

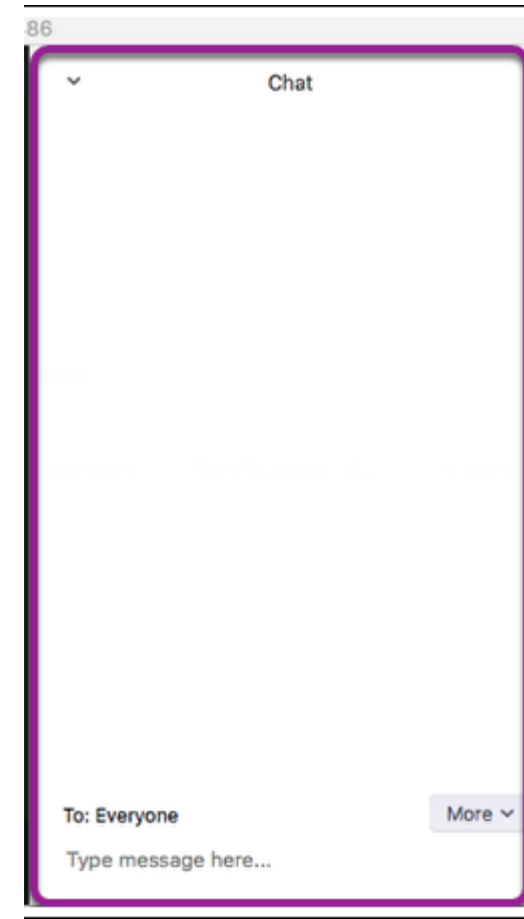
CHC Task Force Meeting

March 26, 2021

Zoom Help



Everyone will be muted. You can unmute yourself to ask questions by clicking on the microphone or phone button.



You can also send questions through Chat. Send questions to Everyone or a specific person.

Agenda

- **Welcome**, Chris Shank, President & CEO, NCCHCA
 - **NC Primary Care Conference**
 - **Health Center Feedback for HRSA**
 - **American Rescue Plan Act - Review of Funding Announcement and Guidelines**
- **Vaccine Data Collection Integration into CVMS**, Aaron Rakes, Meredith Dennen, Natalie Batten
- **Health Equity Payments**, Emma Sandoe, NC DHHS
- **Policy Updates**, Brendan Riley, NCCHCA
- **Wrap-Up**

Slides & Other Info will be available on our website:
www.ncchca.org/covid-19/covid19-general-information/



Welcome from Chris Shank,
President & CEO, NCCCHCA

2021 Virtual Primary Care Conference

- April 7-9, 2021
- With conference tracks dedicated to HCCN, Leadership, Clinical, and Finance
- You can buy a ticket for the whole conference, or just one day
- We have organizational pricing options as well to accommodate larger groups
- [Event and Registration Info here](#)



Health Center Feedback for HRSA

- How significant do you expect interest to be in Pfizer vaccine in your state/region if health centers could order it in smaller (yet to be determined) quantities?
- Aside from the large number of doses in a current tray of Pfizer, are there other barriers to health center use of Pfizer?



American Rescue Plan Act Funding for Health Centers (H8F) Activities and Allowable Uses of Funds

- CHCs will receive these funds starting in “April”.
- While Look-Alikes will receive similar levels of ARPA funding, their funding amounts are not included in this announcement. However, Jim Macrae stated on Tuesday that LALs will be the next priority for receiving ARPA funds.
- The total amount awarded to CHC grantees is just over \$6B. This leaves around \$1.6 billion of the \$7.6 in ARPA funds to be distributed to LALs, PCAs, HCCNs, NTTAPs, and for the “large construction” project competition.
- <https://bphc.hrsa.gov/sites/default/files/bphc/programopportunities/h8f/h8f-a-q-session-health-centers.pdf>
- <https://bphc.hrsa.gov/program-opportunities/american-rescue-plan/allowable-uses-funding>

Example Uses of Funds Categories



There may be other allowed uses of funds, consistent with terms of award



COVID-19
Vaccination
Capacity



COVID-19
Response
and
Treatment
Capacity



Maintaining
and
Increasing
Capacity



Recovery
and
Stabilization



Infrastructure:
Minor
Alteration/
Renovation
(A/R), Mobile
Units, and
Vehicles

Ineligible Costs



Must not use these H8F funds to cover the same expense as H8C, H8D, H8E or H80 funds



EHRs that are not
ONC certified



New construction activities,
additions, or expansions
Major A/R
(total budget of \$500,000 or more)



Facility or land purchases



Significant site work outside the building
Road paving or new parking lots



Purchase or installation of permanent modular units or prefabricated buildings



Activities that do not support funding purpose
Costs reimbursed by other government programs



Just a
friendly
reminder

HRSA WEEKLY COVID-19 SURVEY

You will need to complete the HRSA Health Center COVID-19 Weekly Survey and the required Addendum for questions related to the Program every **Tuesday by 11:59 p.m. local time**. Your survey will include the standard part of the survey and an Addendum: additional questions that apply only to Vaccine Program participants. [See the questions](#) and a [user guide](#) for more information. **Completing the survey is a mandatory requirement** and a precondition for participating in the Health Center COVID-19 Vaccine Program. Please be sure to complete the survey weekly, adhering to the Tuesday deadline.

Vaccine Data Collection Integration

Aaron Rakes, Meredith Dennen, Natalie Batten

Please indicate your status regarding the data collection integration

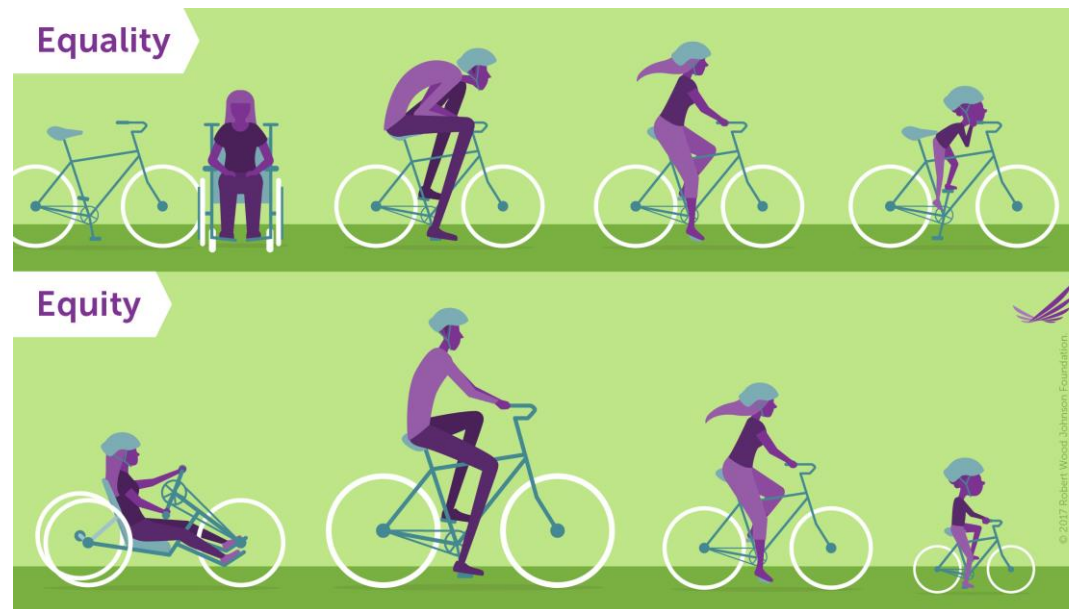
- Interested, have dedicated IT to create necessary files
- Interested, do not have dedicated IT to create necessary files
- Have already expressed interest to the team/in-progress
- Not interested at this time



Proposed Carolina Access Temporary Health Equity Payment

Carolina Access Temporary Health Equity Payments

NC Medicaid's Focus on Health Equity



Source: Robert Wood Johnson Foundation:

<https://www.rwjf.org/en/library/infographics/visualizing-health-equity.html#/download>

Carolina Access Temporary Health Equity Payments

- Available: April – June 2021
- Eligible providers: Carolina Access I and II providers serving beneficiaries from high needs areas.
- Increased PMPM based on practice's mix of beneficiaries (measured by poverty rate at beneficiary's census tract).

Carolina Access Temporary Health Equity Payments

How Payments are Determined

Poverty Score Determined by Poverty Level of Beneficiary's Census Tract	Enhanced Payment
<17%	\$0 PMPM
17% - 21%	\$9 PMPM
>21%	\$18 PMPM
+/- 2 percentage points of 19% (Medicaid beneficiary overall Poverty Score)	

Example

Census Tract	Poverty Rate for Tract	Patient Dist. by tract PCP1	Patient Dist. by tract PCP2	Patient Dist. by tract PCP3
A	10%	25%	0%	0%
B	15%	50%	40%	0%
C	20%	25%	40%	50%
D	25%	0%	20%	50%
Wtd Avg Score		15%	19%	22.5%
Enhanced Payment		\$0- Under Threshold	\$9 PMPM	\$18 PMPM

Carolina Access Temporary Health Equity Payments

What are Some Ways to Improve Health Equity?

- ✓ Making permanent enhancements to telehealth access
- ✓ Staff training on implicit bias, trauma informed care and health equality
- ✓ Recruitment of key staff to reduce health inequity such as dietitians, health coaches, and community health workers
- ✓ Quality and clinical data analysis and action plans
- ✓ COVID-19 specific response such as additional vaccine outreach and distribution efforts to historically marginalized populations.
- ✓ Improving practice infrastructure to address non-medical drivers of health
- ✓ Investing in behavioral health supports and enhancing integration of behavioral and physical health.

Carolina Access Temporary Health Equity Payments

Resources:

- CDC Practitioners Guide for Advancing Health Equity:
<https://www.cdc.gov/NCCDPHP/dch/pdf/health-equity-guide/Practitioners-Guide-section1.pdf>
- AAFP Addressing Social Determinants of Health in Primary Care:
https://www.aafp.org/dam/AAFP/documents/patient_care/everyone_project/team-based-approach.pdf
- IHI Achieving Health Equity:
<http://www.ihi.org/resources/Pages/IHIWhitePapers/Achieving-Health-Equity.aspx>
- NCHA Resource Center:
<https://www.ncha.org/equity-disparities-resource-center/#1545154155925-6d0789a1-bfe3>

REMINDERS: Policy-Related Requests

1. **ASAP: Educational conversations with your state lawmakers in the NC General Assembly about 340B pickpocketing by PBMs.**
 - See email from Brendan Riley with talking points, follow-up one-pager, and further explanation from Monday, March 22.
 - Want to talk it through first? Email, call, or text Brendan.
 - ***Please let us know (a) how many lawmakers you talk to and (b) how the talks go so we can let our legislative champion know.***
2. **Seeking Your Feedback on NCGA Regional Meetings.**
 - Thank you for making these six meetings a success – CHCs met with 55 unique legislative offices (~1/3 of entire state legislature).
 - [Please fill out evaluation form about these NC General Assembly Regional Meetings!](#) You are the ones who bring value to these meetings, so we want to make sure they bring value to you.

Upcoming FQHC Task Force Calls

- **April 23, 10:00-11:30am**



Stay connected!

www.ncchca.org/covid-19/

covid19@ncchca.org

