

AHEC Veterans Mental Health Project

Connecting with Federally Qualified Health Centers (FQHCs)

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What are FQHCs?

Since their inception in the 1970s, Community Health Centers, AHECs and the National Health Service Corp have been known as a three legged stool for health care for the underserved.

Inextricably linked to address access to health care for special populations who are often underserved, each component has distinctly different but complementary roles in providing health care for the millions of Americans with limited access or no access.

FQHC is used here as an overarching term for CHCs and other federally designated facilities including Migrant Health Centers, Health Care for the Homeless and Health Care for Residents of Public Health Housing. (see Health Center Program Terminology Tip Sheet For NCA Publications for HRSA description <http://bphc.hrsa.gov/technicalassistance/healthcenterterminologysheet.pdf>).

They have multiple requirements including:

- Located in Health Professional Shortages Area or Medically Underserved Areas
- May have satellite clinics in other communities, mobile clinics or school based clinics
- Provide a sliding fee schedule based on family incomes and size for patient payment
- Receive cost based reimbursement for Medicaid and Medicare
- Clinics must provide or have agreements to provide: Primary Care, Behavioral Health and Dental Health Services. Many times these services are provided at the same location.

- Incorporate case management into all services
- Develop health care plans for their unique region
- Develop relationships and agreements with various organizations to provide comprehensive care for patients. Services may include outreach, transportation, radiology, pharmacy, preventative education, emergency care, and basic lab services.
- Governing board must have 51% of its members as consumers of the clinic services and the board should represent the demographics of the service region.

Where are They?

The location of FQHC's and their satellite locations are available in the HRSA Data Warehouse. Go to <https://datawarehouse.hrsa.gov/sitesdetail.aspx>. On this site you will be able to locate maps and reports on the different types of FQHCs in your region.

Why Should We Include FQHC Staff in Our Target Audiences?

Although, many veterans/service members and their families receive their care directly from a Department of Defense (DoD) healthcare facility, military personnel and their families may seek health care from multiple sources to meet their increased social and clinical needs.

Service members and their families not covered by the Veterans Administration (VA) or DoD rely on private or government-funded civilian insurance programs and frequently seek care in civilian settings such as federally qualified health centers. Just like other healthcare providers, health professionals in FQHC's may not be aware of the veterans/service members and the families that they serve.

Tips on Working With FQHCs

Working with FQHCs can be challenging as they are structured differently than other clinics. The organizations include a multi-disciplinary clinical workforce that treats patients through a culturally-competent, integrated care system that is accessible. The organization can be complex with multiple people to contact.

FQHCs are generally run by an Executive Director who oversees the organization and a Medical Director overseeing clinical services. Based on size, additional leadership positions include but are not limited to Chief Operating Officer, Human Relations Director, Dental Coordinator, etc.

Establishing a relationship with the FQHC is key and utilizing multiple points of contact may be necessary. Key points to remember:

- Clinics will have a variety of staff. Always check with the Medical Director to see if they can provide you with information on their partnering organizations so you can invite them to your trainings. (If the clinic has an agreement with a local pharmacy, invite them to your programs)
- Extended hours are required at FQHCs, so offering training just for that clinic may be necessary and may need to be repeated to meet staff needs.
- The clinic has extensive data on its patient mix. You may be able to get additional information on patient types to assist in program development and/or refining speakers' comments.
- Many centers have designated training times each month and may incorporate other FQHCs in the region. Most of these training times will be limited to one to two hours.
- FQHCs are highly involved in Quality Improvement projects. Be sure to check with the Medical Director or Executive Director as to what current projects they have and see if your program can fit into those projects or needs.

PCA/PCO

Federally Qualified Health Centers (FQHCs) around the country, particularly community health centers and rural health clinics, are organized in states and regions as membership-directed Primary Care Associations (PCA) under the oversight and guidance of HRSA's Bureau of Primary Health Care (BPHC) and the National Association of Community Health Centers (NACHC).

Additionally, each state has an agency designated as a Primary Care Office (PCO). PCAs and PCOs receive funding from a number of sources including HRSA to monitor and advocate for access to primary care services throughout the state and to assist in providing technical assistance to FQHC's in the state.

For a list by state of PCAs check this site: <http://bphc.hrsa.gov/technicalassistance/partnerlinks/associations.html>. For PCOs check this site: <http://bphc.hrsa.gov/technicalassistance/partnerlinks/stateprimarycare.html>

PCA/PCOs act as advocates for community-based health care programs with a focus on FQHC's. PCA/PCOs play a vital role in educating federal, state and local policymakers about issues relating to health care and the role of the health center. These organizations can be instrumental in bringing agencies and key persons together to improve interaction by the regions providers.

PCA/PCOs are great potential partners for AHECs to co-sponsor and market VMH CE offerings including state-wide initiatives.