



Look-Alike Overview and Initial Designation Application Process

August 2020

Bureau of Primary Health Care (BPHC)

Vision: Healthy Communities, Healthy People



Before You View This Presentation

- Read the [Instructions](#) (PDF - 391 KB)
 - Pay special attention to the Eligibility section
- Watch the [Health Center Program Chalk Talk](#) video (3 ½ minutes)
- Watch [At the Heart of a Health Center](#) video (4 minutes)
- Explore the [How To Become a Health Center webpage](#)



Presentation Agenda

- Health Center Program Overview
- Look-Alike Overview
- What's Involved in Applying
- Application Process, Timeline, and Components
- Eligibility Requirements
- Health Center Program Requirements
- Changes from Previous Instructions
- Tips and Resources



Health Center Program Overview



Overview: HRSA



Overview: The Health Center Program

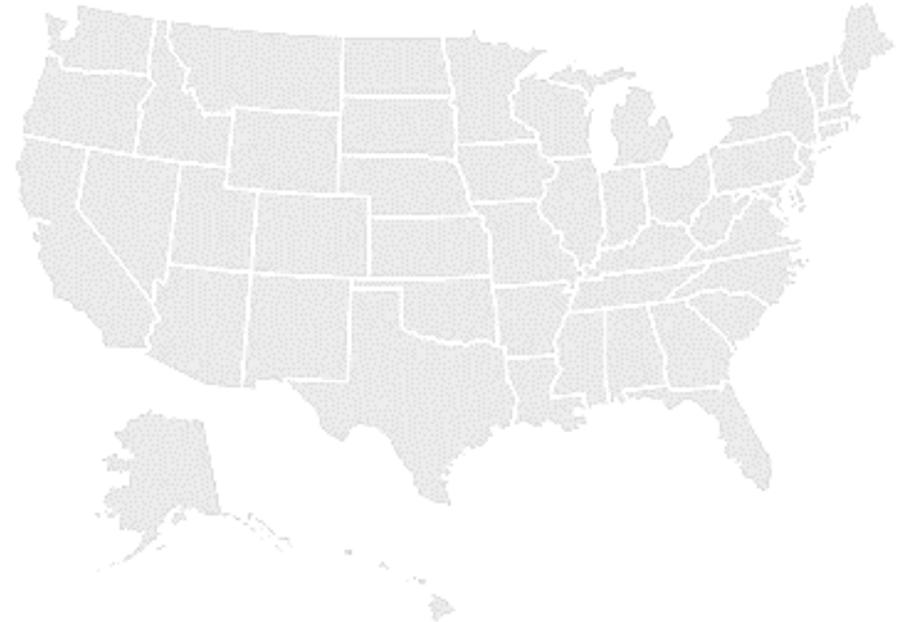


Improve the health of the nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality **primary health care services**



Health Center Program Fast Facts

- Nearly **1,400** health centers operate approximately **13,000** service delivery sites
- Nearly **30 million** patients
- Health centers provide **patient-centered, comprehensive, integrated care** by offering a range of services:
 - Primary medical, oral, and mental health services
 - Substance use disorder and medication-assisted treatment (MAT) services
 - Enabling services such as case management, health education, and transportation



Source: Uniform Data System, 2019

Health Center Program Highlights

HRSA-Funded Health Centers Improve Lives

Nearly 30M people—that's 1 in 11 in the U.S.—rely on a HRSA-funded health center for care, including:



Source: Uniform Data System, 2019



Health Center Program Special Populations

Section 330 of the Public Health Service Act:

- Community Health Centers: **Section 330(e)**
- Migratory and Seasonal Agricultural Workers: **Section 330(g)**
- Health Care for the Homeless: **Section 330(h)**
- Public Housing Primary Care: **Section 330(i)**

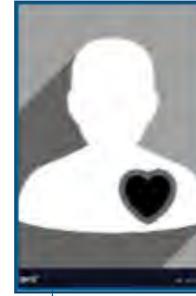


Health Center Program Fundamentals



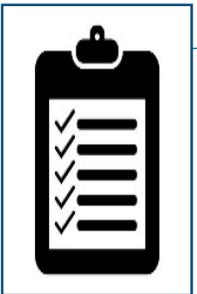
Serve High Need Areas

- Must serve a **high need community or population** (e.g., HPSA, MUA/P)



Patient Directed

- Private non-profit or public agency that is governed by a **patient-majority community board**



Comprehensive

- Provide **comprehensive primary care** and enabling services (e.g., education, outreach, and transportation services)



No One is Turned Away

- Services are **available to all** with fees adjusted based upon ability to pay



Collaborative

- **Collaborate with other community providers** to maximize resources and efficiencies in service delivery



Accountable

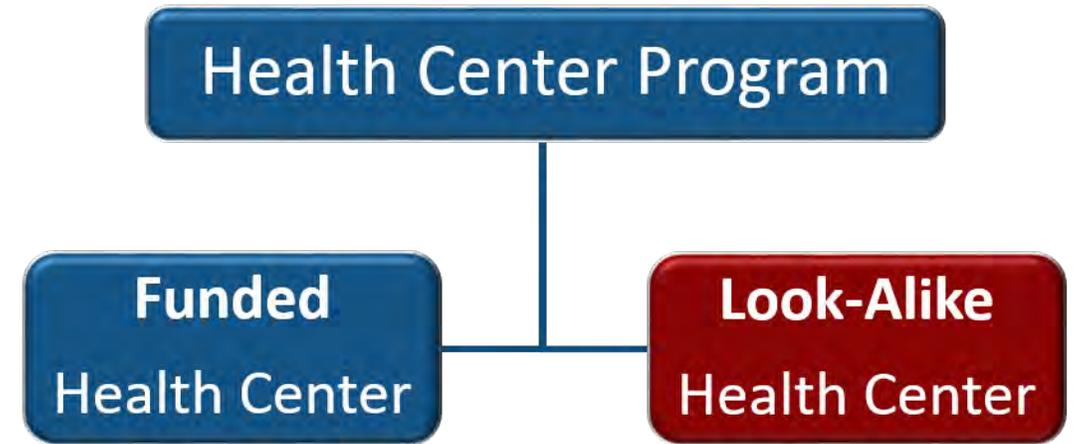
- Meet **performance and accountability requirements** regarding administrative, clinical, and financial operations

Look-Alike Overview



What is a Look-Alike?

- Health center that does not receive HRSA funding
- Public or nonprofit private entity
- **Cannot** be owned, controlled, or operated by another entity
- Adhere to Health Center Program fundamentals and requirements
- **At the time** of application, must be:
 - Operational – providing comprehensive primary care services 40 hrs/wk
 - Compliant with Health Center Program requirements



100% Compliant, 100% of the Time

Health Center Program Benefits

Benefit/Program Access	Funded	Look-Alike
FQHC Prospective Payment System (PPS) reimbursement for services provided to Medicaid and Medicare patients	Y	Y
340B Drug Pricing Program	Y	Y
Vaccines for Children Program	Y	Y
National Health Service Corps providers	Y	Y
HRSA-supported training and technical assistance	Y	Y
Health Center Program funding	Y	N
Federal Tort Claims Act (FTCA) medical malpractice insurance	Y	N
Federal loan guarantees for capital improvements	Y	N

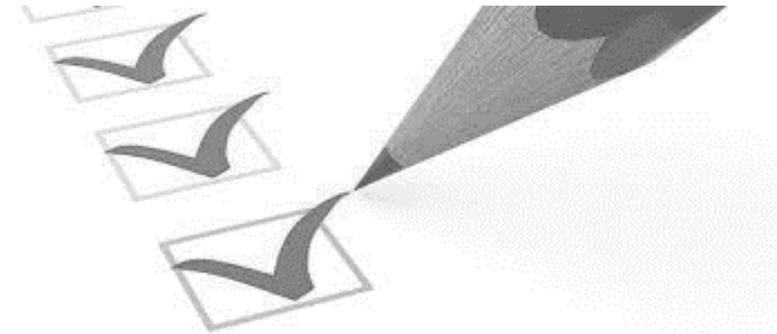


What's Involved in Applying



Before You Apply, Know What's Involved

- You must **already** be operational:
 - *Comprehensive* primary care (see list of [required services](#))
 - 40 hours per week at a permanent service delivery site
- You must **already** comply with program requirements (see the [Compliance Manual](#))
- Board is responsible for oversight and direction of the health center
- Application and site visit process
- Continuous compliance throughout 3-year designation period
- Annual requirements:
 - Annual Certifications ([AC](#))
 - Uniform Data System ([UDS](#)) reporting
- Renewal of Designation ([RD](#)) at the end of the designation period



Application Process, Timelines, and Components



Before Application Submission

- ✓ Assess unmet need in the service area
- ✓ Explore opportunities to collaborate to address unmet need
- ✓ Ensure that your organization is eligible to apply
- ✓ Develop a coordinated plan to apply for look-alike designation
- ✓ Utilize the [look-alike resources webpage](#)
- ✓ Review the [Health Center Program Compliance Manual](#) and [Site Visit Protocol](#)
- ✓ Ensure board is compliant and meeting monthly
- ✓ Provide comprehensive primary medical care with corresponding operational procedures
- ✓ Register with SAM.gov and with HRSA Electronic Handbooks (EHBs)



Application Review Process: **Approximate Timeframes**

Responsible Entity	Process	# of Days
Applicant	Development and submission of application once the application has been created in EHBs	90
HRSA	Preliminary review to assess eligibility and completeness of the application*	30
HRSA and Applicant	Site Visit Scheduling and Preparation	60-75
HRSA	Site visit compliance and eligibility review followed by communication of findings of noncompliance and/or ineligibility issues*	45
Applicant	Response if additional information is requested by HRSA	30
HRSA	Final determination of compliance and eligibility*	45

* Denotes **determination points** for disapproval or progressing to next stage of review



Initial Designation Application Components



Application Components

Project Abstract

Project Narrative:

- Need
- Response
- Collaboration
- Evaluative Measures
- Resources/ Capabilities
- Governance

Attachments

Program Specific Forms

Cannot exceed 175 pages



Attachments

1. Patient Origin and Utilization Information
2. Service Area Map and Table
3. Medicare and Medicaid Documentation
4. Bylaws
5. Governing Board Meeting Minutes
6. Co-Applicant Agreement for Public Entities
7. Contracts and Referral Arrangements
8. Articles of incorporation
9. Evidence of Nonprofit or Public Center Status

10. Financial Statements
11. Organizational Chart
12. Position Descriptions of Key Personnel
13. Biographical Sketches of Key Personnel
14. Sliding Fee Discount Schedule
15. Collaboration Documentation
16. Floor Plans
- 17: Budget Narrative
18. Health Center Program Requirements Compliance



Program Specific Forms

Form 1A: General Information Worksheet

Form 1C: Documents on File

Form 2: Staffing Profile

Form 3: Income Analysis

Form 3A: Look-Alike Budget Information

Form 4: Community Characteristics

Form 5A: Services Provided

Form 5B: Service Sites

Form 5C: Other Activities/Locations

Form 6A: Current Board Member
Characteristics

Form 6B: Request for Waiver of Board
Member Requirement

Form 8: Health Center Agreements

Form 12: Organization Contacts

Clinical and Financial Performance Measures



Eligibility Requirements



Demonstrating Eligibility (1/3)

Eligibility Requirement	Demonstrating Eligibility (Appendix A)
1. Must be a nonprofit organization OR public entity.	<ul style="list-style-type: none"> Attachment 8: Articles of Incorporation Attachment 9: Evidence of Nonprofit or Public Agency Status
2. Must demonstrate that the organization is not owned, controlled, or operated by another entity.	<ul style="list-style-type: none"> Project Narrative Attachment 4: Corporate Bylaws Attachment 8: Articles of Incorporation Attachment 10: Financial Statements
3. Must be operational and currently delivering all required primary care services.	<ul style="list-style-type: none"> Project Narrative Form 1A: General Information Worksheet Attachment 3: Medicaid and Medicare Documentation Attachment 7: Contracts and Referral Arrangements
4. Must currently provide comprehensive primary care as your main purpose.	<ul style="list-style-type: none"> Project Narrative Form 1A: General Information Worksheet Form 5A: Services Provided



Demonstrating Eligibility (2/3)

Eligibility Requirement	Demonstrating Eligibility (Appendix A)
5. Must be compliant with all Health Center Program requirements.	<ul style="list-style-type: none"> • Project Narrative • Attachment 19: Health Center Program Requirements Compliance
6. Must provide access to primary health care services to all individuals in the service area and target population, regardless of ability to pay.	<ul style="list-style-type: none"> • Project Narrative • Attachment 14: Sliding Fee Discount Schedule
7. Must request initial designation for at least one permanent service delivery site that provides comprehensive primary medical care as its main purpose and operates for a minimum of 40 hours per week.	<ul style="list-style-type: none"> • Project Narrative • Form 5B: Service Sites
8. Your look-alike service site(s) must be located in a building that does not include any current Health Center Program award recipient or look-alike sites.	<ul style="list-style-type: none"> • Project Narrative • Form 5B: Service Sites

Demonstrating Eligibility (3/3)

Eligibility Requirement	Demonstrating Eligibility (Appendix A)
<p>9. Must demonstrate that the health center currently serves the population of a defined geographic area with unmet need that is federally designated, in whole or in part, as a Medically Underserved Area (MUA) or a Medically Underserved Population (MUP).</p> <p>Note: Applicants requesting look-alike designation only for special populations (MHC, HCH, and/or PHPC) are not required to have MUA/MUP designation.</p>	<ul style="list-style-type: none"> • Form 1A: General Information Worksheet • Form 5B: Service Sites • Attachment 1: Patient Origin and Utilization Information • Attachment 2: Service Area Map
<p>10. Public Housing Primary Care applicants only: You must demonstrate that you have consulted with public housing residents in the preparation of the ID application and ensure ongoing consultation with public housing residents.</p>	<ul style="list-style-type: none"> • Project Narrative • Form 6B: Waiver of Board Member Requirement (as applicable)

Applicants must meet all eligibility requirements at the time of application



Health Center Program Requirements



Program Requirements

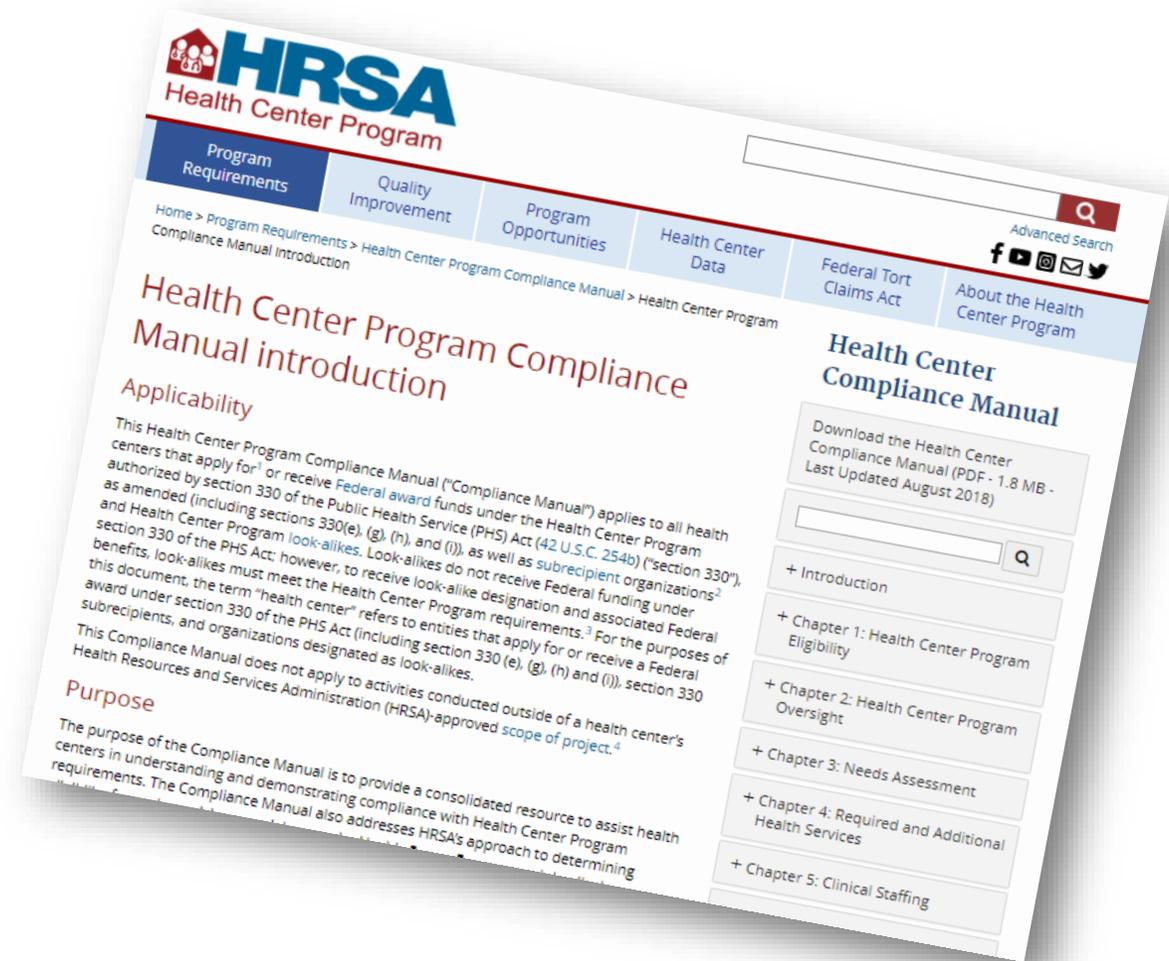
1. Needs Assessment
2. Required and Additional Health Services*
3. Clinical Staffing*
4. Accessible Locations and Hours of Operation
5. Coverage for Medical Emergencies During and After hours
6. Continuity of Care and Hospital Admitting
7. Sliding Fee Discount Program*
8. Quality Improvement/Assurance
9. Key Management Staff
10. Contracts and Subawards
11. Conflict of Interest
12. Collaborative Relationships
13. Financial Management and Accounting Systems
14. Billing and Collections
15. Budget
16. Program Monitoring and Data Reporting Systems
17. Board Authority*
18. Board Composition



**Frequent areas of noncompliance*

Compliance Manual

- Assists health centers in **understanding** and **demonstrating** compliance with Health Center Program requirements
- Available at: <https://bphc.hrsa.gov/programrequirements/compliancemanual>
- Applicants must demonstrate compliance with all program requirements **at the time of application!**



Required Services

Clinical Services

- General primary medical care
- Diagnostic laboratory and radiology
- Screenings
- Coverage for emergencies after hours
- Voluntary family planning
- Immunizations
- Well child care
- Gynecology and obstetrical care
- Preventive dental
- Pharmaceutical services

Enabling Services

- Case management
- Eligibility assistance
- Health education
- Outreach
- Transportation services
- Translation services
- Other



For definitions and service descriptions, please see Service Descriptors for Form 5A:

<https://bphc.hrsa.gov/sites/default/files/bphc/programrequirements/scope/form5aservicedescriptors.pdf>

Changes from the Previous Instructions



Key Changes

See the Instructions
for all changes

- Project Narrative and Appendix A: Demonstrating Eligibility were clarified to further explain documentation needed to demonstrate eligibility.
- Form 1C: Documents on File was added to provide a summary of documents that support the implementation of Health Center Program requirements.
- A question on the use of telehealth was added to the Project Narrative RESPONSE section.
- If your proposed look-alike service site is within five miles of another Health Center Program award recipient or look-alike site, or if your service area has a Health Center Program penetration level of the low-income population that is 75 percent or greater, and you do not sufficiently document both collaboration and unmet need within the service area, HRSA may not approve your look-alike site(s).
- If 10 or more program requirements have non-compliant findings, HRSA may disapprove your initial designation application after the Operational Site Visit.



Tips and Resources



Preparing a Successful Application

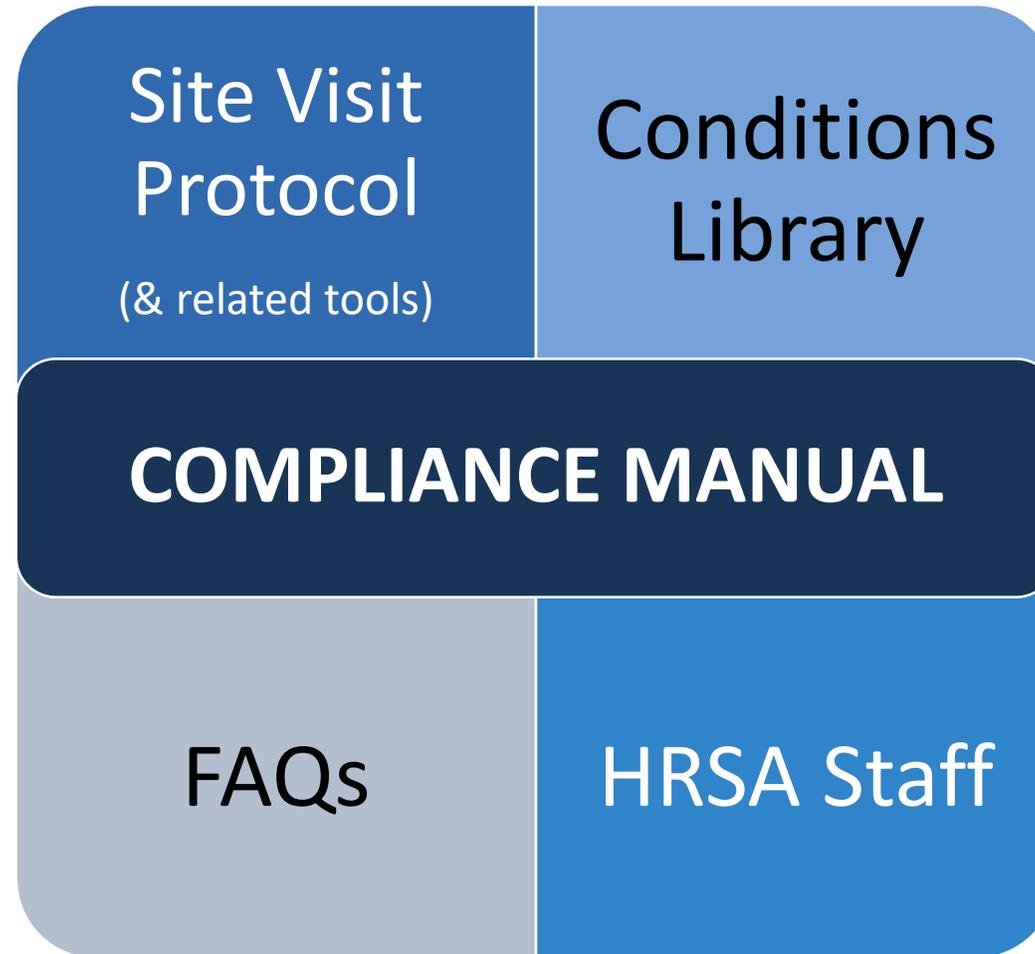
- ✓ Read and follow the Instructions!
- ✓ Refer to the EHBs Look-Alike Initial Designation User Guide on the TA webpage for assistance completing forms and submitting in EHBs
- ✓ Clearly demonstrate the organization is:
 - Independently owned, controlled, and operated with a board that is engaged, informed, and providing oversight
 - Currently operational – providing comprehensive primary care for 40 hrs/wk
- ✓ Conduct a self-assessment using the Compliance Manual and demonstrate how the organization **currently** meets all Health Center Program requirements
- ✓ Utilize tools on the [Scope of Project webpage](#), including:
 - Form 5A Service Descriptors and Form 5A Column Descriptors
 - Health Center Self-Assessment Worksheet for Form 5A: Services Provided
- ✓ Ensure information is consistent across forms, attachments, and the Project Narrative



Preparing for the Operational Site Visit (OSV)

- ✓ Review the Health Center Program [Site Visit Protocol](#) and perform a self-assessment to ensure your organization is compliant
- ✓ Utilize the [HRSA Operational Site Visit Support Documents](#) to ensure all documents are available for the onsite review
- ✓ Ensure your records demonstrate your organization is following established policies and procedures
- ✓ Confirm all referral arrangements and contracts are in place and compliant
- ✓ Prepare your board and staff for the upcoming OSV

Resources for Continuous Compliance



Technical Assistance (TA) Resources

Topic	Contact
Guidance on Requirements and Application Components	Look-alike Initial Designation TA Webpage
Application Questions	Look-alike Initial Designation TA Team: Web Request Form
EHBs Submission Issues	Health Center Program Support: 1-877-464-4772 (TTY: 1-877-897-9910) or Web Request Form
Primary Care Associations and National Training and TA Partners	https://bphc.hrsa.gov/qualityimprovement/strategicpartnerships



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