While you’re waiting for us to start, check out the results of HRSA’s health center survey… (there is no audio for this slide) 54% of NC health centers responding

<table>
<thead>
<tr>
<th>Testing Capacity</th>
<th>NC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Centers with COVID-19 Testing Capacity</td>
<td>90.48%</td>
</tr>
<tr>
<td>Health Centers with COVID-19 Drive-Up/Walk Up Testing Capacity</td>
<td>68.42%</td>
</tr>
</tbody>
</table>

| Average Turnaround Time for COVID-19 Test Results                                |
|----------------------------------------------------------------------------------|----------|
| Less than 1 Hour                                                                | 5.26%    |
| 12 Hours or Less                                                                | 5.26%    |
| 24 Hours                                                                        | 52.63%   |
| 2-3 Days                                                                        | 26.32%   |
| 4 Days                                                                          | 10.53%   |
| More than 5 Days                                                                | 0%       |

<table>
<thead>
<tr>
<th>Operations</th>
<th>NC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Center Weekly Visits Compared to Pre-COVID 19 Weekly Visits</td>
<td>59.52%</td>
</tr>
<tr>
<td>Health Center Sites Temporarily Closed</td>
<td>12</td>
</tr>
<tr>
<td>Staff Tested Positive for COVID-19</td>
<td>4</td>
</tr>
<tr>
<td>Health Center Staff Unable to Work (due to site/service closure, exposure, family/home obligations, lack of PPE, etc.)</td>
<td>4.76%</td>
</tr>
<tr>
<td>Average Percent of Health Center Visits Conducted Virtually</td>
<td>47.86%</td>
</tr>
</tbody>
</table>

Latest Data from May 29
While you’re waiting for us to start, check out the results of HRSA's health center survey... (there is no audio for this slide)

54% of NC health centers responding

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Patients Tested</th>
<th>Tested Positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>White, Non-Hispanic/Latino</td>
<td>27.43%</td>
<td>5.80%</td>
</tr>
<tr>
<td>White, Hispanic/Latino</td>
<td>22.90%</td>
<td>33.11%</td>
</tr>
<tr>
<td>Black, Non-Hispanic/Latino</td>
<td>29.25%</td>
<td>31.06%</td>
</tr>
<tr>
<td>Black, Hispanic/Latino</td>
<td>0.99%</td>
<td>0.34%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.93%</td>
<td>0.34%</td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>0.50%</td>
<td>0.34%</td>
</tr>
<tr>
<td>Unreported/Refused to Report</td>
<td>6.29%</td>
<td>1.71%</td>
</tr>
</tbody>
</table>

Number of Patients Tested for COVID-19

<table>
<thead>
<tr>
<th></th>
<th>NC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients Tested</td>
<td>1,812</td>
</tr>
<tr>
<td>Patients Tested Positive</td>
<td>293</td>
</tr>
</tbody>
</table>

Latest Data from May 29

CHC COVID-19 Task Force

June 5, 2020
Agenda

• Welcome, Chris Shank, President & CEO, NCCHCA
• Welcome Interns
• Financial Sustainability, Allison Coleman, Capital Link
• Updates from Health Centers
• Reminders/Updates
• Closing

Slides & Other Info will be available on our website:
www.ncchca.org/covid-19/covid19-general-information/
Welcome from Chris Shank, President & CEO, NCCHCA
Welcome Interns!
Alexis Guillen
Rising junior, Guilford College
Biology and Computer Information System double major, with Pre-Med focus
Working with NCCHCA’s Health Center Controlled Network team (HIT, data, value-based care)

Brianna Hudson
Master’s in Public Health candidate, Brody School of Medicine, East Carolina University
Concentrating in Community Health & Health Behavior
Working with NCCHCA’s Carolina Medical Home Network team (IPA & Delta Center, clinical integration development, value-based care)
Frantasia Hill
Rising senior at Wake Forest University
Sociology major, concentration in social determinants of health and well-being
Working with NCCHCA's Health Access Team (O&E, Special Populations, CHW, farmworker, SDOH)

Nitin Ankisetty
Rising senior at University of Georgia
Biology and Finance double major
Working on data, communications, & workflow projects
NCCHCA FQHC COVID-19 Task Force Meeting

Covid-19 Funding, Resources, and Recovery

Allison Coleman
Chief Executive Officer
June 5, 2020
Truly Unique Circumstances

- Health centers are responding to dual scourges:
  - COVID-19
  - Institutionalized racism

- Both are potentially destabilizing, as they threaten our patients, staff, organizations and communities

- We need to protect and strengthen our foundation
  - Financially
  - Morally

- Health centers play a special role – a place for healing, empowerment, uplift and action
Today’s Agenda

- Current State of FQHC Operations
- Summary of Federal Funding
- Preparing for “What’s Next?”
- Sharing Experiences
- Q&A
Capital Link

- Launched in 1995, nonprofit, HRSA national cooperative agreement partner
- Offices in CA, CO, FL, MA, MO, and WV
- **Over $1.2 billion** in financing for over **236** capital projects
  (~ 10% of current health center facility space)
- We help health centers:
  - **Plan for Sustainability and Growth** - Market assessments; new service line feasibility; scenario modeling; business planning and forecasts; understand costs of existing and new services; plan for collaborations, mergers and acquisitions.
  - **Access Capital** - Tools, resources, training; direct one-on-one assistance to leverage capital from a variety of sources
  - **Improve and Optimize Operations and Financial Management** - Provide analytics, tools and training in using comparative data to improve performance
  - **Articulate Value** - Assess value and impact of health centers on communities, the health system and the economy
National - as of May 29 HRSA’s survey results indicate the following:

- 92% of health centers have Covid-19 testing capacity
- 79% of tests conducted in 2 to 3 days or less
- Over 838,000 tested
- Weekly visits are at 63% pre-Covid-19 levels
- 44% of health center visits conducted virtually
- 1,782 health center sites temporarily closed
- PPE levels have improved to 87% to 96% of health centers have select supplies
North Carolina - as of May 29 HRSA’s survey results indicate the following:

- 88% of health centers have Covid-19 testing capacity
- 81% of tests conducted 2 to 3 days or less
- 1,812 tested in past week
- Weekly visits are at 60% pre-Covid-19 levels
- 48% of health center visits conducted virtually
- 12 health center sites temporarily closed
- PPE levels have improved to 71% of health centers have select supplies
Current State of FQHC Operations

Capital Link’s Impact Analysis – initially based upon 50% visit loss for 3 months

- **National FQHC:** $3.2B in lost revenue; 85,000 jobs lost; 28% FQHCs will exhaust operating reserves; national economic impact of $6.5B with 171,000 lost jobs

- **North Carolina:** $35M in lost revenue; 974 jobs lost; 32% FQHCs will exhaust operating reserves; state economic impact of $72M with 1,936 jobs lost

North Carolina revised for visit loss of 47% for 6 months

- $67M in lost revenue; 933 jobs lost; 44% FQHCs will exhaust operating reserves; state economic impact of $138M in lost revenue with 1,854 jobs lost
Summary of Select Federal Funding

• **Stimulus #1 – Phase One - March 6th for Emergency Health Funding**
  - March 12th – SBA announces economic injury disaster assistance loans
  - March 24th - HRSA announces $100 million for FQHCs (330 funded centers only)

• **Stimulus #2 – Phase Two – March 18th - Families First CoronaVirus Response Act**

• **Stimulus #3 - Phase Three – March 27th - CARES Act**
  - April 3rd - Paycheck Protection Program (PPP) through SBA
  - April 8th - HRSA announces $1.3 billion for FQHCs (330 funded centers only)
  - Included extension of Section 330 mandatory funding for FY20 through November 2020
  - $100 billion Provider Relief Fund
    - $30 billion dispersed April 10-17 based upon previous Medicare billing
    - $20 billion dispersed April 24 based upon net patient revenue
    - $10 billion announced May 1 for rural health providers including FQHCs

• **Stimulus #3.5 – April 23rd House Approves $484 billion to aid small businesses, health, and testing**
  - $310 billion additional funding to PPP – of which $60 billion is for smaller lending institutions
  - $60 billion additional SBA economic injury disaster loan relief
  - $75 billion in additional funding to public health and social services
  - $25 billion to expand Covid-19 testing – $600 million to 330 funded and Look-Alike health centers

• **Stimulus #4?**
Other Non-Traditional Funding

- Federal Tax Credit for Emergency Paid and Family Leave
- Federal Tax Credits for Employee Retention
- Deferral of Employer Share of FICA
- Advanced Medicare Payment
- Expanded Unemployment Insurance for Fully & Partly Laid-off Staff
- FEMA Public Assistance Grants
- Telehealth Utilization and Reimbursement
- Telehealth Grant Program – Federal Communications Commission (FCC)
If futurism means “recognizing that life will change, must change, and has changed,” then we are all futurists now.

1. Managing through the crisis
2. Cash flow modeling/projections
3. Scenario planning
4. Telehealth/Patient engagement
5. Staff Engagement/Productivity
6. Emergency Planning/Business Continuity
7. Drive-through services
What We Are Hearing?

• Challenges in determining how to appropriately spend and track the funding that has been allocated to date

• Working on near term facility modifications to enhance safety

• Beginning to think about longer-term financial planning:
  - Cash flow projections
  - Scenario modeling
  - What will the “new normal” look like?

• Beginning to think about longer-term facility modifications
A Key Tool: Federal Funding Sources Spreadsheet

Here's the link: https://docs.google.com/spreadsheets/d/1DfMa-U42TMaByT5YPOo0DAVWgT6CyLAo67j4FWj9dho/edit?usp=sharing

Significant updates are highlighted in bright green for at least 14 days.

Join webinar:
June 12th; 2:00 – 3:00 pm
Office Hours: Understanding Your Federal Funding Streams and Appropriate Stewardship
Sharing Experiences

SHARE

LEARN
Funding Amounts and Recipients

- **FQHC $100 Million Supplemental Funding**

- **FQHC $1.3 Billion Supplemental Funding**

- **FQHC Covid Testing**

- **Provider Relief General Allocation**
  [https://data.cdc.gov/Administrative/HRSA-Provider-Relief-Fund-General-Allocation/kh8y-3es6](https://data.cdc.gov/Administrative/HRSA-Provider-Relief-Fund-General-Allocation/kh8y-3es6)

- **Provider Relief High Impact Areas**
  [https://data.cdc.gov/Administrative/Provider-Relief-Fund-COVID-19-High-Impact-Payments/b58h-s9zx](https://data.cdc.gov/Administrative/Provider-Relief-Fund-COVID-19-High-Impact-Payments/b58h-s9zx)

- **Provider Relief Rural Providers**
Funding Terms and Conditions

- FQHC $100 Million Supplemental Funding Overview
  https://bphc.hrsa.gov/program-opportunities/cares-supplemental-funding

- FQHC $1.3 Billion Supplemental Funding Overview
  https://bphc.hrsa.gov/program-opportunities/cares-supplemental-funding

- BPHC’s FAQ

- Provider Relief Fund Distributions
Resource Pages

• NCCHCA [https://www.ncchca.org/covid-19/](https://www.ncchca.org/covid-19/)
• HRSA BPHC [https://bphc.hrsa.gov/emergency-response](https://bphc.hrsa.gov/emergency-response)
• Capital Link [http://www.caplink.org/covid-19](http://www.caplink.org/covid-19)
Contact Us

Jonathan Chapman  
Chief Project Officer  
(970) 833-8513  
jchapman@caplink.org

Allison Coleman  
Chief Executive Officer  
617-331-4883  
acoledman@caplink.org

Visit us Online: www.caplink.org

• Learn more about our products and services  
• Download our free publications and resources  
• Register for upcoming webinars  
• Sign up for our e-newsletter, Capital Ink
Operations Update

Cell Phone Use Prohibited In Clinic Areas.
No Public Restrooms

SOCIAL DISTANCING
Phone Lines
Back 5 Line
Thank you.

STOP HERE

PARE

MedNorth
HEALTH CENTER
COVID-19 update MAY 2020

- COVID Testing for staff began May 26, 2020
- Continue:
  - with COVID area until July 1, 2020
  - daily temperature for all staff and anyone entering the building
- FD screening for COVID symptoms
  • Front desk training on Check-in Health Asyst-Go Live June 1, 2020
  Electronic registration
- Re-locating staff offices to social distance
- Plexi has been installed in all FD/MA/Pharmacy check in areas
- Pursuing divider wall in areas that are staffed with cubicles/ stations MA-FD
Summary: Overall decrease in visits YTD is 3.18% with decrease in medical visits by 8.41%. Mednorth volume increased in Jan, Feb until COVID (March) which caused us to trend downward
Reminders/Updates
CAC Designated Organization
Open Season

April Morgan,
NCCHCA Outreach & Enrollment Manager
Why Become a CAC Designated Organization (CDO)?

• Many health centers already have CDO status, but for those that do not...

• CDO status allows health center to train staff/volunteers as Certified Application Counselors (CACs).

• CACs provide enrollment assistance for insurance plans available on the [Marketplace](#).

• Marketplace Open Enrollment is November 1 – December 15, 2020.

• However, opportunities to provide enrollment assistance exist now.
Opportunities for Health Insurance Enrollment

North Carolina is expected to see changes in health insurance coverage, due to rising unemployment:

• Medicaid: increase of 273,000 – 568,000 individuals
• Marketplace: increase of up to 27,000 individuals
• Uninsured individuals: increase of 98,000 - 524,000

Data Source: Health Management Associates, 4/3/2020
Opportunities for Enrollment

• Since mid-March, 907,000+ people have applied for unemployment benefits in North Carolina.

• Loss of job-based health coverage: 370,000 – 1.1 million individuals (Data Source: Health Management Associates, 4/3/2020)
  • Loss of job-based health insurance affects not only the individuals who have lost their job, but also family members who may have been on a job-based health plan.

• CACs can help individuals who have lost job-based health coverage, or who have experienced certain other life events, enroll in health insurance.
How to Obtain CDO Status (if your health center doesn't already have it)

• CDO Open Season: Now – **August 31, 2020**
• To apply, visit [https://mats.secure.force.com/CDOApplication/](https://mats.secure.force.com/CDOApplication/)

• Questions? Contact April Morgan, [morgana@ncchca.org](mailto:morgana@ncchca.org)
Upcoming CHC COVID-19 Task Force Calls

June 19, 10:00-11:30 am
July 10, 10:00-11:30am
July 24, 10:00-11:30am
Stay connected!

www.ncchca.org/covid-19/
covid19@ncchca.org