

Lead Agency: Health Department

Program Contact: Vanetta Abdellatif

Program Offer Type: Support

Related Programs:

Program Characteristics:

Executive Summary

The Clinical Infrastructure (Quality and Support) Program provides pivotal oversight by managing the Bureau of Primary Health Care (BPHC) grant, developing and implementing fiscal accountability programs and access to health care, initiating and sustaining clinical and administrative quality and safety activities and improvements, and coordinating adherence to healthcare standards and regulations.

Program Description

This program supports services within the project scope of the BPHC grant, which has continued to increase since our initial award in 1977. The funding is significant and facilitates the mission of increasing access to needed health services to the County's most vulnerable. BPHC funding requires strict adherence to federal laws mandating which services must be provided as a Federally Qualified Health Center (FQHC) which results in additional Medicaid revenue for Oregon Health Plan clients. This funding requires quality services, performance audits and responsiveness to new methods of delivering safe and quality care. Infrastructure and support assures that these efforts are maintained at acceptable thresholds.

This program supports the ongoing delivery of Primary Care, Homeless, Dental and School Based Health clinical services through the following activities: Management of all aspects of the BPHC grant, including adherence to all federal program requirements. Review, audit and maintain standards of clinical quality and safety as required to maintain Joint Commission (JCAHO) accreditation, which the BPHC strongly supports. Emphasis on use of data and provision of evidence-based care to increase performance outcomes. Provision of financial analysis, monitoring and revenue development for revenue generating program areas. Development and implementation of systems and processes to streamline service delivery, maintain quality and safety, and increase customer satisfaction.

This program measures clinical standards/outcomes, quality, safety and fiscal accountability with other similar health delivery systems. The BPHC and JCAHO are our primary external bench-marking organizations relative to performance indicators. Program includes work with the Community Health Council, client feedback results, and collaborations with other health care delivery systems.

This program supports the Primary Care Renewal and Patient Centered Primary Care Health Home programs and represents a new generation of healthcare funding for performance. These programs, implemented to meet goals of the State of Oregon's 1115 Medicaid Demonstration Accountability Plan and local Coordinated Care Organizations Pay-for-Performance, have tied payments to achieving specific health outcomes and sustaining those improvements over time. The Quality Assurance program is tasked with designing, testing, and implementing the wide array of system improvements needed to meet these new benchmarks.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY11-12)	Current Year Purchased (FY12-13)	Current Year Estimate (FY12-13)	Next Year Offer (FY13-14)
Output		0	0	0	0
Outcome	Maintain compliance with Joint Commission standards	100.0%	100.0%	100.0%	100.0%
Outcome	BPHC grant renewed annually	100.0%	100.0%	100.0%	100.0%

Performance Measure - Description

1. Reflects maintaining good standing as a fully accredited organization under the Joint Commission's standards for BPHC sponsored FQHC's. Conducted through unannounced surveys by the Joint Commission once every three years.
2. Reflects maintenance FQHC standing through meeting all federal rules and requirements; evaluated annually through the grant continuation application process. (Program must meet benchmark of 90% compliance is required to meet standards/rules governing quality and safety, per Bureau of Primary Health Care (BPHC) Accreditation Initiative.)

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2013	2013	2014	2014
Personnel	\$316,459	\$1,867,803	\$2,740,968	\$9,979
Contracts	\$0	\$143,400	\$139,083	\$0
Materials & Supplies	\$55,859	\$121,401	\$213,837	\$1,014
Internal Services	\$103,502	\$237,801	\$499,870	\$1,007
Total GF/non-GF:	\$475,820	\$2,370,405	\$3,593,758	\$12,000
Program Total:	\$2,846,225		\$3,605,758	
Program FTE	2.90	16.80	25.71	0.09
Program Revenues				
Indirect for dep't Admin	\$140,830	\$0	\$770	\$0
Intergovernmental	\$0	\$1,122,500	\$1,042,056	\$0
Other / Miscellaneous	\$0	\$1,247,905	\$1,460,523	\$12,000
Total Revenue:	\$140,830	\$2,370,405	\$2,503,349	\$12,000

Explanation of Revenues

Quality Assurance and Quality Improvement activities are funded with Federal/State Patient Centered Primary Care Health Home (PCPCH), CareOregon Primary Care Renewal (PCR) funding and County General Fund. On occasion we receive specialty grants for targeted work. In 2014, the PCPCH and PCR funding characterized as Health Transformation-Payment Transformation funding has been moved from the Federal/State fund to the General Fund to provide greater transparency, flexibility and central oversight of these funds. Additional county general fund was allocated to Quality Assurance to fund additional positions responsible for designing and implementing the system improvement.

Volunteers of America grant: \$12,000

CareOregon Primary Care Renewal (in the General Fund): \$1,000,000

Patient Centered Primary Care Health Home (in the General Fund): \$1,502,579

County general fund: \$1,091,179

Significant Program Changes

Last year this program was: #40034, Quality Assurance

The increase in FTE is related to necessary infrastructure that supports health transformation requirements, metrics, and accountabilities. These additional positions will improve our ability to capture and report on clinical data that will support changes and improvements to the delivery of health care and therefore improved health outcomes. Additionally, staff will support quality improvement/LEAN teams involved in delivery system transformation (CCO) efforts.

Healthcare transformation, including the foundational work of the Center for Medicare and Medicaid (CMS) Center for Innovation, the Affordable Care Act and Oregon's 1115 Medicaid Demonstration project have changed the way we think about and invest in quality improvement and improving health outcomes. Healthcare in general, with primary care at the forefront, is moving away from fee-for-service or grants to incentive payments for improving the health of our clinic clients. Staff focusing on broad system improvement is included in this program offer.