



Continuous Compliance

A Foundation of Value-Based Care

November 9, 2021

THE NACHC MISSION

America's Voice for Community Health Care

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.







Packaging and implementing evidence-based transformational strategies for safety-net providers

Bringing science, knowledge, and innovation to practice



Cheryl Modica

Director,
Quality Center



Cassie Lindholm

Deputy Director, Quality Center

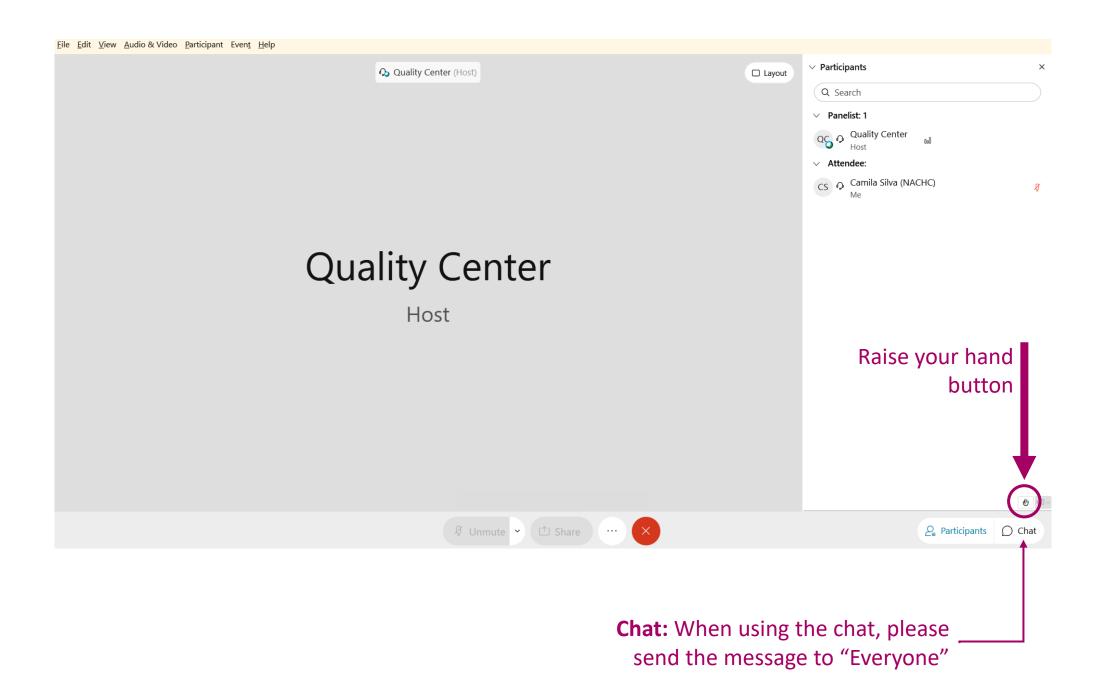


Lizzie Utset

Specialist,
Quality Center







Value Transformation Framework

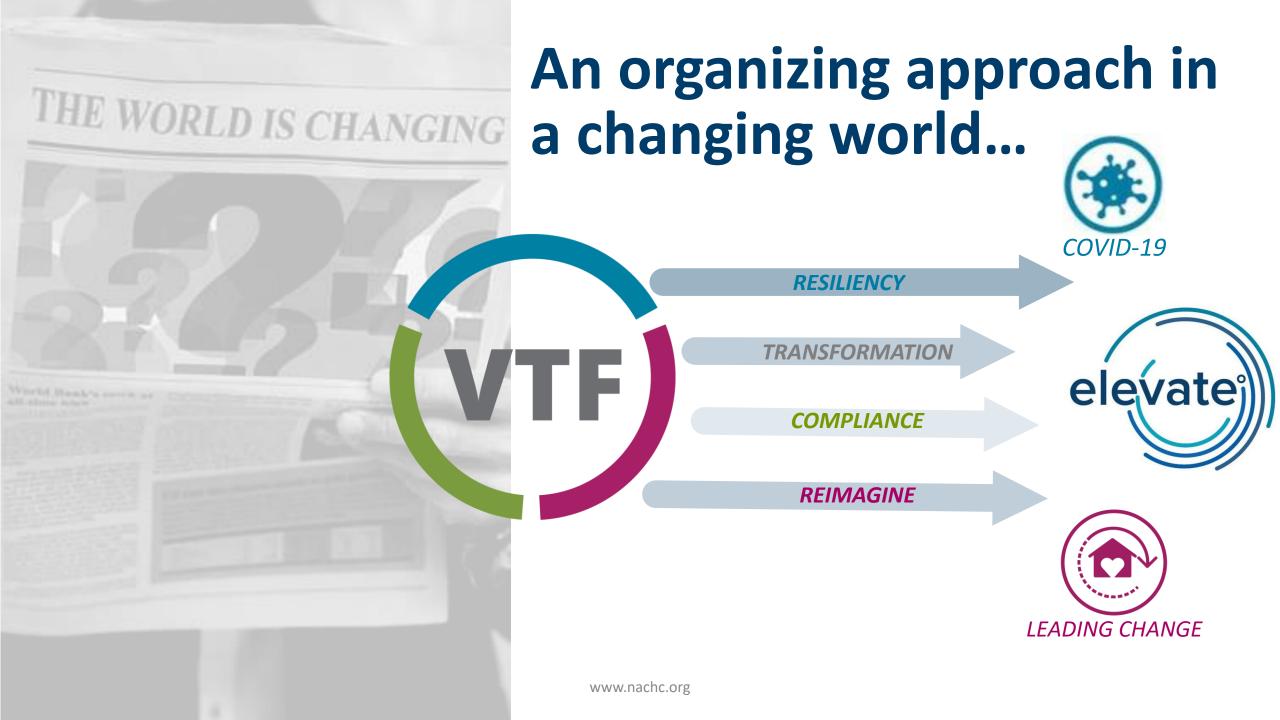


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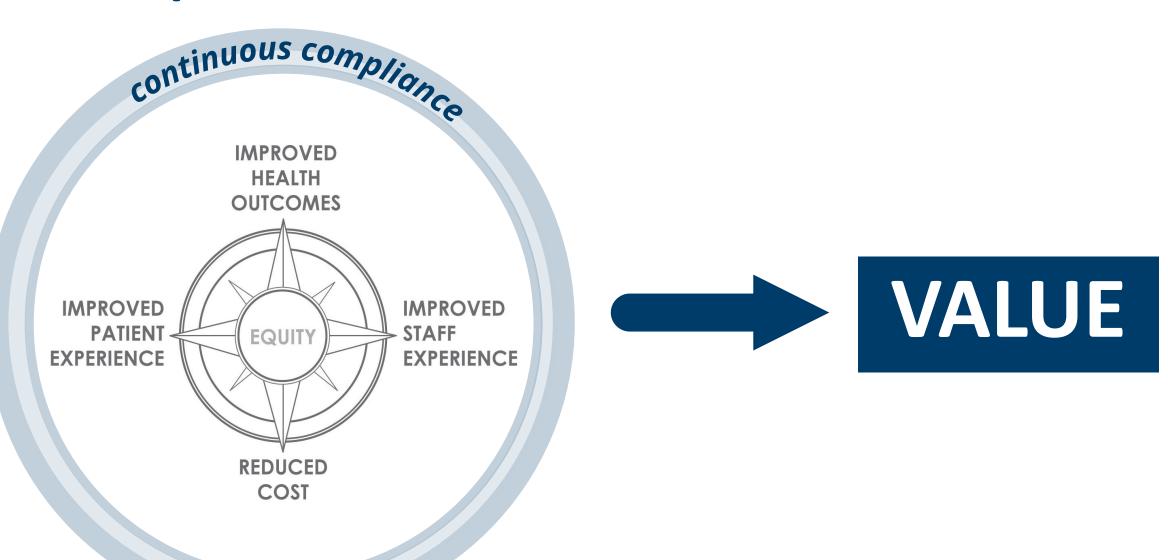
Today's Objectives:



- Explore continuous compliance as a foundational element of value-based care
- Dive deeper into Form 5A and Clinical Quality (Ch.10, 21), Referrals (Ch. 4, 9, 10), Staff Credentialing and Privileging (Ch. 5), and more.



Quintuple Aim



Continuous Compliance

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November 9, 2021

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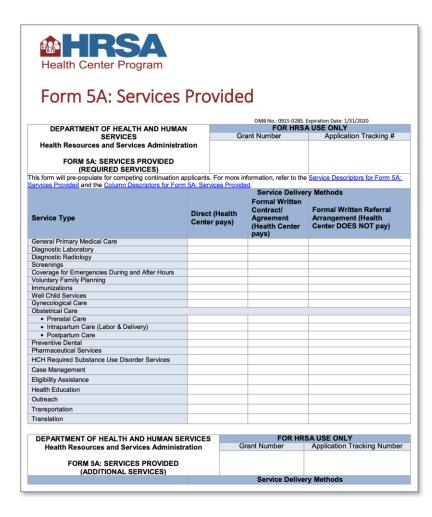
Discussion

Continuous Compliance through the Lens of HRSA's OSV Tool: Form 5A

		/ide		
			-	
DEPARTMENT OF HEALTH AND HUMA	M .			Expiration Date: 1/31/2020 A USE ONLY
SERVICES	`	Gr	ant Number	Application Tracking #
Health Resources and Services Administra	ition			
FORM 5A: SERVICES PROVIDED (REQUIRED SERVICES)				
nis form will pre-populate for competing continuation a	applicants. F	or more in	formation, refer to the	Service Descriptors for Form 5A:
ervices Provided and the Column Descriptors for Forr	n 5A: Servic	es Provide	Service Deliver	or Mathada
			Formal Written	y metrious
Service Type	Direct (I		Contract/ Agreement (Health Center pays)	Formal Written Referral Arrangement (Health Center DOES NOT pay)
General Primary Medical Care			p-y-y	
Diagnostic Laboratory				
Diagnostic Radiology				
Screenings Coverage for Emergencies During and After Hours	_			
/oluntary Family Planning mmunizations				
mmunizations Vell Child Services				
Synecological Care				
Obstetrical Care				
Prenatal Care				
 Intrapartum Care (Labor & Delivery) 				
Postpartum Care Preventive Dental				
Pharmaceutical Services				
HCH Required Substance Use Disorder Services				
Case Management				
Eligibility Assistance				
Health Education				
Outreach				
Fransportation				
Franslation				
				1
DEPARTMENT OF HEALTH AND HUMAN SE				SA USE ONLY
Health Resources and Services Administ	ration	G	rant Number	Application Tracking Number
FORM 5A: SERVICES PROVIDED				
(ADDITIONAL SERVICES)				
(Parallional Califficacy)		_	Service Deliver	

Find Form 5A on HRSA's website here.

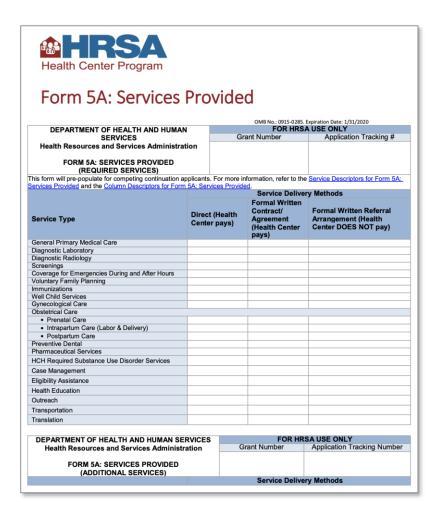
Form 5A

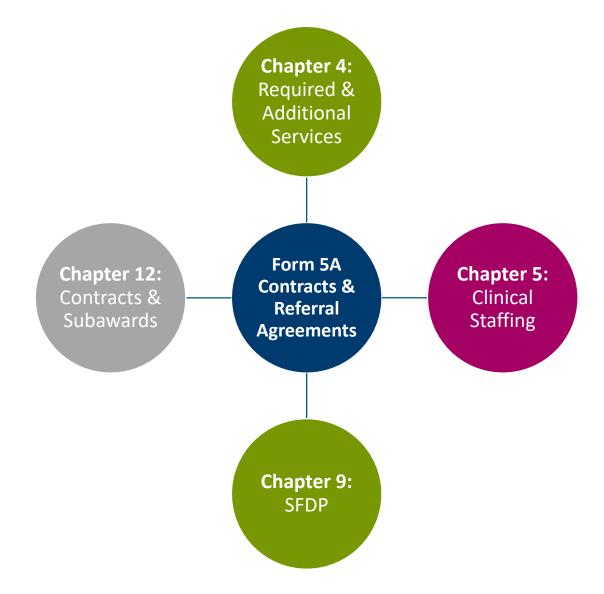


HRSA's Form 5A is the #1 most-common finding in Operational Site Visits

- Varying levels of understanding
- Ambiguity in guidance
- Complex
- Requirements pull for 4 chapters of the Compliance Manual
- Various HRSA definition documents
- After-thought, siloed thinking

Form 5A





www.nachc.org



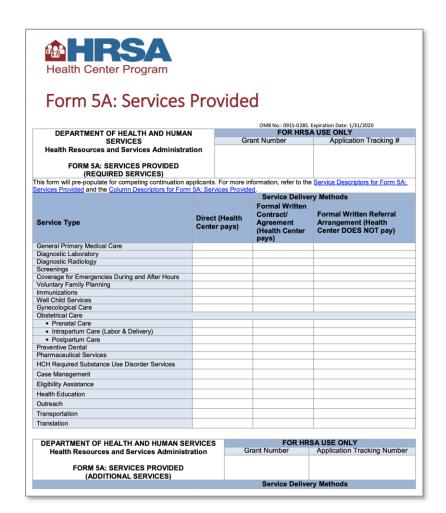
INFRASTRUCTURE

The components that build the **foundation for delivering** reliable, high-quality health care.



Scope of Project: Services Provided and Providers/Service Delivery Methods (Ch 4)

- Required/Additional/Specialty Services
- Directly/Formal Written Contract or Agreement/Formal Referral Agreement

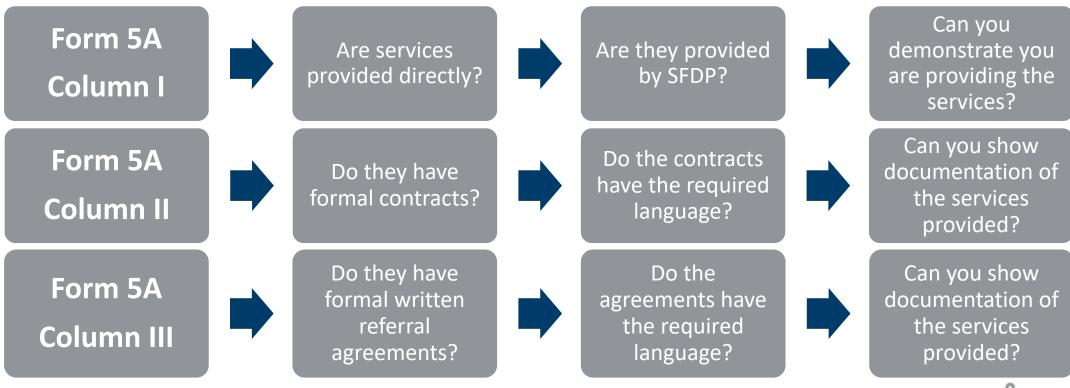






Required and Additional Services (Ch 4)

Providing and documenting services within Scope of Project

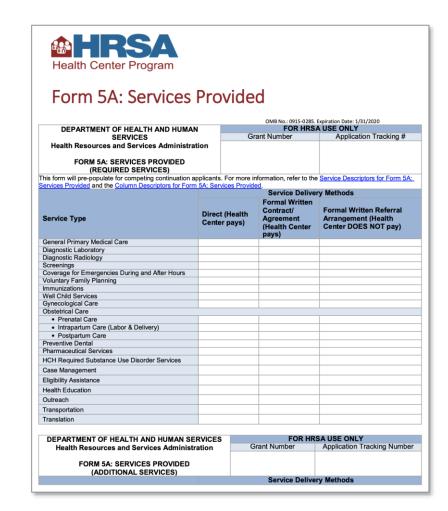






Contracting with referral partners (Ch 4)

- Health centers are not required to provide all services themselves
- Relationships take time and systems

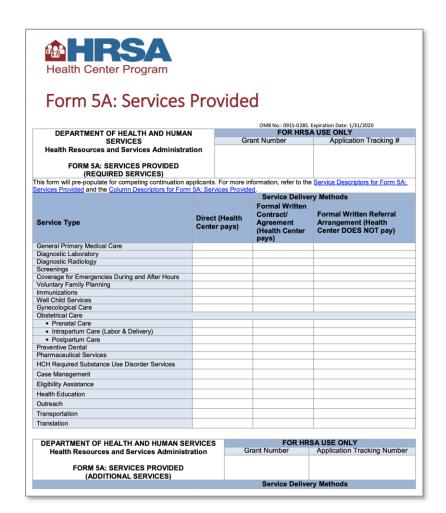






Improving continuity and referral processes (Ch 8)

- The populations we serve are at highest risk of "falling through the cracks"
- Medical records, registries, forms, communication avenues

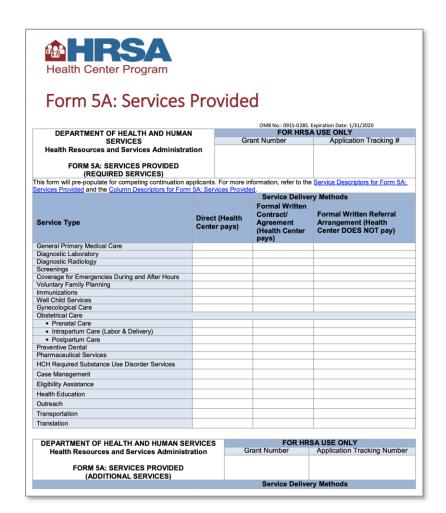






Improving quality outcomes and lowering safety risk (Ch 10, 21)

- Contracted or referral agencies should provide the same standard of quality care you are held to
- The "chain of care" is only as strong as its weakest link







Ensuring Health IT to track and manage referral relationships (Ch 10)

 More tools are needed with greater complexity of care system







Developing referral and payment policies and processes (Ch 9)

- Sliding fee scale
- Access to affordable care







CARE DELIVERY

The processes and proven approaches used to **provide** care and services to individuals and target populations.



Referral Tracking and Follow-Up (Ch 4)

- Care should be tracked from beginning to end
- The loop should be closed by the primary care provider (CHC)

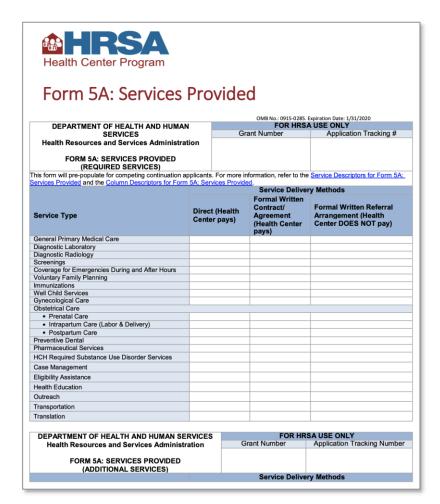






Electronic Record Documentation of Referrals and Direct-Care (Ch 10)

Documentation is just as important as the care itself







Population health management/Care coordination and care management (Ch 4, 8)

- CHCs are required to provide case management services
- CHCs are required to assess their QI/QA quarterly







Ensuring services are available regardless of their social determinants of health (Ch 4)

 CHCs are required to lower the barriers to care (language, limited English proficiency, culturallyappropriate care)







PEOPLE

The individuals who receive, provide, and lead care at the health center and partner organizations to support the goals of high-value care.



Patient satisfaction (Ch 10)

- CHCs must have a policy for measuring patient satisfaction at least annually
- CHCs must report patient satisfaction results to the board at least annually
- CHCs need to be able to describe how these results aid in their decision making
- CHCs must maintain a 51% patient board
- Contracts need to include language on how you are going to monitor those outside experience







Staff credentialing and privileging (Ch 5)

 Any contract or referral organization must present assurances they are credentialing and privileging their staff







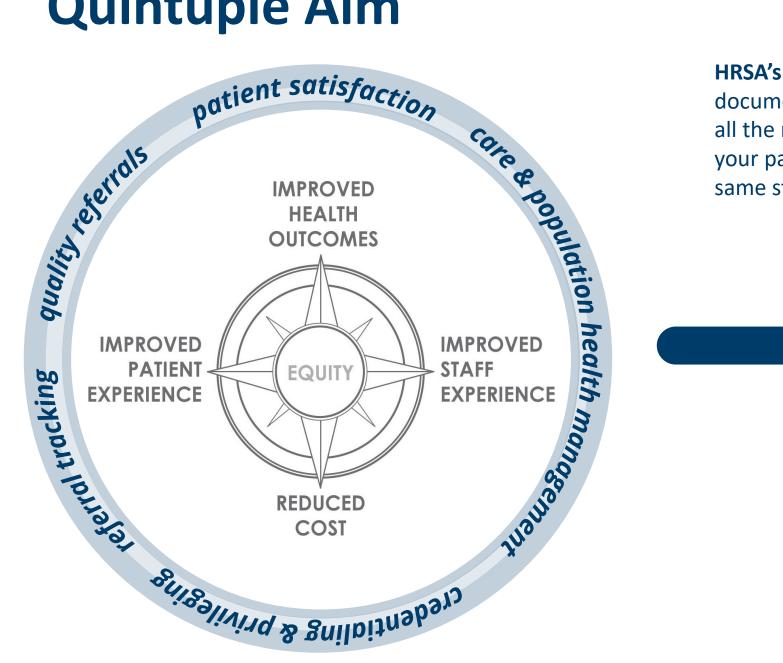
Partnerships with contracted or referral partners (Ch 4)

 The CHC must be able to work together with partners to holistically care for each patient



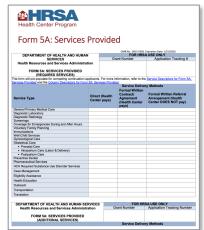


Quintuple Aim





HRSA's Form 5A is where you document that you are providing all the required services and that your partners are held to the same standards of excellence!





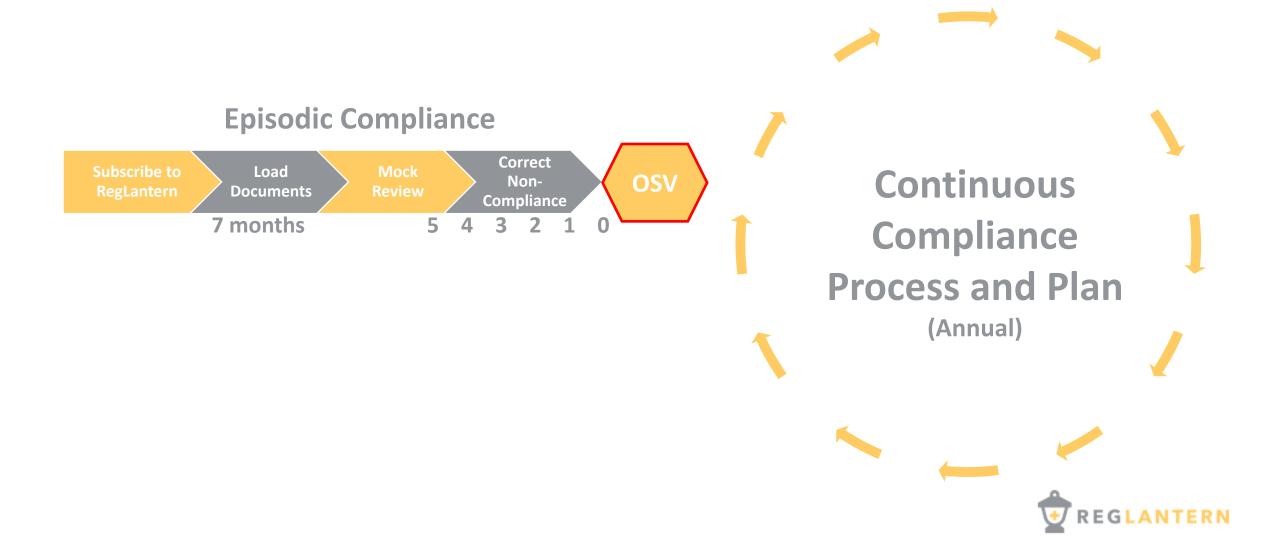
The Cost of Episodic Compliance

- Non-compliance
- Culture of chaos, stress, turnover
- Financial cost

Details	Cost
Last-Minute Mock Site Visit	\$15,000-\$30,000
Re-Training Staff on Compliance Changes	\$3,000-\$5,000
Labor Hours of Organizational Efforts (4 FTEs x 40hrs x 12 weeks x \$30/hr)	\$57,600
Labor Hours of Findings Corrections (4 FTEs \times 40hrs \times 4 weeks \times \$30/hr)	\$19,200
TOTAL	\$94,800 - \$111,800



Continuous Compliance



Roadmap to Continuous Compliance

Where are you on RegLantern's

Health Center Road Map to Continuous HRSA Compliance?

Domains of HRSA's Advancing Health		Number of Months Out From Anticipated HRSA OSV																																	
Center Excellence Framework	36	35	34	33	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6 !	5 4	3	2	1
Quality, Patient Care, & Safety					5.f	7.a	7.b	7.c	7.d	8.a	8.b	8.c	10.a	10.b	10.c	10.d	10.e	10.f	21.e	21.f															Date
Patient Experience					10.a		19.c		7.c		10.a		19.c		7.c																				of Ne
Population Health & SDOH						3.a		3.b		14.a		14.b																							xt os
Access & Affordability					4.a	4.b	4.c	6.a		6.b		6.c	9.a	9.b	9.c	9.d	9.e	9.f	9.g	9.h	9.i	9.j	9.k	9.1											.s
Workforce					5.a		5.b		5.c		5.d		5.e																						
Financial Sustainability						12.a		12.b	12.c	12.d	12. e	12.f	12.g	12.h	12.i	12.j	15.a	15.b	15.c	15.d	15.e	16	17	18											
Governance & Management					19.a	19.b	19.c	19.d	19.e		11.a	11.c	11.d	11.e	13.a	13.b	13.c	13.d	20.a	20.b	20.c	20.d	20.f												
	Corr	Correction of Findings Continuous HRSA Compliance												Mock I	Review		Fine-Tuning & Corrections																		
RegLantern can helpwherever you are!	he. afte HI	lp fixin er your RSA-co perts a	Our web-based tools are designed to keep you continually compliant all the time, avoiding last-minute "cramming-for-the-test" right before your OSV. Schedule a demo with us today and we will provide a free Form are here to help! Ask about our high-quality, affordable mock compliance experts are here to help! Need a little extra help? Our HRSA-compliance reviews!																																

Numbers and letters (12.b, etc.) correspond with chapters and elements in HRSA's Compliance Manual, August 20, 2018.

Red Elements: Clinical Compliance Chapters / Blue Elements: Governance/Admin. Compliance Chapters / Green Elements: Fiscal Compliance Chapters



1-833-REGLANTERN or RegLantern.com

Elevate 2022 Participants: Free Trial Opportunity

- Free 6-month trial
- Free unlimited access to recorded trainings
- Free Form 5A evaluation
- Free unlimited access to web-based platform



Health Center Perspective



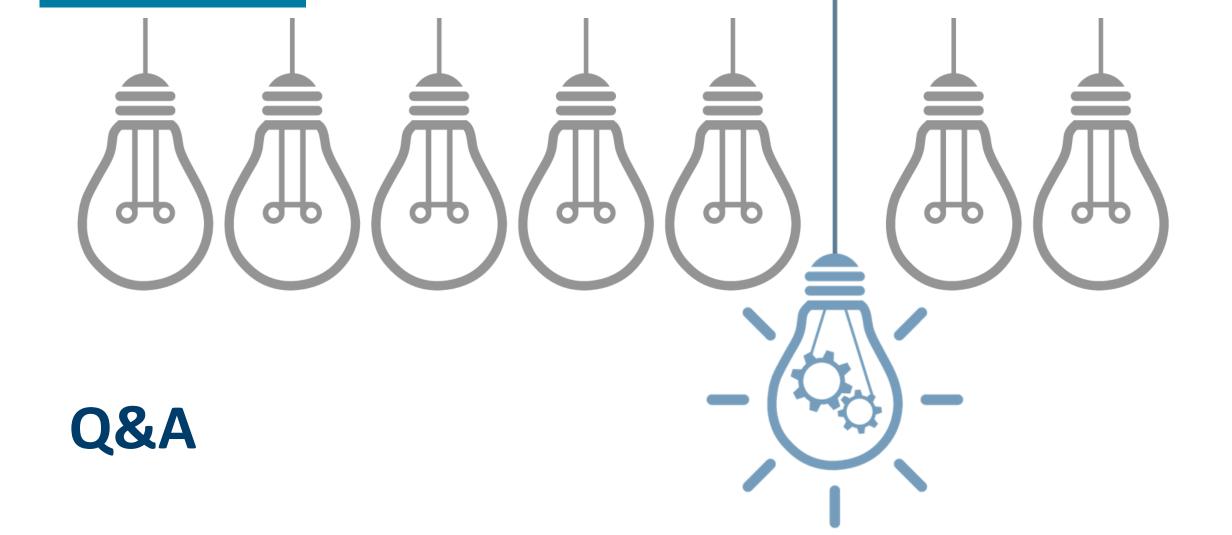


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Our 2022 Journey

Accelerate progress toward value

FOCUS AREAS

Elevate 2022



Value-Based Payment Models

Leveraging

reimbursement

opportunities



Applying evidence-based interventions within the walls



Partnerships and co-design outside the four walls



Catalyzing Policy Changes

Growing Resilient Communities



Join the us for the *last Elevate 2021 Learning Forum* on **December 14** for more information!

GET STARTED TODAY!



1

REGISTER

Sign up today using this link: bit.ly/Elevate 2022

OR, use your phone to scan the QR code:



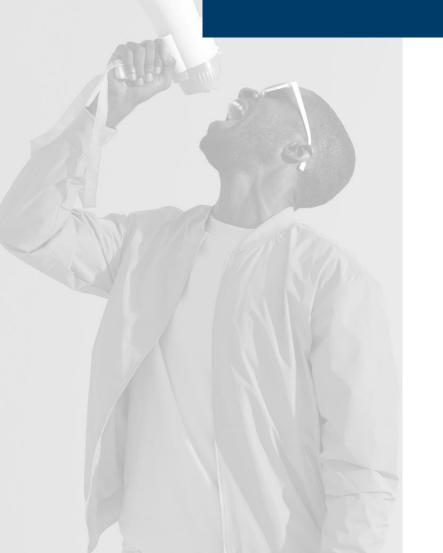
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ASSESS

https://reglantern.com/vtf

Organizations with 3+ VTF
Assessments by November 19
eligible for one of 25
scholarships to attend the 2021
IHI National Forum!

CALL FOR APPLICATIONS



2022-2023 QI Advisory Board Members:

Applications are now being accepted for members to serve on NACHC's QI Advisory Board for the term of Jan 1, 2022 - Dec 31, 2023

Deadline: December 10, 2021

https://bit.ly/2022QIAdvisoryBoard

UPCOMING EVENTS

November 2021

SUN	MON	TUE	WED	THU	FRI	SAT
	199	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19 \(\sum \)	20
21	22	23	24	25	26	27
28	29	30				

Nov. 1 Elevate 2022 registration is open!
Nov. 9 Monthly Forum

Nov. 19 Register by this date to be entered into a drawing for a scholarship to attend IHI's National Forum!

SUN	MON	TUE	WED	THU	FRI	SAT
					3	
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

→ Dec. 10 Applications due to NACHC's QI Advisory Board Dec. 14 Monthly Forum

Dec. 31 Elevate 2021 year end – REGISTER for 2022 by the end of December to stay involved!



Scan QR code to register for Elevate 2022



A bi-monthly mixed methods learning series focused on cardiovascular disease prevention and management topics.

CME credits available.





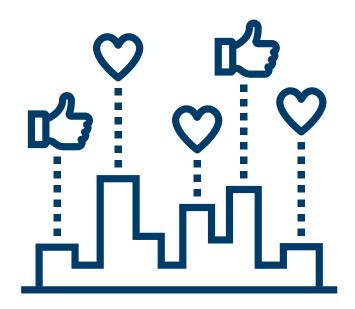
SESSION 2 | 11/17/2021 | 3:00 - 4:00pm ET Intensifying Treatment to Achieve Blood Pressure Control

SESSION 3 | 1/19/2022 | 3:00 - 4:00pm ET **Ensuring Health Equity in Preventing Cardiovascular Disease**

More sessions to come! Details coming soon.

REGISTER TODAY!

https://bit.ly/MillionHeartsRegister



Provide Us Feedback

FEEDBACK

Don't forget! Let us know what you thought about today's session.

FOR MORE INFORMATION CONTACT:

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National Association of Community
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Next Monthly Forum Call:

December 14th, 2021 1 -2 pm ET







Together, our voices elevate all.

The Quality Center Team

Cheryl Modica, Cassie Lindholm, & Lizzie Utset qualitycenter@nachc.org

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