance
- IT & measurement infrastructure
- Interventions logic models

2011

- First wave of interventions
- Innovation networks

2012 & 2013

- Subsequent waves of interventions
- Dissemination of lessons learned

- In 2011, Beacon interventions will “engage” ~5,000 providers and “touch” approximately 600K individuals around specific health improvement aims:
 - 12 Beacon Communities’ work includes improving care transitions (e.g., process improvements and information flow at hospital discharge).
 - 16 Beacon Communities’ work focuses on the use of IT tools and process improvements (e.g., CDS) to improve performance of physician practices.
- All Beacons are generating cost/quality/health data on their performance quarterly and utilizing them for improvement efforts
- Beacon Communities are also receiving provider-level reports from Medicare for the approximately 2.8 million Medicare beneficiaries in the catchment areas.



Beacon Performance Measurement Strategy



- Emphases on measurement for improvement and measurement innovation
- Three tier strategy:
 - Endorsed measures aligned with specific interventions
 - Common core set of measures aligned with national priorities (e.g., MU, ACOs)
 - Testing new measure types and measurement data aggregation to inform policy (e.g., PROs, QOLs)



High Level Overview of DM and CVD Management in Beacon Communities



	Diabetes	Cardiovascular Disease
Number of BCs identifying the disease as a demonstrated focus area	14	4
Overview of measures being used to track DM & CVD	HbA _{1c} Control*; Blood Pressure Management*; Cholesterol Screening*; Nephropathy Screening*; Retinal Exam; Medication Adherence*; Foot Exam; Tobacco Use*; Influenza* and Pneumonia Vaccinations; Patient Reported Outcomes; Primary Care Practice Visit Rates; Bundle Measures (Including Diabetes Management Bundle* & Poorly Controlled Disease*)	

* Indicates item that has been identified as a Meaningful Use Measure.



Contacts



Aaron McKethan

U.S. Department of Health and Human Services

Office of the National Coordinator

Office of the Secretary

Switzer Bldg., 330 C Street, SW

Washington, DC 20201

Telephone: 202-720-2907

Aaron.McKethan@hhs.gov