



Fiscal Year 2016 Patient-Centered Medical Home Supplemental Funding Opportunity Technical Assistance Webinar

Funding Opportunity Number: HRSA-16-183

[Technical Assistance Website:
PCMH Technical Assistance Website](#)



HRSA
Health Resources & Services Administration

INTRODUCTION

Primary Care Mission and Strategies

Improving the health of the Nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality primary health care services.



Increase access to primary health care services



Modernize primary care infrastructure and delivery system



Improve health outcomes and health equity



Promote performance-driven, innovative organizations

Increase Value of Health Center Program

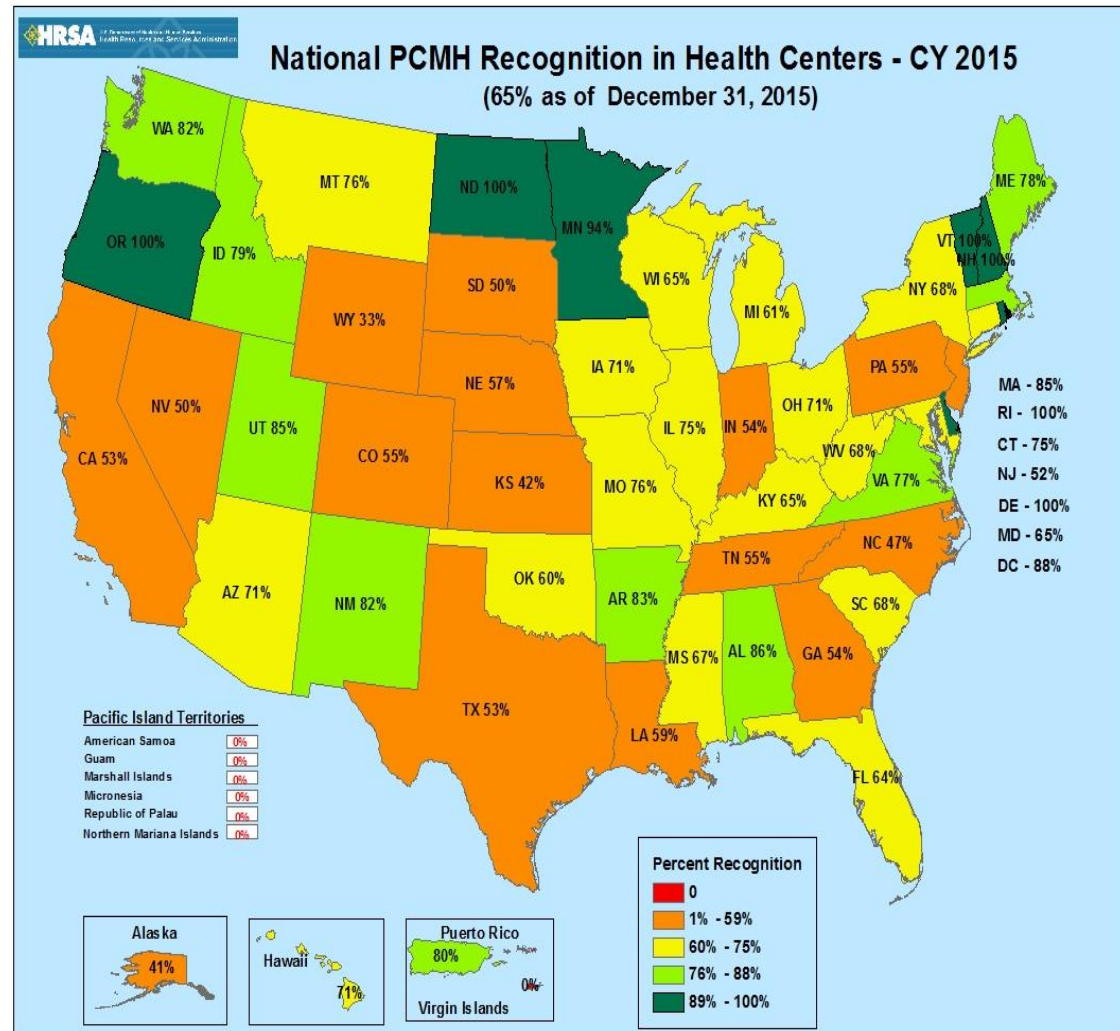
Health Center Program

Modernize Care: PCMH Recognition

Goal: All health centers are PCMH recognized

Next steps on your journey:

- Optimize/enhance your PCMH
 - Team based care
 - Integration of care
 - Patient engagement
- Engage with the Medical Neighborhood
 - Care coordination
- Build Community Partnerships to address social determinants of health
 - Housing
 - Nutrition
 - Education
 - Social Services
 - Aging & Disability Supports
 - Transportation



Modernize Infrastructure & Delivery Systems



98% of health centers have adopted EHRs (Source: 2014 UDS data)



65% of health centers have received PCMH recognition



Nearly 25% of health center sites improved through capital investments

Investments to Modernize Delivery System:

- Awards to expand/enhance PCMH model
- Awards to increase meaningful use of Health IT and facilitate HIE

Improve Health Outcomes & Health Equity



93% of health centers demonstrated improvement on one or more clinical quality measures



89% of health centers met/exceeded HP2020 goals on at least one clinical quality measure



2009 Patient Survey found **no disparities** in access to care, patient satisfaction, or cancer screening, diabetes care, or hypertension care



215 health centers met or exceeded the **Million Hearts** goals on aspirin therapy, blood pressure control, and smoking/tobacco cessation

Investments to Improve Outcomes:

- Quality Improvement Awards
- Awards to support integrated care and care coordination

FUNDING OPPORTUNITY OVERVIEW

Purpose

To support health centers that received initial Health Center Program operational grant funding after Fiscal Year (FY) 2011 in improving quality of care and patients' and providers' experience of care through the PCMH health care delivery model.

FY 2016 PCMH supplemental funding will provide assistance to health centers to make the practice changes necessary to achieve, expand, and/or optimize PCMH recognition.

Summary of Funding

- **Funding:**

- Approximately \$10 million in total funding.
- Maximum of \$35,000 in one-time funding per applicant.

- **Timeline:**

- Applications available in EHB on **May 2, 2016.**
- Applications due in EHB on **May 31, 2016.**
- Awards will be announced on or around **August 1, 2016.**
- FY 2016 PCMH supplemental funding must be expended within 12 months of award.

Eligibility

- Existing Health Center Program award recipients that received initial Health Center Program operational grant funding FY 2012 – FY 2016 (if funded by April 1, 2016) are eligible to apply for this supplemental funding.
 - On May 2, 2016, HRSA notified each eligible health center about the availability of the FY 2016 PCMH supplemental funding application via EHB email.
 - Contact pcmhsupplement@hrsa.gov if you cannot locate the email.

Application Requirements

Expected Impact

- **Applicants must use FY 2016 PCMH supplemental funding to:**
 - Achieve PCMH recognition for one or more sites in the health center's approved Health Center Program scope of project that are not currently PCMH recognized;
- and/or**
- Increase the level of PCMH recognition and/or further optimize the use of the PCMH model for one or more sites in the health center's approved scope of project that are currently PCMH recognized.

PCMH Core Functions and Attributes

- **Proposed activities must enhance one or more of the PCMH Core Functions and Attributes defined by the Agency for Healthcare Research and Quality (AHRQ) as:**
 - Comprehensive Care
 - Patient-Centered
 - Coordinated Care
 - Accessible Services
 - Quality and Safety
- **Additional information about the PCMH Core Functions and Attributes: <https://pcmh.ahrq.gov/page/defining-pcmh>**

Allowable Costs

- **Allowable costs include:**

- Personnel costs (salary and fringe for no more than 12 months);
- Fees for expert consultants, practice coaches, or training;
- Movable equipment and supply costs that cover necessary system enhancements (e.g., upgrades for certified electronic health records (EHR), tablets, modular work stations); and
- Costs of activities directly related to the developmental work required to become PCMH recognized.

PCMH Development Activities

- Use PCMH self-assessment tools, pre-survey results, and/or initial survey results to identify areas in need of improvement.
- Allowable activities support achievement, expansion, and/or optimization of PCMH recognition, including:
 - Practice redesign,
 - Implementation of team-based models of service delivery,
 - Necessary system upgrades, and
 - Staff/consultant time dedicated to PCMH developmental and/or optimization efforts, including expanding upon existing transformation efforts to further optimize the PCMH model.
- Activities must be implemented at sites that are in the health center's approved scope of project.

Required Outcomes

- **Applicants must propose to achieve, expand, and/or optimize PCMH recognition.**
- **Health centers must demonstrate that activities have been implemented to support accomplishment of the proposed outcomes by July 31, 2017, including the achievement or expansion of PCMH recognition.**
 - Documentation is required in the final report (as applicable). See slide 17.
 - Documentation Table on page 5 of the PCMH Application Instructions for details per recognizing body.

Required Documentation

Recognizing Body	Documentation Required for Health Centers Proposing to Achieve or Expand PCMH Recognition
National Committee on Quality Assurance (NCQA)	Proof of the recognition decision or proof of final survey tool submission to NCQA (via a certificate or an email from NCQA verifying submission) by July 31, 2017.
Accreditation Association for Ambulatory Health Care (AAAHC)	Proof of the recognition decision or proof that the final site visit has been scheduled by July 31, 2017.
The Joint Commission (TJC)	Proof of the recognition decision or proof that the health center's final site visit has been scheduled by July 31, 2017.
Minnesota Health Care Home	Proof of the recognition decision or other documentation that demonstrates implementation of steps necessary to achieve recognition through the Minnesota Health Care Home process by July 31, 2017.
Oregon Patient-Centered Primary Care Home Program	Proof of the recognition decision or other documentation that demonstrates implementation of steps necessary to achieve recognition through the Oregon Patient-Centered Primary Care Home Program process by July 31, 2017.

Unallowable Costs

- **Unallowable costs include:**
 - Patient care (e.g., laboratory tests, medical or office supplies);
 - Construction, including minor alterations and renovation;
 - Fixed/installed equipment;
 - Costs incurred prior to award;
 - Costs that are covered by the HRSA Accreditation and PCMH Recognition Initiative; and/or
 - Facility, land, or vehicle purchases.
- **Funding may not supplant other resources (federal, state, local, or private).**
- **Applicants may not add, delete, consolidate, or relocate sites as part of the application.**

Post Award Reporting Requirements

- **Approximately 6 months after the awards are announced:**
 - Participate in a HRSA-led technical assistance webinar. Additional information will be provided to successful applicants.
- **Approximately 45 days after the end of the 12 month funding period:**
 - Submit a final report describing progress made toward achieving the proposed outcomes, lessons learned, barriers or challenges experienced while implementing activities, and documentation of proof of recognition.
 - See Documentation Table on page 5 of the PCMH Application Instructions for details per recognizing body.

Participant Response Question 1

Answer: B.

Can health centers that are already PCMH recognized at all sites in scope apply?

- A. No. Applicants must demonstrate that at least one site will achieve PCMH recognition as a result of this funding opportunity.
- B. Yes. Funding may be used to optimize implementation of the PCMH model for sites already PCMH recognized. The proposed activities must support improved quality of care and patients' and providers' experience of care through optimization of the PCMH model.**

APPLICATION PROCESS AND CONTENT

Application Components

- **Budget-related Sections:**
 - SF-424 Basic Information Form (Parts 1 and 2)
 - SF-424 Budget Information Form
 - Budget Justification Narrative
 - Federal Object Class Categories Form
- **Equipment List Form (as applicable)**
- **Project Overview Form**

SF-424 Basic Information Form

- Complete Part 1 and Part 2.
- Only the fields marked as ***required** must be completed.
- Enter 08/01/2016 to 7/31/2017 for the Proposed Project Period.
- Includes requirement to upload a Project Description/Abstract as an attachment.
 - Briefly summarize the proposed PCMH development activities, timeline, and outcomes in a single-spaced document limited to one page in length.

SF-424 Budget Information Form (1/2)

- **The SF-424 Budget Information section is where you will first enter your PCMH funding request.**
- **The funding request may not be greater than \$35,000.**
 - Funding must be requested in the same special population funding proportion(s) as the existing Health Center Program operational grant (i.e., CHC, HCH, MHC, PHPC).
 - HRSA provided the funding split proportion in the application notification email sent May 2, 2016.

SF-424 Budget Information Form (2/2)

Section A - Budget Summary Update

Grant Program Function or Activity	CFDA Number	Estimated Unobligated Funds		New or Revised Budget		
		Federal	Non-Federal	Federal	Non-Federal	Total
Health Care for the Homeless	93.224	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Update Sub Program	Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Section C - Non Federal Resources Update

Grant Program Function or Activity	Applicant	State	Local	Other	Program Income	Total
Health Care for the Homeless	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Go to Previous Page Save Save and Continue

- In Section A, enter the federal and non-federal costs (if any) for the 12 month funding period (8/1/2016 – 7/31/2017) for each currently funded special population.
- Complete Section C if applicable.

Budget Justification Narrative (1/2)

- **Include a line-item budget and narrative justification for the 12 month funding period (8/1/2016 – 7/31/2017).**
 - Upload as an attachment.
- **Provide sufficient information to demonstrate that costs are reasonable and necessary for the proposed project.**
 - Include federal and non-federal costs (if any). The federal amount refers only to the FY 2016 PCMH supplemental funding requested (up to \$35,000).

Budget Justification Narrative (2/2)

- Refer to Appendix B in the FY 2016 PCMH Application Instructions for detailed guidance.
- Sample Budget Justification Narrative available on the PCMH TA Website.
- Funding request in the Budget Justification Narrative must align with the amounts in the Federal Object Class Categories form.
- Include a table of all federally-funded personnel (as applicable).
 - Federal funds may not be used to pay the salary of an individual at a rate in excess of \$185,100.

Federal Object Class Categories Form

- Collects federal and non-federal funding (if any) distribution across budget categories.
- Covers the 12 month funding period (8/1/2016 – 7/31/2017).
- Costs in Federal Object Class Categories Form should align with Budget Justification Narrative.

Total Proposed Budget	Amount		
Section 330 Federal funding (from Total Federal - New or Revised Budget on Section A – Budget Summary)	\$35,000		
Non-Federal funding (from Total Non-Federal - New or Revised Budget on Section A – Budget Summary)	\$15,500		
Total	<u>\$50,500</u>		
Budget Categories			
Object Class Category	Federal	Non Federal	Total
a. Personnel			
b. Fringe Benefits			
c. Travel	\$5,000		<u>\$5,000</u>
d. Equipment		\$5,500	<u>\$5,500</u>
e. Supplies	\$2,000		<u>\$2,000</u>
f. Contractual	\$28,000	\$10,000	<u>\$38,000</u>
g. Construction	N/A	N/A	N/A
h. Other			
i. Total Direct Charges (sum of a-h)	<u>\$35,000</u>	<u>\$15,500</u>	<u>\$50,500</u>
j. Indirect Charges			
k. Total Budget Specified in Section A - Budget Summary (sum of i-j)	<u>\$35,000</u>	<u>\$15,500</u>	<u>\$50,500</u>

Equipment List Form

- **Proposals that include equipment costs must include an Equipment List form.**
 - **Equipment:** Tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds \$5,000.
- **If federal costs for the Equipment line item are not included in the Federal Object Class Categories form (row d), then this form is not applicable.**

Fields with * are required

Add Equipment Information

* Type	<input type="text" value="Select One"/>	
* Description	<input type="text" value="Clinical"/>	(Maximum 50 Characters)
* Unit Price (\$)	<input type="text"/>	
* Quantity	<input type="text"/>	

Project Overview Form

1. Expected Impact

- Indicate the proposed use(s) of FY 2016 PCMH funding from the options below and the number of sites to be impacted.
 - To achieve PCMH recognition for one or more sites in scope that are not currently PCMH recognized; **and/or**
 - To increase the level of PCMH recognition and/or further optimize the use of the PCMH model for one or more sites scope that are currently PCMH recognized.

2. PCMH Core Functions and Attributes

- Select the PCMH Core Functions and Attributes that will be enhanced via this funding, as defined by the Agency for Healthcare Research and Quality (AHRQ).

3. Project Narrative Questions

Project Narrative Questions

Provide a detailed narrative response to each question:

1. Describe the planned activities and how they will achieve the proposed outcome(s) noted in the Expected Impact section.
 2. Describe a realistic timeline that details the implementation steps for the activities outlined in response to Question 1 above. The timeline must show that all FY 2016 PCMH supplemental funds will be expended within 12 months of award.
- **Details in the Project Narrative should be consistent with information provided throughout the rest of the application.**
 - **Responses to this section should be no longer than 1,500 characters each, not counting spaces (approximately 1/2 page).**

Participant Response Question 2

Answer: A, B and C.

Which of the following are allowable uses of this PCMH supplemental funding? Select all that apply.

- A. Purchase Electronic Health Record enhancements**
- B. Hire a temporary quality improvement staff member to manage the PCMH recognition application process**
- C. Contract with a consultant to conduct a patient flow study**
- D. Hire a part-time medical provider to increase access to primary care services
- E. All of the above

REMINDERS AND RESOURCES

Notification of PCMH Application

- **Authorizing Officials, Business Officials, and Project Directors at all eligible health centers received an email via EHB on May 2, 2016 that includes the following:**
 - Link to FY 2016 PCMH application in EHB.
 - Eligibility code to access the application.
 - Required breakdown of funding based on current special population/sub-program funding proportions.

Application Submission

- Applications must be completed electronically and submitted in EHB **by 5:00 PM ET on May 31, 2016.**
- To submit an application in EHB, you must have the ‘Submit’ privilege.
 - If you are not the AO, a “Submit to AO” button will be displayed at the bottom of the Submit page for you to notify the AO that the application can be submitted to HRSA.
- **Note: Ensure you leave adequate time for the AO to complete the submission process prior to the deadline.**

Application Review

- **HRSA reserves the right to request a rebudgeting of funds if an application is not fully responsive to the application requirements, or if ineligible activities are proposed.**
- **Awards anticipated to be announced in August 2016.**
- **Active SAM.gov registration is required at time of award.**
- **HRSA will assess applicants' grant status prior to award. Awards will not be made if a health center has:**
 - 5 or more 60-day program requirement-related conditions
or
 - 1 or more 30-day program requirement-related conditions.

PCMH Technical Assistance Website

<http://bphc.hrsa.gov/programopportunities/fundingopportunities/pcmh/index.html>

- PCMH Application Instructions
- EHB Application User Guide
- Frequently Asked Questions
- Sample Budget Justification Narrative
- Blank copies of application forms (for reference)
- Presentation slides and recording of TA webinar

Select PCMH Development Resources

HRSA Accreditation and Patient-Centered Medical Home Initiative

- Outlines the ongoing HRSA support available for health centers to achieve accreditation and recognition: <http://bphc.hrsa.gov/qualityimprovement/clinicalquality/accr/education-pcmh/index.html>

Accreditation and PCMH Initiative Program Assistance Letter 2015-02

- Describes the HRSA Accreditation and PCMH Recognition Initiative, and outlines the process and requirements for applying: <http://bphc.hrsa.gov/qualityimprovement/pdf/pal201502.pdf>

PCMH Recognition Resources Comparison Chart

- Provides a comparison between PCMH accreditation and recognition programs: <http://bphc.hrsa.gov/qualityimprovement/clinicalquality/accr/education-pcmh/pcmhrecognition.pdf>

Primary Care Development Corporation's PCMH 2014 Readiness Assessment Tool

- Readiness assessment tool to help health centers make informed decisions about moving forward with PCMH recognition: <http://www.pcdc.org/performance-improvement/special-content/2014-pcmh-self-assessment-tool.html>

Technical Assistance Contacts

Assistance Needed	Contact
Technical Assistance Resources	PCMH Technical Assistance Website http://bphc.hrsa.gov/programopportunities/fundingopportunities/pcmh/index.html
Program related questions	PCMH Technical Assistance Team pcmhsupplement@hrsa.gov
Budget or other fiscal questions	Terry Hatchett THatchett@hrsa.gov
Electronic submission issues	BPHC Helpline 1-877-974-BPHC (2742) Send email through Web Request Form