MISSISSIPPI PRIMARY HEALTH CARE ASSOCIATION

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MPHCA E-UPDATE

March 26, 2012

March is Colon Cancer Awareness Month

ADVOCACY AND OUTREACH

Invite Members of Congress to Visit Your Health Center This Year!

The Campaign For America's Health Centers has a convenient webpage listing the House and Senate's 2012 calendars, including which days Congress will be in D.C. and when they will be back home. Please inform NACHC when you schedule a meeting with your Member of Congress and they will send you talking points to use. Email meeting details to grassroots@nachc.org. Be sure to send MPHCA your meeting details as well so we can be of assistance.

For information about North Carolina-specific advocacy efforts, please contact Kim Hancock @ khancock@mphca.com.

NACHC's Campaign To Save America's Health Centers

The Campaign for America's Health Centers was created to preserve, strengthen and expand the national network of Health Centers to deliver long-term savings to the health care system and ultimately a healthier country.

To be a part of the movement and learn more, click here.

NACHC: The Power of Petitions: Still One of the Best Ways to Make Thousands of Voices Heard

"These days it seems like there's no end to the number of electronic options to 'get involved' or to take action on something you care about. That's all nice and good, but sometimes the 'old school' methods of advocacy are still the best tools to make an impact."
Learn more about the impact of collecting petition signatures here.
View a video statement from Dan Hawkins.

NACHC has set a preliminary goal of collecting 2 million signatures and advocate letters in time for National Health Center Week in August. If you have questions or need assistance with your petition drive, please contact Kim Hancock @ khancock@mphca.com

MPHCA NEWS

As Health Law Is Contested, Developing a Plan B

State officials and insurance executives are devising possible alternatives to the coming federal requirement that most Americans buy health insurance, even as the Supreme Court hears arguments about the constitutionality of the mandate. The options being discussed include imposing state requirements that people get insurance, penalties for people who delay and automatic coverage enrollment. While it is unclear which way the court will rule, state officials and insurance executives say they have no choice but to prepare their options before the proposed mandate goes into effect in 2014. Read More

The Health Reform Law's Medicaid Expansion: A Guide to the Supreme Court Arguments

One significant element of the pending U.S. Supreme Court case challenging the Affordable Care Act is the constitutionality of the law's Medicaid expansion. This provision of the law requires states that choose to participate in the Medicaid program to cover nearly all adults under age 65 with household incomes at or below 133% of the federal poverty level as of January 2014. A ruling on the Medicaid expansion could have far-reaching impacts on the present and future contours of the Medicaid program, the people it is scheduled to serve, and Congress's power to attach conditions to the federal funds it provides to states. This policy brief examines the Medicaid expansion, the legal and policy arguments related to it in the pending Supreme Court case, and the potential ramifications of the Court's decision. Read More

MEMBER & STATE UPDATE

NATIONAL UPDATE

Congress Raises Health Center Questions during Hill Hearings

NACHC reports on its **Health Centers on the Hill blog** that Secretary Sebelius appeared before Congressional subcommittees this month to answer questions about the President's proposed FY2013 budget for the Department of Health & Human Services (HHS). Community Health Centers were mentioned in the Secretary's opening remarks when she noted planned new access points and the number of patients served as well as the $300 million dollar increase included for the Health Center program in the President's budget request. Community Health Centers received several other mentions during the hearings:

- Congressman Norm Dicks (D-WA), the Ranking Member of the Full Appropriations Committee, urged the Secretary to continue health center expansion and highlighted the critical role of health centers in providing access in 2014 when health reform's coverage expansions come online.
- Congresswoman Kay Granger (R-TX) seconded Rep. Dicks' positive comments on health centers and also highlighted health centers as a key to access.
- Congresswoman Rosa DeLauro (D-CT), the Ranking Member of the House Labor-HHS Appropriations Subcommittee, noted the important role of health centers in her opening statement.
- Secretary Sebelius highlighted the high level of bipartisan support for the Health Center program and deemed the program enormously important in providing high quality primary and preventative care in a cost effective manner.

Support for and concerns about the Health Center program were also raised during the Senate Appropriations Subcommittee on Labor HHS the following day.

POLICY & REGULATION

It's Appropriations Season on the Hill!

See the Advocacy section included above for how to contact your representative about funding for the Health Centers Program!

Medicaid waivers pave way for reform

Millions and millions of dollars in Affordable Care Act grants aren't the only way the Obama administration is helping states prepare for health care reform.

Some states are also bringing in billions through Medicaid waivers. Medicaid waivers aren't new. Nor were they created by President Barack Obama's health law. But the waivers, which allow states some flexibility in how they deliver health care to the poor, can help the states prepare for the roughly 16 million people who will be newly eligible for Medicaid in 2014 under ACA. And the health care law did give states the opportunity to expand their Medicaid rolls early. Read More

HRSA/ECRI Offer FTCA Deeming Application Help

The Health Resources & Services Administration (HRSA) and ECRI Institute have released a series of 10 videos that will provide technical assistance for completing the deeming application for Federal Tort Claims Act (FTCA) coverage, along with guidance for developing policies and procedures in preparation for completing the application. The video series include a brief introductory video; one instructional video on how to navigate the electronic handbook (EHB) and access the application; and two videos focusing on each section of the application: Risk Management Systems and Quality Improvement/Quality Assurance Plans, Credentialing Systems, and Professional Liability History/Additional Information. The videos are available on both the **HRSA website** and **ECRI website** which requires log-in and password. If you don't have membership to the website you can **contact** the ECRI Clinical Risk Management Program.

HRSA Begins 340B Audits and Recertifications

HRSA has begun two initiatives to strengthen its oversight of the 340B Program: selective, targeted audits of 340B covered entities, and recertification of all covered entities. Both are in response to recommendations made by the Government Accountability Office (GAO) in a **report on the 340B Program** required under the Affordable Care Act. The audits will focus on:

- Diversion: reselling or dispensing 340B drugs to persons who are not health center "patients" under current guidelines
- Duplicate Discounts: instances in which a drug manufacturer has been requested to pay a rebate to a state Medicaid agency on a drug acquired at 340B pricing

Officials familiar with the audit process indicate that the auditors focus extensively on the covered entity's written policies and related procedures for verifying patient eligibility and otherwise preventing division and duplicate discounts. In addition to the audits, the HRSA Office of Pharmacy Affairs (OPA) will recertify all 340B covered entities annually to verify that a covered entity continues to meet the eligibility requirements for participating in the 340B Program. The recertification process also will involve updating the health center's 340B profile--delivery sites, contract pharmacies, whether it dispenses 340B drugs to Medicaid patients, etc. Important Note: OPA communications regarding recertification will be sent, via e-mail, to the 340B "contact" that a health center has identified to OPA. Accordingly, health centers should make sure that their OPA contact information is correct and begin checking the information on their 340B profile for accuracy. OPA expects to begin FQHC recertification sometime during the summer months, with 60 to 90 day advance notice to FQHCs.

Additional information can be found in the **HRSA Stakeholders Program Integrity Letter** posted on the **OPA website.** Please notify PACHC if your health center is selected for audit.

HHS Releases Final Health Benefits Exchange Regulations

Starting in 2014, individuals and small businesses will be able to purchase insurance through online health benefits exchanges (HBEs). The final Exchange rules released on Monday include "specifics about state functions and responsibilities." Of note to community health centers, the final rule does not require qualified health plans (QHPs) sold through the Exchange to contract with all essential community providers. Additionally, the final rule gives QHPs the option to either pay FQHCs the relevant Medicaid PPS rate or pay a "mutually agreed upon rate to the FQHC, provided that such rate is at least equal to the QHP issuer's generally applicable payment rate." Both NACHC and NCCHCA will be issuing additional information in the near future.
Read summaries about the HBE regulations here.

Final Exchange Rule and Implications for Dental Coverage

The Children's Dental Health Project writes: "…the final HHS rule clarifies that families will have the same level of consumer protections, affordability standards, and access to pediatric dental coverage whether they purchase that coverage from a stand-alone dental plan or a qualified health plan." Read more

HHS Releases Final Rule on Establishment of Exchanges

On March 12, 2012, HHS released its' final rule on the Establishment of Exchanges and Qualified Health Plans (QHP). We are extremely concerned that the FQHC payment provisions, as interpreted by CCIIO, do not reflect the clear intent of the Menendez Amendment which was that FQHCs be reimbursed by QHPs as they are under Medicaid PPS law. In fact, upon initial analysis, we feel this rule undermines the spirit and letter of the law and we will be working with leaders in Congress to explore solutions that will ensure health centers are able to get paid adequately for providing their full range of comprehensive services to increasing numbers of privately insured patients.

We're still working through the rule and will have a more comprehensive analysis soon—both in regard to the Menendez Amendment and other provisions in the rule—but wanted to share this initial information with you. In the meantime, you can read more in the CMS release and fact sheet. You can also check out NACHC's comments on the proposed rule and our previous blog posts.

Medicare and Medicaid Programs; Electronic Health Record Incentive Program – Stage 2.

"This proposed rule would specify the Stage 2 criteria that eligible professionals (EPs), eligible hospitals, and critical access hospitals (CAHs) must meet in order to qualify for Medicare and/or Medicaid electronic health record (EHR) incentive payments."

Read the proposed rule here..

HEALTHCARE HEADLINES

Surgeon General releases new report on youth smoking

The fight against youth tobacco use was accelerated today by Surgeon General Dr. Regina Benjamin, with the release of the Surgeon General's Report, Preventing Tobacco Use Among Youth and Young Adults. This report details the scope, health consequences and influences that lead to youth tobacco use and proven strategies that prevent its use. Read More

Press Release: NEW REPORT: Millions of Americans Face Unmet Primary Health Care Needs

Findings indicate that growing numbers of Americans are not able to get their basic health care needs met. Read More

Press Release: Capitol Hill briefing on unmet primary health care needs of millions of Americans

NACHC will release a new report about the unmet primary health care needs of millions of Americans at a Capitol Hill briefing on Tuesday, March 20, 2012, at 10:30 a.m. Read More

Don't blame food deserts for obesity

A new paper is challenging the notion that "food deserts" - rural and urban areas where nutritious food is difficult to obtain - are to blame for the rise in obesity. Many have argued that those who live in unhealthy food environments - heavy on fast food, light on grocery stores - are more likely to consume less nutritious options. But Roland Sturm, an economist at RAND Corporation, analyzed the food environments of 13,000 adolescents in California, looking at how many fast-food restaurants and supermarkets were within a 1.5-mile radius of their homes and schools. He then looked at how much fast food, fresh fruits and other foods the kids consumed. And his study found no correlation between what food sources kids lived near, what the kids ate and how much they weighed. Read More

1 in 5 US families say they struggle to pay medical bills; half say they can't pay a cent

A survey shows 1 in 5 Americans say their families are having trouble paying their medical bills. Worse, half of those who are struggling say they are unable to pay a single dime toward those debts. The survey of 52,000 people was conducted by the Centers for Disease Control and Prevention from January through June of last year. It's the first time the government agency has looked at the issue in such a comprehensive way. Read More

Backup Plans if Individual Mandate is Struck Down

"If the U.S. Supreme Court strikes down health reform's individual mandate and leaves the rest of the law in place — what happens next?"

Read more

New Insurer-Hospital ACO Touts Early Success

"Illinois' largest hospital system and biggest health insurer agreed in late 2010 to form an accountable care organization, a network in which the organizations would cooperate to boost quality and restrain cost increases, sharing in any savings. Chicago-based Advocate Health Care gambled that its portion would compensate for the lost revenue from the resulting empty beds."
Read more

Health IT Chief Disputes Study on EHR Testing, Costs
"A study published in the journal Health Affairs this week found that doctors who use electronic health records may order more diagnostic testing, and therefore drive up the cost of health care, despite claims to the contrary by the federal government and health IT industry. Now, Dr. Farzad Mostashari, national coordinator for health information technology, is pushing back."
Read more

Cost Estimate for Insurance Aid Jumps $111B; Administration Cites Technical Budget Issues
"Cost estimates for a key portion of President Barack Obama's health care overhaul law have ballooned by $111 billion from last year's budget, and a senior Republican lawmaker on Friday demanded an explanation."
Read more

Health Centers at School Get a Funding Boost
"Under the federal health care law, money is going out around the country to help school campuses boost health services for their students." National Public Radio recently aired a piece highlighting a school-based health center in California.
Read more or listen to the story here.

Free Health Clinics At A Crossroads
Free health clinics have long been places people turn to when they don't have health insurance or money to pay for care. But the health law's expansion of coverage puts free clinics in uncharted territory. While the law goes before the Supreme Court this week, health providers are already gearing up for a surge in patients with insurance in 2014. Read More

WORKFORCE DEVELOPMENT

The **National Health Service Corps Scholarship Program application cycle is now open!**
Please help us spread the word that the National Health Service Corps (NHSC) Scholarship Program 2012 application cycle is now open. Full-time students pursuing a career in primary care are eligible to apply.

Key Points to Convey to Prospective Applicants:

- The NHSC Scholarship Program removes the burden of overwhelming educational debt, allowing them to pursue their passion for primary care and serving the underserved.
- For each year of financial support (up to four years) a Scholarship recipient serves one year (minimum two years) in an NHSC-approved site in high-need urban, rural, and frontier communities across the nation.
- Scholarship support includes tax-free payment of tuition, required fees, other reasonable educational costs, and a monthly living stipend (taxable).
- All students applying to the program must be a U.S. citizen or national and enrolled or accepted in an eligible degree program at a U.S. accredited school in Medicine: MD or DO;

Dentistry: DMD or DDS; Nurse Practitioner (Adult, Family, Geriatrics, Pediatrics, Psychiatric, or Women's health); Certified Nurse Midwife; and Physician Assistant.

Applications are due May 8, 2012.

As in previous years, the National Health Service Corps Scholarship Program is expected to be competitive. If there are more qualified applicants than available funding, the NHSC will continue to prioritize applicants who are from a disadvantaged background and applicants who demonstrate a commitment to continuing to serve communities of need after their service to the NHSC is complete.

Please forward this announcement or direct prospective Scholars to the NHSC Website (http://nhsc.hrsa.gov/index.html) for more information and to begin the application process.

The Doctor Is Out: Young Talent Is Turning Away From Primary Care

Health care reform is a locomotive barreling down America's tracks. In two years, the Affordable Care Act (ACA) will cover some 30 out of 50 million of us that currently lack health insurance, provided neither the Supreme Court nor a new president overturns the law. Political beliefs aside, it would seem that supplying insurance to protect the health of more people is a societal good. Though the costs of reform will be debated for years to come, one major question remains that has not been adequately addressed: Who will see all the new patients? Read More

Obama Hospital Cuts Seen Worsening Primary Care Shortage

A plan to reduce federal funding for teaching hospitals in President Barack Obama's fiscal 2013 budget proposal will curb training for primary care doctors, undermining a top priority of the 2010 health-care law he fought to enact, a Bloomberg Government study shows. The law would expand medical coverage to as many as 32 million uninsured people, flooding the system with new patients and driving up demand for family physicians. To narrow the deficit, the president plans to save $9.7 billion over nine years by reducing what Medicare (USBOMDCR) pays to train new doctors. Read More

New NACHC Report Points to Primary Care Potential, Challenge

To kick off the 2012 Policy and Issues Forum, NACHC will release a new report at a Capitol Hill briefing on Tuesday, March 20, 2012. The report, **"Health Wanted: The State of Unmet Need for Primary Health Care in America,"** documents the widening gap between the supply of available and affordable primary care providers and the growing need for health center services. The report is embargoed for release to the media until March 20th. Questions about the report may be directed to **Michelle Proser** or **DaShawn Groves.**

Robert Wood Johnson Foundation (RWFJ) Announces Evaluative Work-Force Practice Assessment Project Opportunity

Participate in an "exciting project led by the Robert Wood Johnson Foundation to identify promising and innovative workforce practices that increase access to and availability of preventive oral health services. Among the nominees, up to 25 practices will be selected for an evaluability assessment, with the ultimate aim of identifying, evaluating, and disseminating promising workforce practices in preventive oral health services. Please consider nominating your own work or that of others.

Nominations are being accepted in 4 focus areas.

Read more and/or complete the Oral Health nomination form here.

CLINICAL UPDATE

“20 Tips” Brochure Can Help Patients Receive Safer Health Care

Patients can order a free copy of AHRQ’s “20 Tips to Help Prevent Medical Errors” brochure, which is available in English and Spanish. The best way patients can help prevent errors is to play an active role in health care decisionmaking with their doctor. Research shows that patients who are more involved with their health care tend to get better results. This informative guide provides patients with safety tips about the medicines they take, the care they receive in the hospital, and what to do when planning for surgery. The guide is available at http://www.ahrq.gov/consumer/20tips.htm.

HHS Final Exchange Rule has Implications for Dental Coverage

In response to comments from advocates related to parity in pediatric dental benefits, the HHS **final rule** on the Establishment of Exchanges and Qualified Health Plans clarifies that families will have the same level of consumer protection, affordability standards, and access to pediatric dental coverage whether they purchase that coverage from a stand-alone dental plan or a qualified health plan. This directive to the states issues a clear message on the importance of ensuring access and affordability for families purchasing pediatric dental coverage under the Affordable Care Act. **The Children's Dental Health Project** will be following this in the upcoming weeks and will provide more information and analysis on the Exchange rule and its impact on the implementation of the pediatric dental benefit.

AHRQ Rolls Out New Spanish Language Facebook Page

The Agency for Health Research & Quality (AHRQ) is expanding its reach to Spanish speaking populations by creating a **Spanish-Language Facebook page** as its cornerstone to highlight Effective Health Care Programs. The page will feature health information videos and links to publications that explore treatment options for conditions ranging from cancer to diabetes to depression and was launched as part of their Toma Las reindas (Take the reins) campaign. The Facebook page will remain in place for Spanish-speaking visitors to learn about AHRQ's efforts to help them to "take the reins" of their health.

New Report Offers Data on Children Living in Poverty

A recent **report,** one of a series of reports highlighting specific indicators of child well-being contained in the KIDS COUNT Data Center, a project of the Annie E. Casey Foundation, focuses on children under age 18 living in areas of concentrated poverty in the U.S. and the critical resources necessary for their healthy growth and development. The report discusses how living in areas of concentrated poverty is harmful for children and offers recent data that show that even after declining between 1990 and 2000, both the percentage and the number of children living in areas of poverty has increased over the past decade. The report also examines variations in the data by location and concludes with descriptions of promising practices that can improve the chances of success for families living in these areas.

Surgeon General Releases New Report on Youth Smoking

“The fight against youth tobacco use was accelerated today by Surgeon General Dr. Regina Benjamin, with the release of the Surgeon General’s Report, *Preventing Tobacco Use Among Youth and Young Adults.* This report details the scope, health consequences and influences that lead to youth tobacco use and proven strategies that prevent its use.”
Read more here.

FTCA Deeming Application Assistance Video Series Announced

"The Health Resources and Services Administration (HRSA) and ECRI Institute have released a

series of 10 videos that provide technical assistance for completing deeming applications for Federal Tort Claims Act (FTCA) medical malpractice coverage as well as guidance for developing policies and procedures in preparation for completing the application. All resources on the Clinical Risk Management Program website are provided FREE by ECRI Institute on behalf of HRSA." Access the video series here.
Reminder: Applications are due by April 5, 2012

AHRQ Releases First Systematic Review on PCMH Evaluations

The Agency for Healthcare Research and Quality (AHRQ) announces the release of *Early Evidence on the Patient-Centered Medical Home*, a white paper prepared in collaboration Mathematica Policy Research that summarizes findings from early evaluations of the patient-centered medical home (PCMH). The American Journal of Managed Care recently published a concise version of the paper.

AHRQ also provides resources to help strengthen future research on the PCMH and build a solid evidence base, including a brief for decision makers, *Improving Evaluations of the Medical Home*, and *Building the Evidence Base for the Medical Home: What Sample and Sample Size Do Studies Need?* Additional white papers, briefs, and a searchable index of almost 1,000 citations are also available at www.pcmh.ahrq.gov.

CMS Announces Emergency Psychiatric Demonstration

The Centers for Medicare & Medicaid Services (CMS) this week **announced** that 11 states and the District of Columbia will participate in the Medicaid Emergency Psychiatric Demonstration, established under the Affordable Care Act to test whether Medicaid beneficiaries who are experiencing a psychiatric emergency get more immediate, appropriate care when institutions for mental diseases (IMDs) receive Medicaid reimbursement. The CMS Innovation Center will provide up to $75 million in federal Medicaid matching funds over three years to the states to enable private psychiatric hospitals, also known as "institutions for mental disease" (IMDs), to receive Medicaid reimbursement for emergency care provided to Medicaid enrollees aged 21 to 64 who have an acute need for treatment. Historically, IMDs are not reimbursed under Medicaid for these services without an admission to an acute care hospital first. Pennsylvania is not among the participating sites.

HEALTH INFORMATION TECHNOLOGY

Press Release: National Community Health Center Partnership Forms to Improve Health IT Services

NACHC, in partnership with three Health Center Controlled Networks, to launch THQLink to help safety-net providers improve quality cost and outcome data through efficient use of HIT. Read More

Just Enough Technology Should Be Your Goal

As health leaders, you understand that if you don't understand the technology, you must make sure you hire and trust someone who does. Read More

Inaugural "Health System Scorecard" Shows Gaps Across U.S.

The first-ever national assessment of local health systems reveals that healthcare access, cost, quality, and outcomes can vary greatly from one community to the next, both within and across states. The report, **Rising to the Challenge: Results from a Scorecard on Local Health System Performance, 2012**, was released this week by The Commonwealth Fund Commission

on a High Performance Health System. It measures how 306 local U.S. areas are doing on key health care indicators such as insurance coverage, preventive care, mortality rates, potentially avoidable hospital use, and costs. An interactive map accompanying the report allows comparison of cities and communities across the U.S.

HHS Settles HIPAA Case for $1.5 Million

In the first enforcement action stemming from the HITECH Act breach notification rule, Blue Cross and Blue Shield of Tennessee has agreed to pay federal regulators $1.5 million and enter into a corrective action plan after 57 hard drives were stolen from the insurer. The insurer told government authorities that the computer drives contained unencrypted private health information for more than 1 million people, including names, Social Security numbers, dates of birth, diagnosis codes and health plan ID numbers, according to an **announcement** on the settlement by the HHS Office for Civil Rights.

Walgreens to Transmit Immunization and Clinic Records to PCPs

Drug store chain Walgreens will roll out a **new service** starting this month to electronically deliver their patient immunization records to primary care physicians from its 7,800 Walgreens and Duane Reade pharmacies and 350 Take Care Clinics. They will use SureScripts and patients will need to opt-in in order for Walgreens to transmit the information.

FUNDING OPPORTUNITIES

GlaxoSmithKline Community-Based Nonprofit IMPACT Grants

Application Deadline: March 28, 2012 by 4:00 p.m.

$40,000 awards for up to 10 community-based nonprofits that provide access to healthcare for the underserved in eligible counties: Berks, Bucks, Chester, Delaware, Lancaster, Lehigh, Montgomery, Northampton and Philadelphia. Awards are given to organizations for success and achievements in their current, overall work, not just new or specific initiatives. To be eligible, in addition to being physically located in one of the aforementioned counties, organizations must:

- Provide access to healthcare services (primary mission and resource allocation);
- Have annual total operating expenses between $160,000 and $3 million, as documented in the organization's most recent fiscal year financial statement; and
- Have been in existence as a 501(c)(3) nonprofit organization for at least five years as of 2012.

The GlaxoSmithKline IMPACT Awards will be presented at a ceremony in Philadelphia in late 2012. For more details and to apply, please visit the GlaxoSmithKline site or call GlaxoSmithKline Community Partnerships at (215) 751-5171. Read More

HRSA Telehealth Network Grants

Application Deadline: April 13, 2012

Grant funding to establish telehealth networks to improve healthcare services for medically underserved populations in urban, rural, and frontier communities. TNGP networks are used to: (a) expand access to, coordinate, and improve the quality of health care services; (b) improve and expand the training of health care providers; and/or (c) expand and improve the quality of health information available to health care providers, and patients and their families, for decision-making. The current funding opportunity, because of legislative restrictions, is limited to programs that serve rural communities, although grantees may be located in urban or rural areas. Read More

U.S. Department of Housing and Urban Development Choice Neighborhood Planning Grants

Application Deadline: May 1, 2012

Funding to support communities in creating comprehensive transformation plans to transform public and/or assisted housing within distressed neighborhoods. This funding opportunity is a wonderful way for health centers and housing authorities to form partnerships for the betterment of the entire community, as a sustainable health center can ensure access to affordable health care for all residents of the Choice Neighborhood. HUD anticipates awarding approximately 17-20 grants with a maximum award of $300,000 each. Read More

Robert Wood Johnson Foundation Changes in Health Care Financing and Organization

Application Deadline: Open

Changes in Health Care Financing and Organization (HCFO) supports research, policy analysis and evaluation projects that provide policy leaders timely information on health care policy, financing and organization issues. Supported projects include: examining significant issues and interventions related to health care financing and organization and their effects on health care costs, quality and access; and exploring or testing major new ways to finance and organize health care that have the potential to improve access to more affordable and higher quality health services. Read More

Open Meadows Foundation

Application Deadline: August 15, 2012

Grants for projects that are led by and benefit women and girls, particularly those from vulnerable communities. Read More

Robert Wood Johnson Foundation Unsolicited Proposals

Application Deadline: Applications accepted on an ongoing basis

Grants to address health care workforce, innovative health care solutions, and health care to vulnerable populations. Read More

Academy of General Dentistry Foundation Grant Program

Application Deadline: October 31, 2012

Grants to support general dentists and dental personnel in their efforts to improve oral health and oral health literacy, especially among the most underserved and vulnerable populations, through access to care projects. The AGD Foundation passionately supports general dentists and dental personnel in their efforts to improve oral health and oral health literacy. Read More

National Assembly on School-Based Health Care (NASBHC) Announces Grant to Provide Preventive Oral Health Services in School-Based Health Centers

Application Deadline: March 30, 2012

"NASBHC is pleased to announce a training and technical assistance initiative to expand the capacity of school-based health centers to deliver preventive oral health services. Successful applicants will participate in a national training at the 2012 National School-Based Health Care Convention in Albuquerque, as well as receive ongoing support during the fourteen-month initiative. With generous support from Kaiser Permanente, a small grant award to successful applicants will help cover the cost of training and supplies."

Read more and/or download the call for proposals here.

Robert Wood Johnson Foundation Call for Proposals: Roadmaps to Health: Community Grants

Proposal Deadline: May 2, 2012 3:00 PM EDT

"The Roadmaps to Health Community Grants program (Community Grants) will support

communities to implement policy or system changes to address one of the social or economic factors that, as defined by the County Health Rankings, most strongly influence health outcomes in their community. These include: education; employment and income; family and social support; and community safety. Grantees will be organizations that participate in established coalitions or networks that span multiple sectors and perspectives and may include representatives from business; education; public health; health care; community organizations; community members; policy advocates; foundations; and policy-makers. Applicants must engage community members in the planning and implementation of projects, and must collaborate with organizations having expertise in improving the health of the public."

Key Dates and Deadlines

March 20 and April 10, 2012 (12:00–1:30 p.m. ET)—A series of two applicant web conference calls. Registration is required.

May 2, 2012 - Deadline for receipt of brief proposals.

July 25, 2012 - Deadline for receipt of full proposals.

Read full announcement here.

HRSA: Telehealth Network Grant Program Grant, HRSA-12-092
Deadline: April 13, 2012

"This announcement solicits applications for the Telehealth Network Grant Program (TNGP). The primary objective of the TNGP is to demonstrate how telehealth programs and networks can improve access to quality health care services in rural and underserved communities. Grants made under this authority will demonstrate how telehealth networks improve healthcare services for medically underserved populations in urban, rural, and frontier communities. TNGP networks are used to: (a) expand access to, coordinate, and improve the quality of health care services; (b) improve and expand the training of health care providers; and/or (c) expand and improve the quality of health information available to health care providers, and patients and their families, for decision-making. No letter of intents required."

Read full announcement here.

HRSA: Telehealth Resource Center Grant Program Grant, HRSA-12-097
Deadline: April 20, 2012

This announcement solicits applications for the Telehealth Resource Center Grant Program (TRCGP). The purpose of the TRCGP is to support the establishment and development of Telehealth Resource Centers (TRCs). The TRCGP expects to create centers of excellence that expedite and customize the provision of telehealth technical assistance across the country, while at the same time working together to make available a wide range of expertise that might not be available in any one region. The TRCs provide technical assistance to health care organizations, health care networks, and health care providers in the implementation of cost-effective telehealth programs to serve rural and medically underserved areas and populations. The program seeks entities with proven successful records in providing technical assistance in the development of sustainable telehealth programs.

Read full announcement here.

HRSA: Building A Medical Home For Multiply Diagnosed HIV Positive Homeless Populations – Demonstration Sites, HRSA-12-100
Deadline: May 07, 2012

"This funding opportunity announcement solicits applications for a new Special Project of National Significance (SPNS) multi-site initiative entitled Building a Medical Home for Multiply Diagnosed HIV positive Homeless Populations - Demonstration Sites. This initiative will award funds for up to five years to support organizations that will design, implement and evaluate innovative interventions to improve timely entry, engagement and retention in HIV care and supportive services for HIV positive homeless populations. The interventions are expected to implement models of care that build and maintain sustainable linkages to mental health, substance abuse treatment and HIV/AIDS primary care services to HIV positive individuals who are homeless or

unstably housed. Funding for an evaluation and technical assistance center to coordinate the initiative will be made available under a separate announcement. (HRSA-12-104)."
Read full announcement here.

RESEARCH ROUNDUP & RESOURCES

Diagnoses of HIV Infection and AIDS in the United States and Dependent Areas, 2010

This report presents data for diagnoses of HIV infection and AIDS through December 31, 2010 and reported to CDC through June 2011.

CDC's 2010 HIV Surveillance Report is used by epidemiologists, researchers, and public health practitioners across a wide variety of institutions to help guide program planning, evaluation, and resource allocation. The surveillance report contains data collected throughout the United States and six U.S. dependent areas by HIV surveillance programs in state and local health departments. It is one of the primary sources of information on HIV in the United States. Read More

"20 Tips" Brochure Can Help Patients Receive Safer Health Care

Patients can order a free copy of AHRQ's "20 Tips to Help Prevent Medical Errors" brochure, which is available in English and Spanish. The best way patients can help prevent errors is to play an active role in health care decisionmaking with their doctor. Research shows that patients who are more involved with their health care tend to get better results. This informative guide provides patients with safety tips about the medicines they take, the care they receive in the hospital, and what to do when planning for surgery. The guide is available at http://www.ahrq.gov/consumer/20tips.htm.

Preparing Primary Care for the Future—Perspectives from the Netherlands, England, and USA

"The Netherlands has focused on preventing chronic disease, while England has emphasized managing care for patients with multiple conditions, avoiding hospitalizations, and expanding access to primary care. Both nations have sought to organize care around the needs of patients. In comparison, the U.S. primary care system is weak; to meet the needs of its population, the U.S. will need to expand its primary care workforce and enhance resources devoted to primary care." Read more

People in Poor Neighborhoods Have More Pain, Study Finds

"Adults under the age of 50 who live in low-income neighborhoods experience more chronic pain than those in more affluent communities, new research finds. Blacks, however, experienced more chronic pain and disability than whites regardless of where they lived, according to the researchers from the University of Michigan." Read more

Report Highlights Wide Variance in Care Quality Across the Nation

"The first-ever report on the quality of care in 306 U.S. communities found a wide variance in the cost and quality of healthcare between and within states. If all local areas could do as well as the top performers, the Commonwealth Fund report argues, 30 million more Americans would have health insurance, 1.3 million more seniors would receive appropriate medications and Medicare would save billions of dollars on preventable hospitalizations and readmissions." Read more

New Report Identifies Barriers to HIV Care in U.S.

"…[T]he Office of National AIDS Policy (ONAP) commissioned the Institute of Medicine (IOM) to identify what indicators and data systems should be used to measure HIV care and access to support services like public housing. The IOM committee was also tasked to monitor how HIV care will be affected by the health reform law — which could newly insure a number of now-uninsured HIV patients." Read more

Role of Community Health Centers in Providing Services to Low-income Women

This week, the RCHN Community Health Foundation in collaboration with the Geiger Gibson Program in Community Health Policy published a policy research brief examining "the role CHCs play in mitigating disparities for one population subgroup, low-income women of childbearing age (defined as age 15-44), and the challenges that they will need to overcome to build upon their success in delivering care to vulnerable populations." Read the brief here.

BPHC Releases New Search Engine on Technical Assistance Website

"The Bureau of Primary Health Care (BPHC) is pleased to announce the release of a new search engine on the BPHC TA website. BPHC has enhanced its online resource library with database functions for easier, more accurate searches. The new database system will enable free searches, dropdown menus, key word/topic/phrase searches, and easier upload of new resources. In addition, this new website enhancement makes it easier to explore hundreds of valuable tools, topical guides, and resources that have been organized and linked to relevant federal sites, BPHC National Cooperative Agreement materials, and many other tools that health center grantees may find useful."
View this new feature at the BPHC technical assistance website here.

The Role of the Basic Health Program in the Coverage Continuum: Opportunities, Risks & Considerations for States – *Kaiser Family Foundation*

Building a Consumer-Oriented Health Insurance Exchange: Key Issues – *NASHP*

Opportunities and Challenges for Community Health Centers in Meeting Women's Health Care Needs – *Women's Health Issues*

Establishing On-Site Pharmacy Services in a Community Health Center: A Case Study – *NYS Health Foundation*

Toward a High Performance Health Care System for Vulnerable Populations: Funding for Safety-Net Hospitals – *The Commonwealth Fund*

Dental Visits To ERs Are On The Rise – *NPR*

Dental Crisis in America: The Need to Expand Access – *U.S. Senate HELP Committee, Subcommittee on Primary Health and Aging, Chairman Bernard Sanders*

Connecting Eligible Immigrant Families to Health Coverage and Care: Key Lessons from Outreach and Enrollment Workers – *Kaiser Family Foundation*

Managed Care Handbook: A Practical Guide for Health Centers – *NACHC*

UNC Researchers Make Key HIV Discovery

"Researchers at UNC-Chapel Hill have discovered what could be a vital step toward a cure for HIV. By giving patients a drug normally used for treating some kinds of lymphoma, scientists have managed to make dormant, hidden HIV viruses reveal their presence." Read More

Study Finds Consumers Choose High-Value Health Care Providers When Given

Good Cost and Quality Information

"When asked to choose a health care provider based only on cost, consumers choose the more expensive option, according to a new study funded by HHS' Agency for Healthcare Research and Quality (AHRQ) that appears in the March issue of *Health Affairs*. The study found that consumers equate cost with quality and worry that lower cost means lower quality care. But higher costs may indicate unnecessary services or inefficiencies, so cost information alone does not help consumers get the best value for their health care dollar, according to the study." Read More

Report: Americans Still Struggling with Medical Debt

"One in 5 Americans is in a family that's struggling with medical debt, says a new report, with 1 in 10 living in a family that can't pay the bills at all." Read more

More Young Adults Insured After Health Reform Law Passed

"A popular provision of the Affordable Care Act that allowed young adults to remain covered by a parent's health insurance policy until age 26 years appears to be having the intended effect of boosting the number of individuals in this age group who are insured, according to analysis by scientists from the US Department of Health and Human Services, published in *JAMA*..." Read More

Hospital Community Benefits after the ACA: Partnerships for Community Health Improvement

"This brief from The Hilltop Institute describes several different types of partnerships and highlights some hospitals that have collaborated with local community or health agencies to improve health in their communities." Read More

Black Americans Die Up to 8 Years Sooner in Some States, Life-Expectancy Study Shows

"In every state across the country, white men and women are outliving blacks, in some cases by a margin as wide as eight years, says a new life-expectancy study from the University of California, Los Angeles." Read more

TRAINING AND TECHNICAL ASSISTANCE

The following trainings and meetings are hosted by Mississippi Primary Health Care Association:

April 2-4, 2012 MPHCA Clinical Conference

Lake Terrace Convention Center, Hattiesburg, MS
Contact: Joyce Smith @ jsmith@mphca.com

For complete information on trainings listed above, please access our website with the following link: http://www.mphca.com/Training_and_Events.htm.

Other Important Trainings and Technical Assistance:

MOHCA Member Registration for Oral Health Summit

BPHC: Grantee TA Call for Completing the PCMH Supplemental Interim Reports
March 28, 2012

3:00 p.m. – 4:00 p.m. EST
"Join the BPHC for a technical assistance call on how to complete the PCMH Supplemental Interim Report. Grantees will learn what documentation they will need to submit to meet reporting requirements. In addition, the TA call will provide information on the type of information that is required to report on progress made towards completing their PCMH Projects. There will be a Q & A session with OQD staff as well as a representative from the Office of Administrative Management to answer any systems related questions. "
Call-in Number: 1-888-324-3178
Participant Code: 9657858

Region IV Training - The Practical Art of CHC Finance & Operations

This training is designed for health center management, clinicians, practice managers, and billing & coding staff.
April 23-24, 2012
Westin Atlanta Airport Hotel
Atlanta, GA
Scholarships available for NCCHCA Incubator Project Participants: If interested in applying for a scholarship, please contact Rosa Navarro.
Learn more and/or register here.

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Call-in Number: 1-888-324-3178
Participant Code: 9657858

Health Care for Residents of Public Housing National Training Conference May 1-3, 2012

Alexandria, Virginia
"The goal of the conference is to strengthen the capacity of health centers to meet the specialized primary care needs of residents of public housing"
Read more and/or register here.

National Health Care for the Homeless Conference & Policy Symposium

May 15-18, 2012
Kansas City, MO
The National Health Care for the Homeless Council is accepting proposals for workshop and pre-conference presentations for the 2012 National Health Care for the Homeless Conference & Policy Symposium.
Learn more here.

NACHC Training and Technical Assistance: Learn more here.

Healthy Roads Media has created English, Russian, Spanish and Vietnamese multiple use videos on "Asthma and Children - A Guide to Coping". These are free downloadable files that can be used on your closed circuit TV system, loaded onto laptops or tablets or used in your EHR system. See - http://www.store.healthyroadsmedia.org/allvideoslisting.htm#asthma

The **HHS Partnership Center** continues to host a series of interactive conference calls discussing the benefits and provisions of the health care law, the Affordable Care Act. All calls are open to the public and include a question and answer session where you can ask HHS staff any questions you may have about the health care law. For more information, click here.

Interactive Clinical Pharmacy Services Assessment Tool Available for Health Centers
A **Clinical Pharmacy Services Planning Tool for Safety-Net Providers** (CPPT) is available at the Pharmacy Services Support Center (PSSC). The PSSC has developed two interactive financial spreadsheets: The Interactive Contract Pharmacy Financial Spreadsheet and the Interactive In-House Pharmacy Financial Spreadsheet. The tools allow entities to enter data regarding their pharmacy payer types, prescription volume, capture rates, sliding fee scales and expenses to help the entities forecast the financial outcomes of an in-house or contract pharmacy program. The tools have been developed to account for a variety of factors and can predict a program's financial performance to the degree that accurate data is entered to reflect a particular health center and its pharmacy program.

PMG Offers New Revenue Cycle Resources for Health Centers
Priority Management Group Inc. (PMG) has launched a **new website** and resource for community health centers. The new site features free content and an interactive community for health centers to share ideas with each other and interact with revenue cycle management experts. The revenue cycle management information and tools are designed to help health centers manage and grow their organizations. PMG is a third-party medical billing company that offers its revenue cycle management and other services exclusively to Community Health Centers . Some of the site's features are exclusively for PMG clients, while others are accessible to all health centers.

Mississippi Primary Health Care Association distributes the MPHCA E-Update to inform members and partners of issues important to Community Health Centers.

The MPHCA e-Update is the official e-bulletin of the Mississippi Primary Health Care Association. It is e-mailed weekly as a membership service to Mississippi Community Health Center executive leadership, board members, health professionals, non-clinical staff, and other MPHCA members and partners.