

## **FY 2011 SUPPLEMENTAL FUNDING FOR QUALITY IMPROVEMENT AND PATIENT-CENTERED MEDICAL HOME DEVELOPMENT IN HEALTH CENTERS**

### **Purpose**

The purpose of this supplemental funding opportunity under Section 330(k) of the Public Health Service Act is to improve the quality of care, access to services, and reimbursement opportunities for health centers by supporting the costs associated with enhancing quality improvement (QI) systems and becoming patient-centered medical homes (PCMHs). These costs may include access enhancements, patient flow redesign, care planning, support for team-based models of service delivery, and necessary systems upgrades. This QI-PCMH funding opportunity provides upfront assistance to grantees as they make the practice changes necessary to achieve and/or enhance PCMH recognition.

### **Background**

The patient-centered medical home is a care delivery model designed to improve quality of care through enhanced access, planning, management, and monitoring of care. The six domains of the patient-centered medical home recognition program from the National Committee for Quality Assurance (NCQA) are: (1) enhanced access and continuity; (2) identifying and managing patient populations; (3) planning and managing care; (4) providing self-care and community support; (5) tracking and coordinating care; and (6) measuring and improving performance.

Initial evaluations of the PCMH model of care show favorable results in terms of improvements to access, cost, and quality of care. PCMH initiatives such as Community Care of North Carolina have demonstrated cumulative savings of \$974.5 million over 6 years and a 40 percent decrease in hospitalizations for asthma (Patient Centered Primary Care Collaborative, 2010). There are numerous State and Federal demonstrations and pilot programs that are being developed using the PCMH framework as a basis for participation.

Health centers are integral to many of these pilot projects, and have made major advances in adopting evidence-based practices, improving patient safety, meeting national quality recognition and accreditation standards, and increasing the coordination, integration and management of care delivered in health centers. HRSA continues to support quality improvement in health centers by building on the ongoing commitment to quality-related activities called for under the patient-centered medical home model across the Health Center Program.

In November 2010, HRSA established a PCMH Initiative to improve the quality of care in health centers and their efforts to achieve national PCMH recognition or accreditation. Current support for this program is limited to funding the survey costs for PCMH recognition. In addition, HRSA has partnered with CMS to encourage health centers to participate in a Medicare FQHC Advanced Primary Care Practice Demonstration to enhance patient centered, comprehensive and coordinated care. This demonstration will assess the quality and cost effectiveness of health centers in providing care to Medicare beneficiaries through a medical home model of care. In response to these initiatives, however, HRSA has received numerous requests from health centers for additional funding to support the developmental activities required to become a PCMH.

## **Funding Request Requirements**

Each Health Center Program grantee requesting supplemental funding under this opportunity must agree to seek recognition, increase their recognition level, or maintain the highest level as a PCMH through a national or State-based recognition or accreditation program.

Applicants must complete the attached application form and identify the PCMH domain(s) in which they will focus their readiness activities. The selected domain(s) should be grounded in a PCMH transformation needs assessment. Health centers are encouraged to utilize PCMH self assessment tools to identify areas of improvement. Grantees who have already received PCMH recognition may utilize their pre-survey or initial survey results to identify areas they will improve or enhance. In requesting this one-time supplemental funding for a project period of one year, current Health Center Program grantees should:

1. Download the attached application form, complete all the necessary components, save the form, and upload it into EHB (3-5 pages). Provide a brief description of key clinical and/or non-clinical activities the health center plans to implement to improve upon the selected domain(s). For example, if a health center wishes to improve access during office hours, they may utilize the supplemental funding to conduct a patient flow study.
2. Download, complete, save, and upload into EHB the attached Project Narrative form describing the proposed activities, explaining their projected outcomes (including plans for becoming recognized as a PCMH) and how these activities are aligned with current health center quality improvement efforts. Specifically, applicants should describe the key clinical and non-clinical activities that support achievement of PCMH recognition and the projected outcomes of these activities. Activities may include but are not limited to: practice and system redesign to improve access, patient flow, empanelment, care coordination, care efficiency, integration of behavioral and oral health services with medical care, and patient safety efforts. Applicants should also describe past efforts (if any) to gain recognition and how the proposed activities will support the grantee in seeking recognition, increasing their recognition level, or maintaining the highest level of recognition. In addition, for each proposed activity, applicants should describe the timeline, milestones and key personnel involved in the activity.
3. Complete and submit a SF 424A and a line item budget for the activities to be supported under this funding opportunity.

## **Eligibility Requirements**

Eligible applicants are existing health center program grantees.

## **Funding Amount**

Eligible health centers may request up to \$35,000 (Note: This amount of funding may be increased up to \$50,000 depending on the number of successful applicants). The total funds available for this one-time supplemental funding opportunity is approximately \$28 million. Allowable costs include

personnel costs, technical assistance, and activities directly related to the developmental work required to become a PCMH. Health centers will be expected to support within available resources any ongoing costs created through this funding opportunity (i.e., grantees will not receive additional funding in the future to cover ongoing costs).

### **Funding Timeline**

Submission of the request for supplemental funding will be completed electronically through the HRSA Electronic Handbooks (EHB). Current health center program grantees must submit the information identified above by **August 22, 2011 at 8:00 p.m. ET**. The anticipated date of award is September 15, 2011. Late or incomplete application will not be funded.

### **Post Award Reporting Requirements**

Health centers will submit a progress report at 6 months and a final report at 12 months describing progress made toward their goals, lessons learned, and/or any barriers or challenges they experienced while implementing activities funded under this opportunity.

### **Interested Grantees**

There will be a technical assistance call on July 21, 2011 for all grantees interested in applying for this announcement.

### **Resources**

Health centers are encouraged to utilize one of the below PCMH self assessment tools to identify areas of improvement. Grantees who have already received PCMH recognition may utilize their pre-survey or initial survey results to identify areas they will improve or enhance.

- The HRSA Patient-Centered Medical/Health Homes Initiative website contains information about gaining NCQA recognition through this HRSA-supported program: <http://bphc.hrsa.gov/policiesregulations/policies/pal201101.html>
- Free Readiness Assessment Tools
  - Primary Care Development Corporation assessment tool: [http://www.pcdcny.org/data/org/128/media/doc/9994\\_standard\\_version\\_pcmh\\_base\\_line\\_self\\_assessment\\_tool\\_-\\_updated.xls](http://www.pcdcny.org/data/org/128/media/doc/9994_standard_version_pcmh_base_line_self_assessment_tool_-_updated.xls)
  - PCMH-A from the Safety Net Medical Home Initiative: [http://www.ghmedicalhome.org/safety-net/upload/PCMH-A\\_public.pdf](http://www.ghmedicalhome.org/safety-net/upload/PCMH-A_public.pdf)
  - MHIQ from TransforMED: <http://www.transformed.com/userLogin.cfm>

### **Contacts**

Please contact the BPHC Helpline for technical assistance on submitting an application in the HRSA EHBs. The BPHC Helpline can be reached at [BPHCHelpline@hrsa.gov](mailto:BPHCHelpline@hrsa.gov) or 1-877-974-2742.

For programmatic questions concerning the PCMH supplemental funding, please contact Nina Brown in the Bureau of Primary Health Care's (BPHC) Office of Quality and Data at [OQDComments@hrsa.gov](mailto:OQDComments@hrsa.gov).