Fiscal Year 2020
Quality Improvement Awards
Technical Assistance Webinar

September 3, 2020

Bureau of Primary Health Care (BPHC)
Health Resources and Services Administration (HRSA)
Session Overview

AGENDA

• Opening remarks
• Purpose and impact of the Health Center Program and Quality Improvement Awards (QIA)
• Summary of Fiscal Year (FY) 2020 QIA
• FY2020 QIA eligibility and award criteria
• Review Terms of the Award
Overview of Health Center Program Goals and Quality Improvement Awards

Alek Sripipatana, PhD, MPH
Director, Data and Evaluation Division
Office of Quality Improvement
Program Strategic Goals

Health Center Program Mission: Improve the health of the nation’s underserved communities and vulnerable populations

Increase Access to Care

Advance Quality and Impact

Optimize Operations
# Health Center Program Growth

## Number of Health Centers

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Health Centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>1,373</td>
</tr>
<tr>
<td>2018</td>
<td>1,362</td>
</tr>
<tr>
<td>2019</td>
<td>1,385</td>
</tr>
</tbody>
</table>

## Access to Care
- Patients: The patient population has increased by 5%, from 28.4 million to 29.8 million.
- Delivery Sites: The number of delivery sites increased by 9%, from 11,744 to 12,785.
- Total Full Time Equivalents (FTEs): The total full time equivalents (FTEs) increased by nearly 13%, adding over 29,000 FTE positions and supporting 252,868 clinical and support staff.

Source: Uniform Data System 2018 & 2019 – Table 3A, Health Center Site Information
Purpose and Impact of Quality Improvement Awards

- Recognize health centers delivering affordable, accessible, quality, and cost-effective primary health care services
- Further strengthen quality improvement activities and expand quality primary health care service delivery
- Increase access to quality health services, achieve health equity, and enhance population health
- Improve the breadth of services, modernization, efficiency, and overall value of primary health care delivered by health centers
Review of FY2020 Quality Improvement Awards (QIA)

Molly Pelzer  
Management Analyst  
Data and Evaluation Division  
Office of Quality Improvement

Joshua Bolton  
Statistician  
Data and Evaluation Division  
Office of Quality Improvement
FY2020 QIA Eligibility and Award Criteria

Health Center:

• Used an electronic health record (EHR) system to report on all clinical quality measures (CQMs) on the universe of patients served by the health center

• Submitted a complete and on-time 2019 Uniform Data System (UDS) report
  ▪ Health centers that did not submit a UDS Report are not eligible for PCMH award

• Not considered for QIA if their H80 grant was discontinued or relinquished

• Determined to be ineligible at the time of the funding decision based on status of progressive action (PA) conditions
Quality Improvement Award Categories and Badges

Quality
- Health Resources and Services Administration
- HEATH CENTER QUALITY LEADER
- 2020 AWARDEE

Access
- Health Resources and Services Administration
- ACCESS ENHANCER
- 2020 AWARDEE

Value
- Health Resources and Services Administration
- VALUE ENHANCER
- 2020 AWARDEE

Disparities
- Health Resources and Services Administration
- HEALTH DISPARITIES REDUCER
- 2020 AWARDEE

Information Technology
- Health Resources and Services Administration
- ADVANCING HIT FOR QUALITY
- 2020 AWARDEE

Patient-Centered Medical Home
- Health Resources and Services Administration
- PCMH

HRSA Health Center Program
## Quality Improvement Awards: Over $117 Million

<table>
<thead>
<tr>
<th>Award Category</th>
<th>Number of Health Centers</th>
<th>Award Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Quality Improvers</td>
<td>734</td>
<td>$17,998,373</td>
</tr>
<tr>
<td>Health Center Quality Leaders</td>
<td>384</td>
<td>$18,632,918</td>
</tr>
<tr>
<td>National Quality Leaders</td>
<td>65</td>
<td>$3,655,440</td>
</tr>
<tr>
<td>Access Enhancers</td>
<td>341</td>
<td>$5,048,500</td>
</tr>
<tr>
<td>Value Enhancers</td>
<td>38</td>
<td>$1,173,000</td>
</tr>
<tr>
<td>Health Disparities Reducers</td>
<td>303</td>
<td>$7,807,350</td>
</tr>
<tr>
<td>Advancing Health Information Technology for Quality</td>
<td>1,246</td>
<td>$10,520,350</td>
</tr>
<tr>
<td>Achieving PCMH Recognition</td>
<td>1,071</td>
<td>$52,645,000</td>
</tr>
</tbody>
</table>

### Award Amounts by Category

- PCMH Recognition, $52.6M
- Advancing HIT for Quality, $10.5M
- Value Enhancers, $1.2M
- Access Enhancers, $5.0M
- Health Disparities Reducers, $7.8M
- Quality, $40.3M
- Advancing Health Information Technology for Quality, $10.5M
Award Subcategory: Clinical Quality Improvers

Criteria and Payout

52% (734) of all health centers received a Clinical Quality Improvers Award.

Demonstrated at least a 15% improvement on any CQM from 2018/QIA 6.0 to 2019/QIA 7.0.

Base award of $3,162.50 per CQM improved and $1.00 per patient bonus.

No badge is provided for this award.
Award Subcategory: Health Center Quality Leaders

Gold, Silver, Bronze Criteria and Payout

Based on Adjusted Quartile Rankings of the top 30% of health centers:

Quartile rankings account for differences that influence clinical performance such as percent of patients that are uninsured, minority, special populations, and EHR status.

See the Health Center Adjusted Quartile Ranking Frequently Asked Question for more information.

Top 10% of Health Centers
• Base Award of $28,750
• Per Patient Bonus of $1.00

Second 10% of Health Centers
• Base Award of $23,000
• Per Patient Bonus of $1.00

Third 10% of Health Centers
• Base Award of $17,250
• Per Patient Bonus of $1.00
Award Subcategory: National Quality Leaders

Behavioral Health Criteria and Payout

Awarded to the top 1-2% of health centers meeting/exceeding national benchmarks

- Base award of $28,750
- Per patient bonus of $1.00

- Depression screening and follow-up ≥75.9%

- Screening, Brief Intervention, and Referral to Treatment (SBIRT) ≥ 5%

- Medication-Assisted Treatment (MAT) patients ≥ 10% increase from 2018

- At least 70 MAT patients
Award Subcategory: National Quality Leaders

Diabetes Health Criteria and Payout

Awarded to the top 1-2% of health centers meeting/exceeding national benchmarks

- Base award of $28,750
- Per patient bonus of $1.00

- Uncontrolled diabetes (HbA1c > 9%) ≤ 16.20%
  
  **and**

- Body Mass Index (BMI) screening and follow-Up Plan ≥ 72.43
  
  **and**

- Weight assessment and counseling for nutrition and physical activity for children and adolescents ≥ 71.21%
Award Subcategory: National Quality Leaders

Heart Health Criteria and Payout

Awarded to the top 1-2% of health centers meeting/exceeding national benchmarks

• Base award of $28,750
• Per patient bonus of $1.00

- Tobacco use screening and cessation intervention ≥ 80%
- Hypertension control ≥ 80%
- Ischemic vascular disease (IVD): Use of aspirin or another antiplatelet ≥ 80%
Award Category: Access Enhancers

Criteria

Increased access to comprehensive primary health care services:

- Must qualify for one “Quality” Award
- Made at least 5% increase in total patients served from 2018 to 2019
- Demonstrated a 5% patient increase in at least one of the comprehensive service categories:
  - Mental Health
  - Substance Use Disorder
  - Vision
  - Dental
  - Enabling Services

25% (341) of all health centers received an Access Enhancers Award
Award Category: Access Enhancers

Payout

Increased access to comprehensive primary health care services:

- Must qualify for one “Quality” Award
- Made at least 5% increase in total patients served from 2018 to 2019
- Demonstrated a 5% patient increase in at least one of the comprehensive service categories:
  - Mental Health
  - Substance Use Disorder
  - Vision
  - Dental
  - Enabling Services

25% (341) of all health centers received an Access Enhancers Award

<table>
<thead>
<tr>
<th>Number of Comprehensive Services Increased</th>
<th>Award Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>$46,000</td>
</tr>
<tr>
<td>4</td>
<td>$34,500</td>
</tr>
<tr>
<td>3</td>
<td>$23,000</td>
</tr>
<tr>
<td>2</td>
<td>$11,500</td>
</tr>
<tr>
<td>1</td>
<td>$5,750</td>
</tr>
</tbody>
</table>
Award Category: Value Enhancers

Criteria

Health centers providing cost-efficient care:
• Must qualify for a Quality award and an Access Enhancer Award
• Between 2018 and 2019, these health centers performed better than the national average*, while increasing health care quality and comprehensive access

*Health center cost of care was compared to 2015-2016 results from the Medical Expenditure Panel Survey
Award Category: Value Enhancers

Payout

Health centers providing cost-efficient care:

• Must qualify for a Quality award and an Access Enhancer Award
• Between 2018 and 2019, these health centers performed better than the national average*, while increasing health care quality and comprehensive access

<table>
<thead>
<tr>
<th>Value Category</th>
<th>Award Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest Value</td>
<td>$51,750</td>
</tr>
<tr>
<td>Higher Value</td>
<td>$40,250</td>
</tr>
<tr>
<td>High Value</td>
<td>$28,750</td>
</tr>
</tbody>
</table>

*Health center cost of care was compared to 2015-2016 results from the Medical Expenditure Panel Survey
Award Category: Health Disparities Reducers

Criteria

Demonstrated improvement in clinical outcomes across racial/ethnic groups:
- Must be eligible for an Access Enhancer award
- Clinical quality measures included:
  - ✓ Low Birth Weight
  - ✓ Hypertension Control
  - ✓ Diabetes Control

Tiers:
1. Each race/ethnic group that met or exceeded Healthy People (HP) 2020 goal
2. Each race/ethnic group that made at least a 10% improvement closer to the HP 2020 goal from 2018 to 2019

22% (303) of all health centers received a Health Disparities Reducer Award
### Award Category: Health Disparities Reducers

**Payout**

<table>
<thead>
<tr>
<th>Number of Racial/Ethnic Groups Meeting Goals</th>
<th>Tier 1: HP2020 Base Award Amount</th>
<th>Tier 2: Demonstrated 10% Improvement Base Award Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>$60,375</td>
<td>$57,500</td>
</tr>
<tr>
<td>6</td>
<td>$51,750</td>
<td>$48,300</td>
</tr>
<tr>
<td>5</td>
<td>$43,125</td>
<td>$39,100</td>
</tr>
<tr>
<td>4</td>
<td>$34,500</td>
<td>$29,900</td>
</tr>
<tr>
<td>3</td>
<td>$25,875</td>
<td>$20,700</td>
</tr>
<tr>
<td>2</td>
<td>$17,250</td>
<td>$11,500</td>
</tr>
<tr>
<td>1</td>
<td>$8,625</td>
<td>$2,300</td>
</tr>
</tbody>
</table>
Award Category: Advancing HIT for Quality

Criteria

90% (1,246) of all health centers received an Advancing HIT for Quality Award

Award winners provided at least any 3 of the 4 HIT services:
- e-Prescriptions
- Clinical Decision Support
- Health Information Exchange
- Health IT – Patient Engagement
AND/OR
- Telehealth Service
AND/OR
- Social Risk Screening

27% (375) of all health centers received an Advancing HIT for Quality badge

Badge recipients provided all elements below:
- e-Prescriptions
- Clinical Decision Support
- Health Information Exchange
- Health IT – Patient Engagement
- Telehealth Service
- Social Risk Screening
## Award Category: Advancing HIT for Quality

### Payout

<table>
<thead>
<tr>
<th>Award Tier Criteria</th>
<th>Award</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least 4 Health Information Technology services</td>
<td>$5,750</td>
</tr>
<tr>
<td>At least 3 Health Information Technology services</td>
<td>$4,600</td>
</tr>
<tr>
<td>Health center provides telehealth service</td>
<td>$2,500</td>
</tr>
<tr>
<td>Health center provides Social Risk Screening</td>
<td>$2,500</td>
</tr>
</tbody>
</table>

**Demonstrated leadership in providing telehealth, social risk, and HIT services**

### Percentage and Number of HIT Award Winners

<table>
<thead>
<tr>
<th>Services Provided</th>
<th>Percentage</th>
<th>Number of Award Winners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telehealth Services</td>
<td>99.60%</td>
<td>1,241</td>
</tr>
<tr>
<td>e-Prescriptions</td>
<td>99.76%</td>
<td>1,243</td>
</tr>
<tr>
<td>Clinical Decision Support</td>
<td>87.00%</td>
<td>1,084</td>
</tr>
<tr>
<td>Health Information Exchange</td>
<td>95.67%</td>
<td>1,192</td>
</tr>
<tr>
<td>Health IT-Patient Engagement</td>
<td>72.95%</td>
<td>909</td>
</tr>
<tr>
<td>Social Risk Screening</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Patient-Centered Medical Home Recognition

Jannette E. Dupuy, PhD, MS
Team Lead, Accreditation and Patient Centered Medical Home
Quality Division
Office of Quality Improvement
National Patient-Centered Medical Home (PCMH) Recognition in Health Centers

78% (1079) of health centers, as of July 1, 2020

Source: Accreditation and Patient Centered Medical Home Report, EHBs
Value-Based Care and PCMH

PCMH transformation is critical to advance value-based care systems

↑ #PCMH Health Centers from 38% in 2013 to 78% in 2020


Submit your Notice of Intent (NOI) in EHB to seek participation in the HRSA Accreditation and PCMH Initiative [https://bphc.hrsa.gov/qualityimprovement/clinicalquality/accreditation-pcmh/index.html](https://bphc.hrsa.gov/qualityimprovement/clinicalquality/accreditation-pcmh/index.html)
Overview of Award Terms and Conditions

Jennifer Williams Clarke, MPH
Office of Policy and Program Development

Elvera Messina
Office of Federal Assistance Management
Notice of Award:

The purpose of the Fiscal Year (FY) 2020 Health Center Quality Improvement (QI) one-time grant supplement, as authorized by Section 330 of the Public Health Service Act (42 U.S.C. 254b (d), as amended), is to support health centers that displayed high levels of clinical quality measure performance in Calendar Year 2019 Uniform Data System reporting to continue to strengthen quality improvement activities, including maintaining or achieving patient centered medical home recognition.
Reporting Requirement

• **New in FY 2020: Reporting Requirement Term:**

FY 2020 QIA Reporting Term - You will be required to submit a final report into the HRSA Electronic Handbooks. The final report will describe the activities implemented using the FY 2020 Quality Improvement Award funding to support your health center’s efforts to continue to strengthen quality improvement activities, including maintaining or achieving patient centered medical home recognition. Further details about the specific reporting requirement will be provided through separate guidance.
### Examples of Activities

<table>
<thead>
<tr>
<th>Develop and improve health center QI systems and infrastructure</th>
<th>Develop and improve care delivery systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training staff</td>
<td>Purchasing supplies to support care coordination, case management, medication management</td>
</tr>
<tr>
<td>Enhance HIT, EHR, and data systems</td>
<td>Lab reporting and tracking</td>
</tr>
<tr>
<td>Data analysis</td>
<td>Training and workflow redesign to support team-based care</td>
</tr>
<tr>
<td>Implementing targeted QI activities</td>
<td>Clinical integration of services</td>
</tr>
<tr>
<td>Purchase of medically accessible clinical equipment</td>
<td>Developing and implementing contracts and formal agreements with other providers</td>
</tr>
<tr>
<td>Implementing targeted QI activities (including hiring consultants)</td>
<td>Patient engagement activities</td>
</tr>
</tbody>
</table>
Use of Funds

• The funding should be used within 12 months of receipt to support quality improvement activities and will be available for use through the end of your FY2021 budget period with carry-over request.

• Health centers have flexibility in using the funds to:
  ▪ Develop and improve health center QI systems and infrastructure; and
  ▪ Develop and improve care delivery systems

• Use of funds must be consistent with federal cost principles at 45 CFR 75
Use of Funds (cont.)

The funding may not be used:

• To supplant existing resources.
  ▪ QIA funding must be used for costs that are not otherwise supported by other Health Center Program operational (H80) funding

• To support bonuses or other staff incentives
• For construction costs (including minor alterations and renovation and fixed equipment)
• For fundraising, lobbying, incentives (gift cards, food), construction/renovation, facility or land purchases, or vehicle purchases

For additional guidance on the use of funds, please refer to federal cost principles at 45 CFR 75
• Carry-over – If QI funding remains unspent at the end of your FY 2020 budget period, remaining funds can be carried over into your FY 2021 budget period:

  ▪ Identify amount of un-obligated funds on line 10.h. of the Annual Federal Financial Report (FFR), SF-425
  ▪ Under Expanded Authority – indicate carry-over request in the Remarks area on FFR or
  ▪ Between project periods or not eligible for Expanded Authority - submit Prior Approval Request in EHB to carry-over these funds
  ▪ Consult your Grants Management Specialist for questions
Congratulations to all FY2020 QIA Recipients!
NQLs & HCQLs: Find Your Badge and Certificate
Resources

**Quality Improvement Awards Webpage**
- Includes general information about QIA and FY20 awards

**UDS Resources Webpage**
- Includes the 2020 UDS Manual and archived technical assistance

**UDS Training Website**
- Comprehensive site for UDS training and technical assistance

**UDS Mapper**
- Depicts Health Center Program geography and supports service area analyses

**Health Center Program Support**
- Phone: 877-464-4772 or [Email contact form](#)
Questions?
Thank You!

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Joshua Bolton
Statistician, Data and Evaluation Division, Office of Quality Improvement

Molly Pelzer
Management Analyst, Data and Evaluation Division, Office of Quality Improvement

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Jennifer Williams Clarke
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