

Department: Health Department **Program Contact:** Adrienne Daniels
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Proposed
Related Programs:
Program Characteristics:

Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Administration and Operations Program provides pivotal administrative, operational, and financial oversight of the Health Center program by developing and implementing fiscal accountability programs and access to health care. This includes teams and staff who help implement workflows, quality evaluations, financial reporting, patient engagement strategies, and workforce support.

Program Summary

This program supports services within the project scope of the BPHC grant. BPHC funding requires strict adherence to federal laws mandating which services must be provided by FQHCs, which results in additional Medicaid revenue.

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Activities supported in this program include developing and implementing fiscal accountability and monitoring infrastructure, management of revenue cycle activities, implementation of strategic projects, support for operational workflows to increase patient access to care, and projects designed to improve health outcomes. Examples of this type of work include support for transitioning and training clinical teams to expand virtual care, designing patient communication campaigns for managing chronic diseases, and designing reporting materials to reflect operational needs in fiscal and value based pay systems.

Performance Measures

| Measure Type | Primary Measure | FY21 Actual | FY22 Budgeted | FY22 Estimate | FY23 Offer |
|--------------|--|-------------|---------------|---------------|------------|
| Output | Medical Coding Accuracy: % of claims accepted by insurance partners | N/A | N/A | N/A | 95% |
| Outcome | % of patient communication materials are developed in the top five patient languages | N/A | 100% | 100% | 100% |
| Outcome | Completion of annual strategic planning activities and three year plan in alignment with CHC Board's vision. | 100% | 100% | 100% | 100% |

Performance Measures Descriptions

Medical Coding Accuracy: improves insurance billing and payment rates, which supports fiscal sustainability.
 Patient Communication: providing accessible materials in prevalent languages improves patient experience, health promotion, and effective disease management.
 Strategic planning: All FQHCs are required to complete strategic planning every three years, which should include both operational, fiscal, and facilities planning in partnership with the Community Health Center Board.

Legal / Contractual Obligation

Quality services are a requirement of the Bureau of Primary Health Care's 330 Grant. Services in the scope of the grant and health center program must follow the HRSA Community Health Center Program's operational, fiscal, and governance requirements. The program is also accredited under The Joint Commission and follows TJC accreditation guidelines. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

Revenue/Expense Detail

| | Adopted General Fund | Adopted Other Funds | Proposed General Fund | Proposed Other Funds |
|-------------------------|-------------------------|------------------------|--------------------------|-------------------------|
| Program Expenses | 2022 | 2022 | 2023 | 2023 |
| Personnel | \$5,006,123 | \$1,117,419 | \$0 | \$7,272,998 |
| Contractual Services | \$118,000 | \$0 | \$0 | \$224,500 |
| Materials & Supplies | \$148,462 | \$2,492 | \$0 | \$123,125 |
| Internal Services | \$1,833,509 | \$148,754 | \$0 | \$1,953,711 |
| Total GF/non-GF | \$7,106,094 | \$1,268,665 | \$0 | \$9,574,334 |
| Program Total: | \$8,374,759 | | \$9,574,334 | |
| Program FTE | 31.45 | 9.35 | 0.00 | 46.40 |

| Program Revenues | | | | |
|---------------------------|--------------------|--------------------|------------|--------------------|
| Intergovernmental | \$0 | \$1,051,965 | \$0 | \$1,120,963 |
| Other / Miscellaneous | \$1,433,333 | \$216,700 | \$0 | \$1,887,481 |
| Beginning Working Capital | \$1,450,000 | \$0 | \$0 | \$1,450,000 |
| Service Charges | \$4,222,761 | \$0 | \$0 | \$5,115,890 |
| Total Revenue | \$7,106,094 | \$1,268,665 | \$0 | \$9,574,334 |

Explanation of Revenues

This program generates \$977,492 in indirect revenues.

Administration and Operations activities are funded with HRSA grant revenue, Medicaid fees, and quality incentive payments. Program leadership are working with CCO's to develop sustainable funding for quality assurance, data reporting work.

- \$ 5,373,786 - FQHC Medicaid Wraparound
- \$ 1,120,963 - Federal Primary Care (330) grant
- \$ 3,079,585 - Medicaid Quality and Incentives

Significant Program Changes

Last Year this program was: FY 2022: 40034 ICS Administration, Operations, and Quality Assurance

Beginning in mid-FY 2022, the FQHC revenue and expenses were transferred from the General Fund into a newly created FQHC Enterprise Fund which is shown in Other Funds. Additional staff FTE to support project management and financial reporting were added to this program in FY23. Two roles previously included in the Medical Director program offer are also now represented in this program offer as they support project management activities (total change of +5.6 FTE between new and transferred staff roles).