

Assessing Service Area Status

Strategic Initiatives Division Office of Policy and Program Development Bureau of Primary Health Care (BPHC)

Vision: Healthy Communities, Healthy People



Outline

- Overview of the Service Area Status (SAS)
 - Measures and weights
 - Measure groups
 - Data sources
- Possible use cases for the SAS
- How to obtain SAS scores
- SAS for U.S. Territories and Freely Associated States
- Takeaways





Service Area Status (SAS) Overview

- Quantitative, standard way to understand health center service areas
- Describes the health, social, and economic status of communities served by health centers
- Leverages the Service Area Needs Assessment Methodology (SANAM) and the measures and data used in the calculation of the Unmet Need Score (UNS), which was used for the 2019 New Access Point (NAP) funding opportunity
- For a detailed discussion of the SAS, please see the UNS and SAS Resource Guide, available on HRSA's <u>Health Center Program Strategic Initiatives website</u>





SAS Measures and Weights

- The SAS score is a weighted sum of measures leveraging the UNS 2.0 measure set
 - Includes key measures of Health Determinants and Health Status
- Health Center Penetration is removed from the UNS 2.0 measure set for the SAS
 - Focuses on status of the community
 - Maintains relative weights of measures, after removing Health
 Center Penetration measure





Non-Access Measures

- Capture information about factors that impact health outside the pathway of access to health care
- Capture aspects of the built environment and social context that influence physical and mental wellbeing







Access Outcome Measures

- Capture information about healthcare utilization and the timeliness and outcome of care
- Access Outcome and Access Barrier measures capture multiple dimensions of health care access
 - Important to Health Center Program's mission to expand access to high-quality comprehensive care







Access Barrier Measures / Proxy Measures of Health Status

- Include social determinants of health that capture information on impediments to timely access to health care
- Six out of twelve measures
 - Assess socioeconomic status a wellestablished driver of health outcomes and health disparities
 - Serve as proxy measures of health status
- Below 200% Federal Poverty Level and Uninsured have higher weights
 - Reflects core mission of Health Center Program





Direct Measures of Health Status

- Capture information about age-adjusted mortality and mortality from substance use disorders
- Includes key indicators of morbidity, drivers of health care costs, and top risk factors that lead to high burden of preventable mortality and morbidity

DIRECT MEASURES	
All Cause Mortality	2.5
Drug Poisoning Mortality	2.5
Asthma	1.9
Diabetes	1.9
Poor Mental Health	1.9
Poor Physical Health	1.9
Chlamydia	2.1
Obesity	2.1
Smoking	2.1







Data Sources for Measures in the SAS

American Community Survey	CMS Mapping Medicare Disparities	County Health Rankings
National Center for Health Statistics	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	National Vital Statistics System
Population Level Analysis and Community Estimates (PLACES)	Uniform Data System (UDS) Mapper	USDA Food Access Research Atlas
U.S. Department of Housing and Urban Development		

Most recent data available from each source was collected in December 2020 for the SAS

Center Program

Health

Possible SAS Use Cases

- Assess need for and provision of training and technical assistance
- Provide information to inform funding decisions
- Contextualize health center challenges and performance
- Provide context for acute public health emergencies
- Use as component of needs assessment for compliance requirement
- Serve as a public tool that can be utilized by external entities





Obtaining SAS Scores and Measure Values

- The SAS Workbook provides the SAS for any health center or look-alike (LAL) that reported patients in the 2020 UDS data
- The SAS score and underlying measure values are provided for core service areas
 - The core service area for a health center or LAL is the minimum set of ZIP Code Tabulation Areas (ZCTAs) in which at least 75% of the patient population resides
- The SAS Workbook can be downloaded from the <u>Health Center Program Strategic</u> <u>Initiatives website</u>





SAS Workbook Orientation

The SAS Workbook consists of three primary sheets:

- 1. About the Workbook describes the SAS and workbook's contents
- 2. View SAS Score allows users to obtain the SAS for a health center or LAL
- 3. SAS Output Interpretation provides guidance on interpreting the SAS output

Service Area Status (SAS) Workbook

This workbook displays the Service Area Status (SAS) for a **health center** or **health center look-alike**. The SAS provides a measure of the health, economic, and social status of health centers' service areas. The score ranges from 0 to 100 with higher values indicating populations that face increased health, social, or economic disparities, relative to other communities.

Figure 1 shows the measures used in the SAS and their relative weights for U.S. states and D.C. A complete set of weights for Puerto Rico, territories other than Puerto Rico, and Freely Associated States is given in the sheet SAS Weights.





Obtaining a SAS Score for a Health Center or LAL

• On the **View SAS Score** sheet, enter the health center's grant number or LAL number

15 16	Enter Grant or Look- Alike Number:]⊷	Enter Gr	ant or LA	L numbe	er in this cell		
17	Table 1. Health Co	enter Service Area Status (SAS)	Information						
18	Grant or Look-Alike Number	Health Center or Look-Alike Name	ZCTA	Patient Count	Patient Weight	SAS Score	All-Cause Mortality Rate (Percentile)	Associate Degree or Higher (Percentile)	Asthma (Percentile)
19									
20									
20									
21									
22									
23									
24									
	About the W	orkbook A View SAS Score	SAS Output Inte	erpretation	+				





Output of SAS Score for a Health Center or LAL

• Table 1 reports the overall SAS score along with SAS score and measure information for each ZIP Code Tabulation Area (ZCTA) in the service area

15	Enter Grant or Look- Alike Number:	HB0CS000AA	v	SAS so	ore and	measure	information	table	
16 17	Table 1. Health Ce	nter Service Area Status (SAS)	Information						
	Grant or Look-Alike			Patient	Patient		All-Cause Mortality Rate	Associate Degree or Higher	Asthma
18	Number	Health Center or Look-Alike Name	ZCTA	Count	Weight	SAS Score	(Percentile)	(Percentile)	(Percentile)
19	HB0CS000AA	Health Center AA	Overall	1,000	100.0%	73.7	N/A	N/A	N/A
20	HB0CS000AA	Health Center AA	95205	500	50.0%	86.3	21.071	95.060	73.811
21	HB0CS000AA	Health Center AA	95240	300	30.0%	70.6	34.733	64.018	56.029
22	HB0CS000AA	Health Center AA	95376	200	20.0%	47.1	29.221	60.557	35.027
23	23								
24									
	About the Workbook View SAS Score SAS Output Interpretation +								





SAS Output Guidance

• The **SAS Output Interpretation** sheet provides guidance for interpreting the output of Table 1

								Associate	
								Degree or	
	Grant or Look-Alike	Health Center or					All-Cause Mortality Rate	Higher	
6	Number	Look-Alike Name	ZCTA	Patient Count	Patient Weight	SAS Score	(Percentile)	(Percentile)	Asthma (Percentile)
7	HB0CS000AA	Health Center AA	Overall	1,000	100.0%	73.7	N/A	N/A	N/A
8	HB0CS000AA	Health Center AA	95205	500	50.0%	86.3	21.071	95.060	73.811
9	HB0CS000AA	Health Center AA	95240	300	30.0%	70.5	34.733	64.018	56.029
10	HB0CS000AA	Health Center AA	95376	200	20.0%	47.0	29.221	60.557	35.027
11	Column Interpretation:	The name of the health center.	The ZCTAs reported as the core service area of a health center.	The reported patient counts from the ZCTA reported in Column C for the selected health center.	The percentage of a health center's patients that come from the ZCTA in Column C.	Row 7 Column F is the overall SAS score for a health center. This is the Service Area Status (SAS) score. It is the summation of the patient population- based weighted scores (Row 8 and below Column F) for each ZCTA in the core service area.	Columns G through BV provide the percentiles and values for the measures used in calculating the ZCTA SAS. The percentiles of the measures appear first, then the values of the measures. See below for additional information on measures and percentiles.		Note: This example is hypothetical. Three contiguous ZCTAs were randomly selected and patient counts were assigned arbitrarily.
4	About the	e Workbook	View SAS Score	SAS Output Int	erpretation +		1		
to.					_				
						Guidance for ir	nterpreting ou	tput 🧃	HRS

Health Center Program

SAS for U.S. Territories and Freely Associated States

- Limited measure data are available for U.S. Territories and the Freely Associated States
- SAS calculations developed for health centers and look-alikes in Puerto Rico, the remaining U.S. Territories, and the Freely Associated States
 - Based on available data
 - Measures selected to align with key drivers of morbidity and mortality





SAS Measures and Weights for Puerto Rico

HEAL	TH DETERMIN	ANTS	HEALTH	ISTATUS
NON- ACCESS MEASURES	ACCESS OUTCOME MEASURES	ACCESS BARRIER MEASURES	PROXY MEASURES	DIRECT MEASURES
	Dental Visit in 5 Past Year	Below 200% Federal F	Poverty Level 15	Asthma 3.1
	Pan Smoar	Associate Degree or H	ligher 5	Diabetes 3.1
	Screening 5	Housing Stress	5	Poor Mental Health 3.1
	Prev Hospital			Poor Physical Health 3.1
	Stays	No High School Diplon	na 5	Chlamydia 3.1
		Single Parent Househo	old 5	Obesity 3.1
		Unemployment 5		Smoking 3.1
		Uninsured	13.1	
		Broadband Access	5	
		No Vehicle Access	5	
	Socioe	conomic Status Mea	sure Measur	e Weight



SAS for U.S. Territories excluding Puerto Rico

HEALTH DETERMINANTS			HEALTH	STATUS		
NON- ACCESS MEASURES	ACCESS OUTCOME MEASURES	ACCESS BARRIER MEASURES	PROXY MEASURES	DIRECT MEASURES		
	DTP3 10.4	Below Poverty Level	Life Expectancy 4.2			
			Under 5 Mortality 4.2			
	Low Birthweight	No High School Diplon	Diabetes 4.2			
		Uninsured 20.1	Uninsured 20.1			
				Smoking 4.2		
Socioeconomic Status Measure Measure Weight						





SAS for the Freely Associated States

HEAL		ANTS	HEALTH	STATUS
NON- ACCESS MEASURES	ACCESS OUTCOME MEASURES	ACCESS BARRIER MEASURES	PROXY MEASURES	DIRECT MEASURES
	DTP3 Coverage 15.3	Below Poverty Level	Life Expectancy 4.2	
	Low 15.3	No High School Diplon	Under 5 Mortality 4.2 Diabetes 4.2	
			Obesity 4.2	
				Smoking 4.2
	Weight			







- Quantitative way for health centers to understand the health, social, and economic status of communities they serve
- Composed of measures from public, reputable data sources
- SAS scores are available for all 50 states, District of Columbia, the U.S. Territories, and the Freely Associated States
- SAS scores are available in the SAS Workbook, available on the <u>Health Center Program</u> <u>Strategic Initiatives website</u>
- For additional, detailed information on the SAS, refer to the UNS and SAS Resource Guide, available on the <u>Health Center Program Strategic Initiatives website</u>



Thank You!

Strategic Initiatives Division Office of Policy and Program Development Bureau of Primary Health Care (BPHC) Health Resources and Services Administration (HRSA)



BPHC Contact Form

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