

# FQHC Quality and Outcomes Initiatives

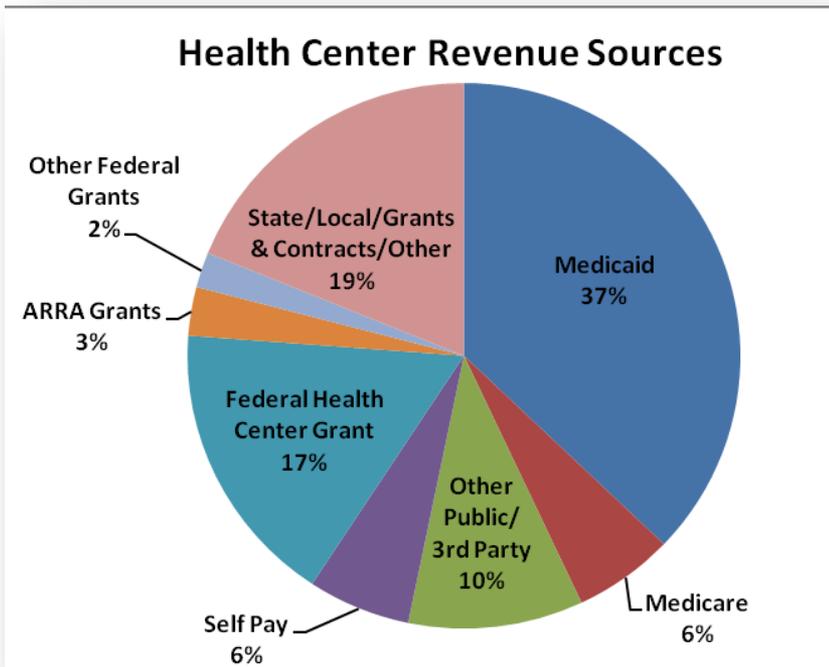
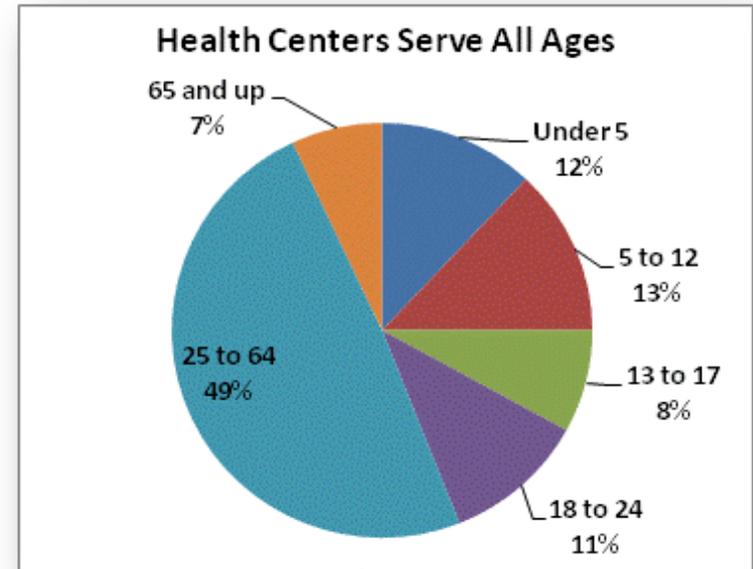
Marti Wolf, RN, MPH  
Clinical Programs Director  
NCCHCA



# FQHCs 2009 (National)

## 18.8 Million Patients

- 92% At or Below 200% Poverty
- 38% Uninsured
- 63% Racial/Ethnic Minorities
- Over 1 Million Homeless Individuals
- 865,000 Migrant/Seasonal Farmworkers
- 165,000 Residents of Public Housing



## 73.8 Million Patient Visits

- 1,131 Grantees – half rural
- 7,900+ Service Sites

## Over 123,000 Staff

- 9,100+ Physicians
- 5,700+ NPs, PA, & CNMs

# Health Center Performance Calendar Year 2009 (National)

Among Health Center Patients:

- 67.3% entered prenatal care in the first trimester
- Rate of low birth weight babies (7.3%) continues to be lower than national estimates (8.2%)
- 68.8% of children received all recommended immunizations by 2nd birthday
- 63.1% Hypertensive Patients with Blood Pressure  $\leq$  140/90
- 70.7% Diabetic Patients with HbA1c  $\leq$  9
- \$600 Total Cost per Patient
- \$131 per Medical Visit

<http://www.bphc.hrsa.gov/about/performanceasures.htm>



# Health Center American Recovery and Reinvestment Act Outcomes

What have we accomplished so far?

More than 2.7 million new patients served

More than 1.5 million new uninsured patients served

More 10,000 health center jobs added in 2009

What's next?

1,600+ New or Improved Health Center Sites

650+ Health Centers with new equipment or health information technology systems

380+ Health Centers with new/enhanced certified EHRs



# FY 2011 HRSA Strategic Priorities

## Improve Access to Quality Health Care and Services

- Community/new site development

- Expansion planning

- Patient-centered medical/health home development

## Strengthen the Health Workforce

- Workforce recruitment and retention

- Meaningful use adoption

## Build Healthy Communities and Improve Health Equity



# How did we get here?

Ever increasing focus on Quality

## Administrative Quality

- Cost per patient- annualized
- Cost per encounter
- Assets to Expenses, etc \$\$ gobbledy -gook

## Clinical Quality



# Quality

UDS reporting

Trimester of entry into care

Birth Weight

Asthma

Diabetes



# Quality Initiatives in FQHCs

Clinical Measures

OPR data sets

Health Disparities Collaboratives

Patient Safety and Pharmacy Collaborative

Clinical UDS, Health Care/Business Plan



# Quality Initiatives in FQHCs

## Common Themes

- Care Delivery Models
- Process and Systems Focus
- Roles and Responsibilities
- Community Relationships
- Culture of Quality



# External Drivers of Quality

HEDIS

Joint Commission

IHI



# Quality Initiatives in FQHCs

Patient Centered Medical Home

Meaningful Use



# Partners in Quality

CCNC

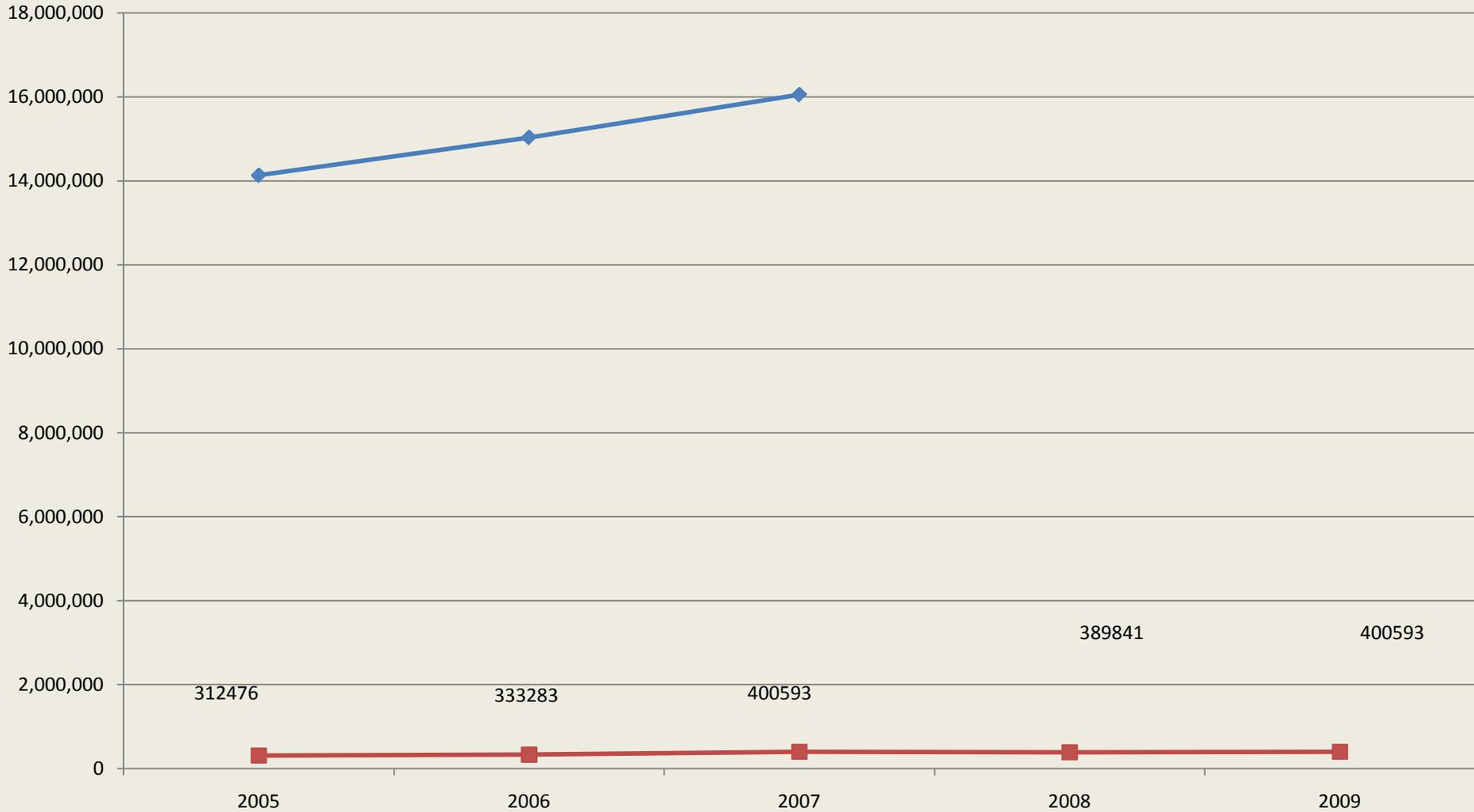
IPIP

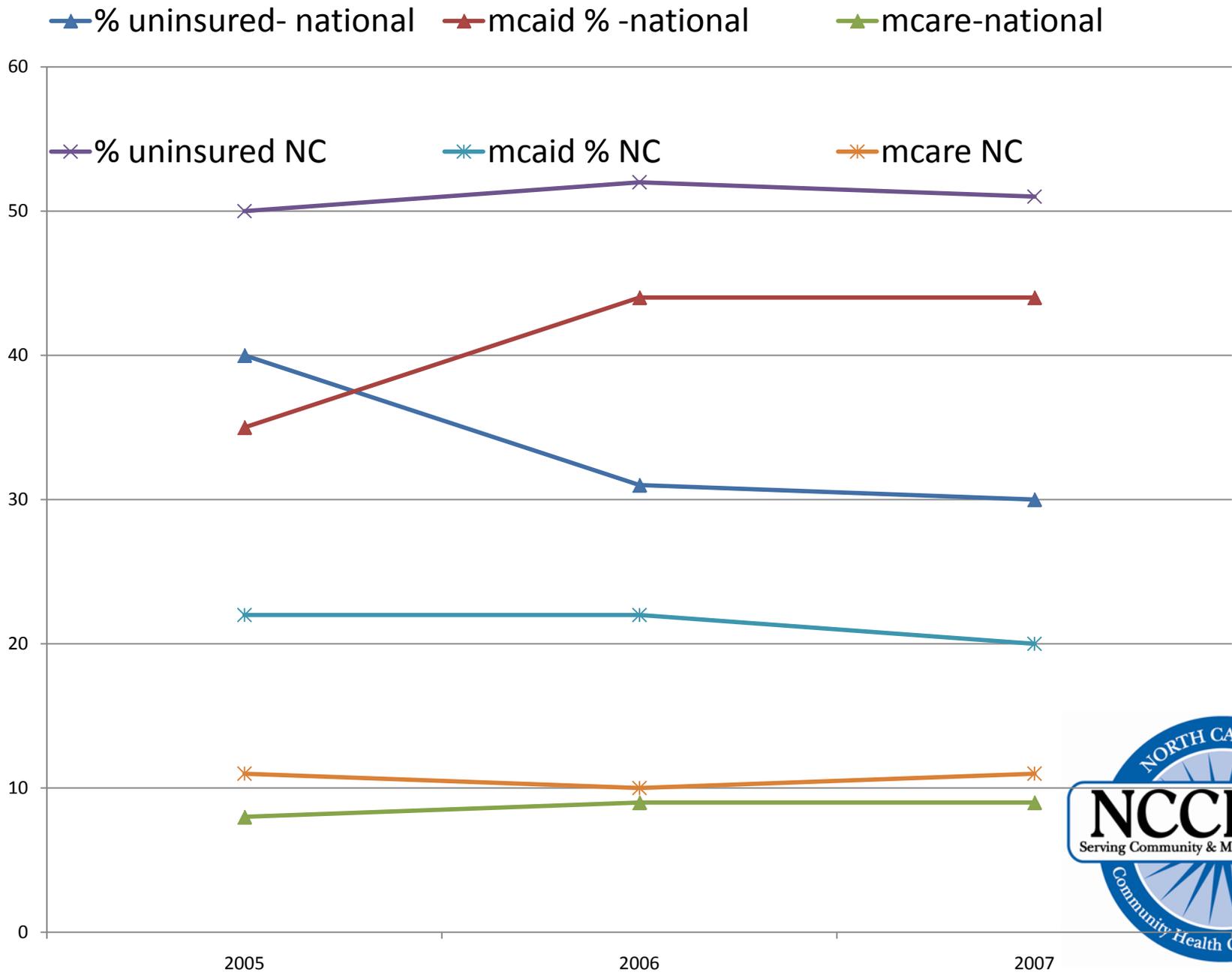
AHEC REC



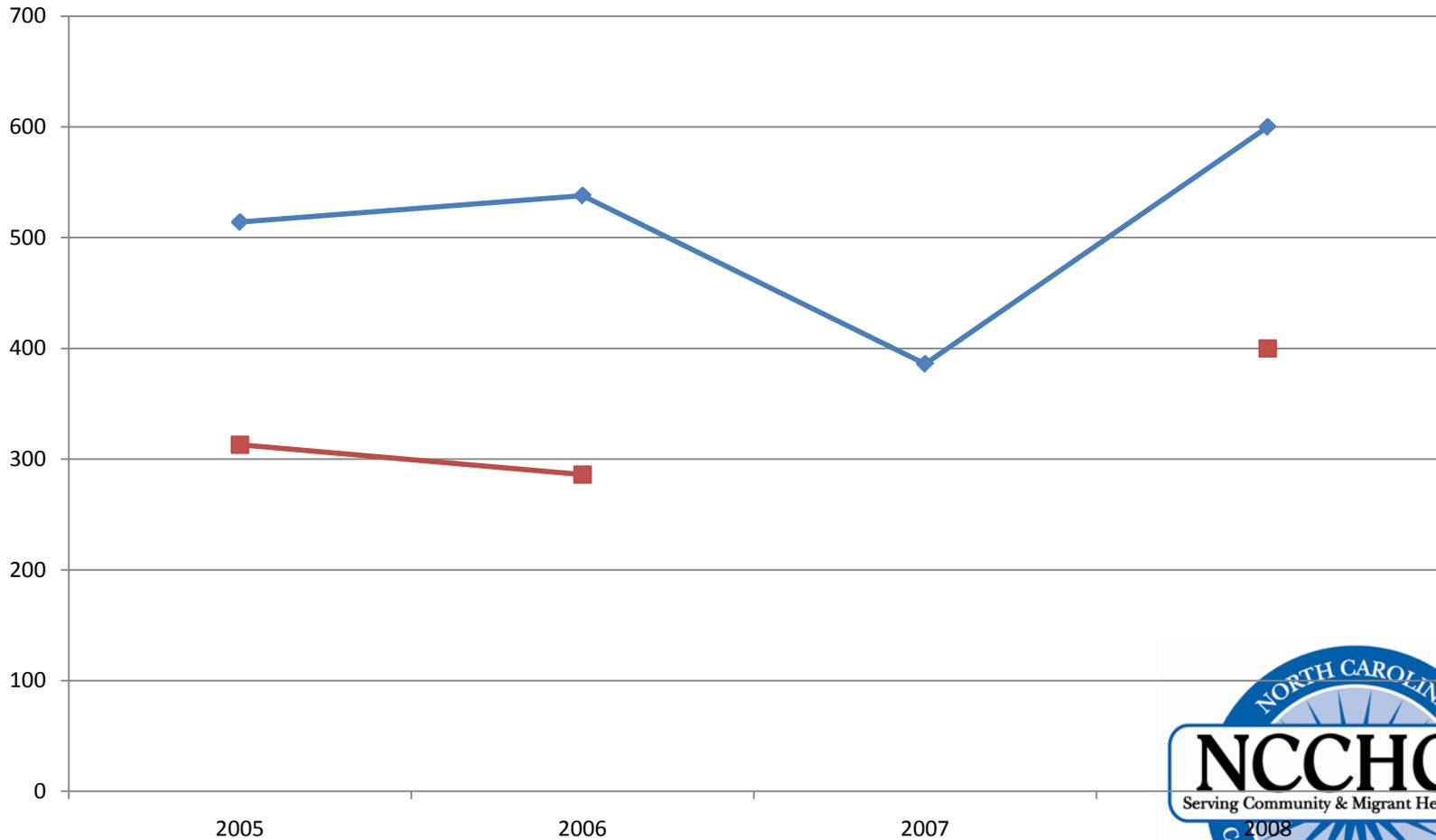
—◆— national unique patients

—■— NC unique patients

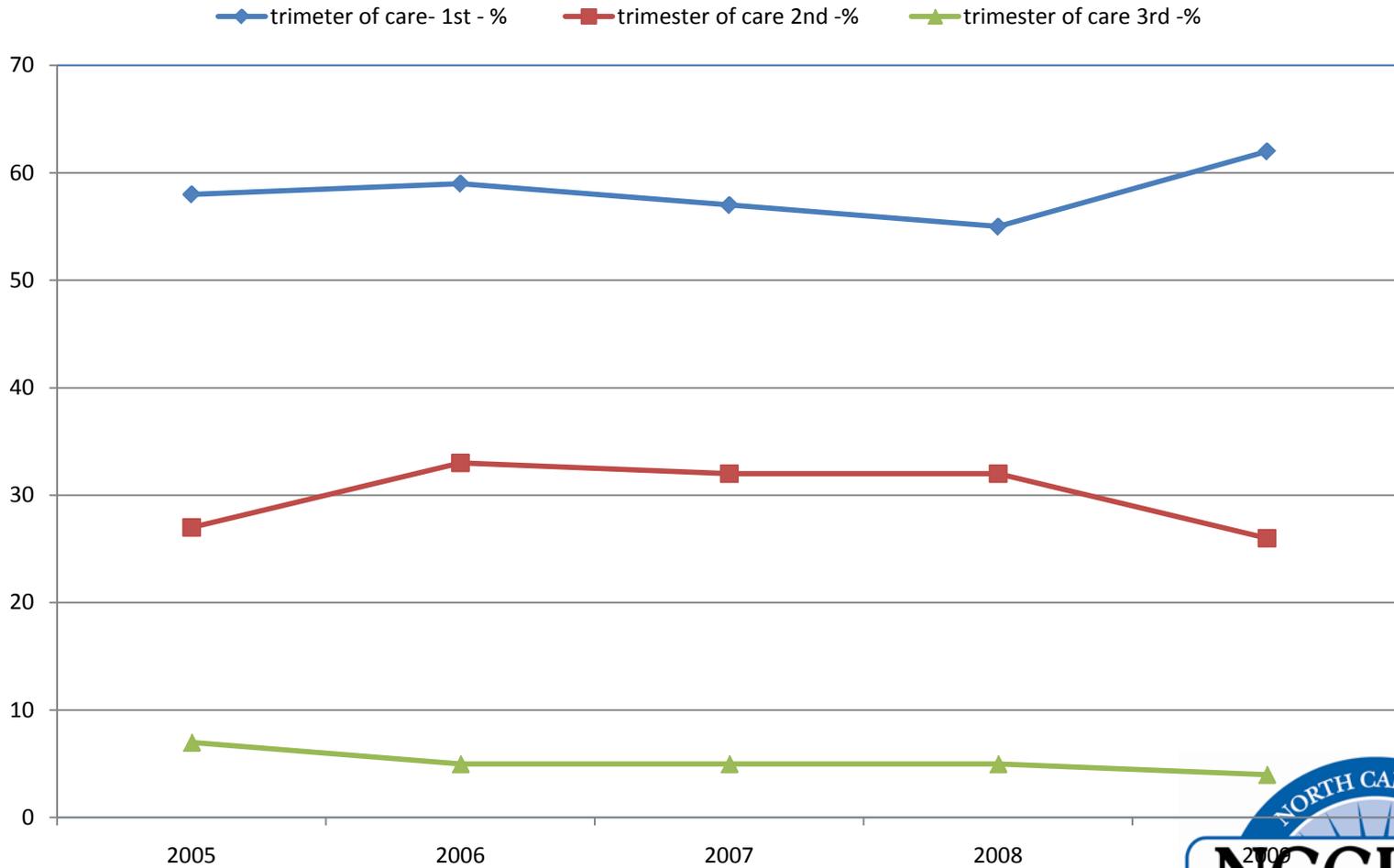




- ◆ National medical cost per user
- NC medical cost per user



# NC



◆ % uninsured- national

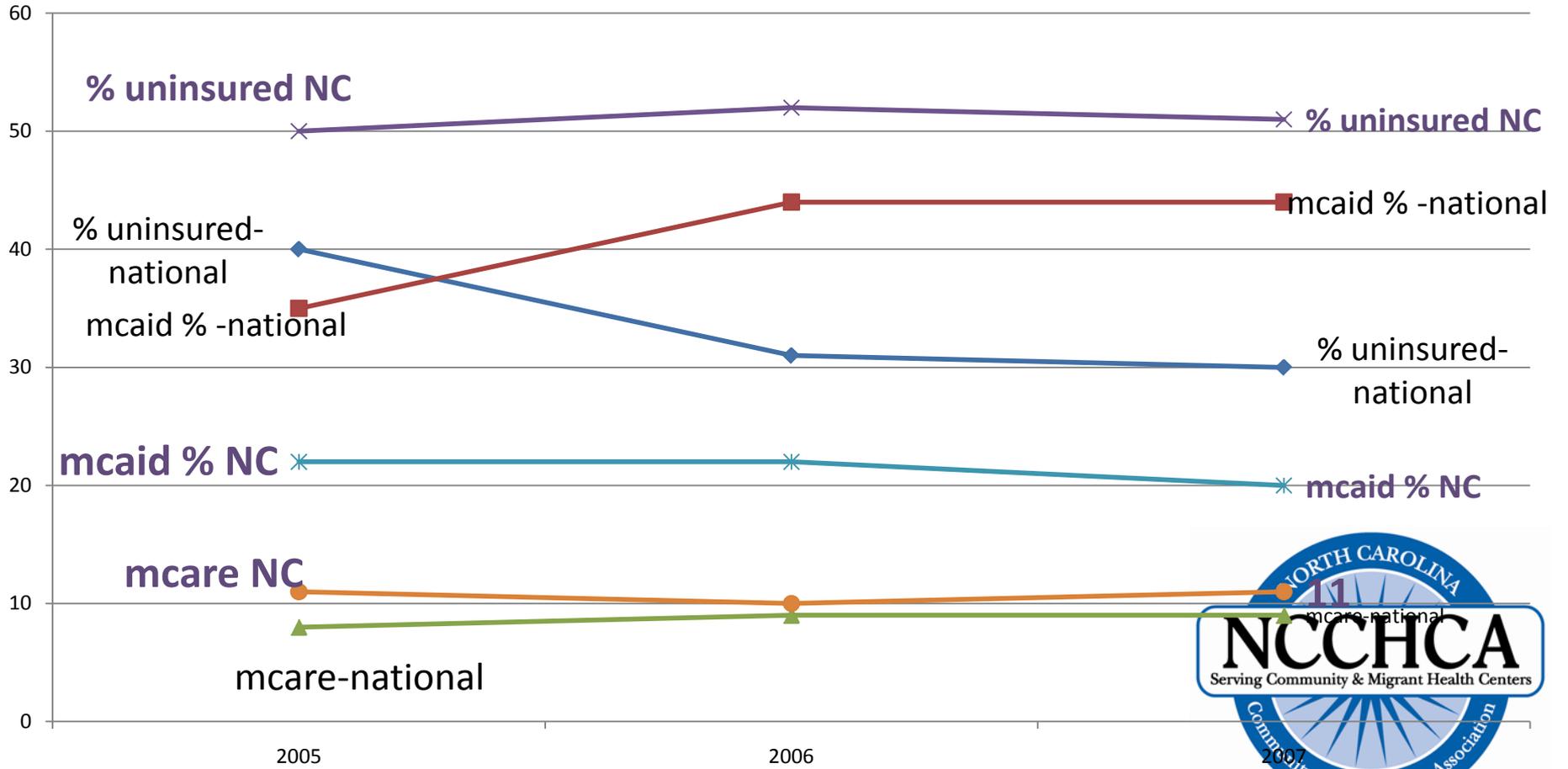
■ mcaid % -national

▲ mcare-national

× % uninsured NC

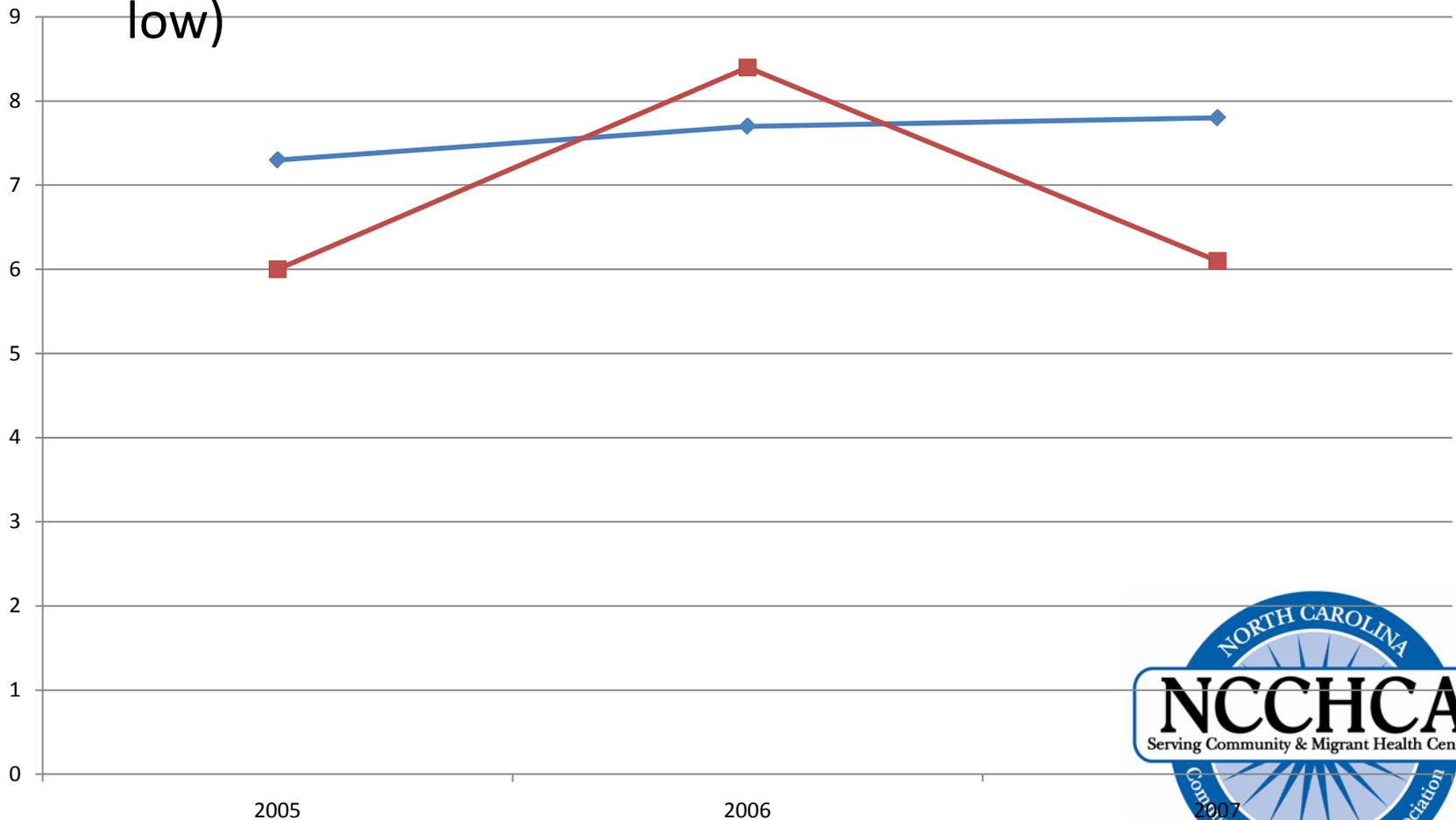
\* mcaid % NC

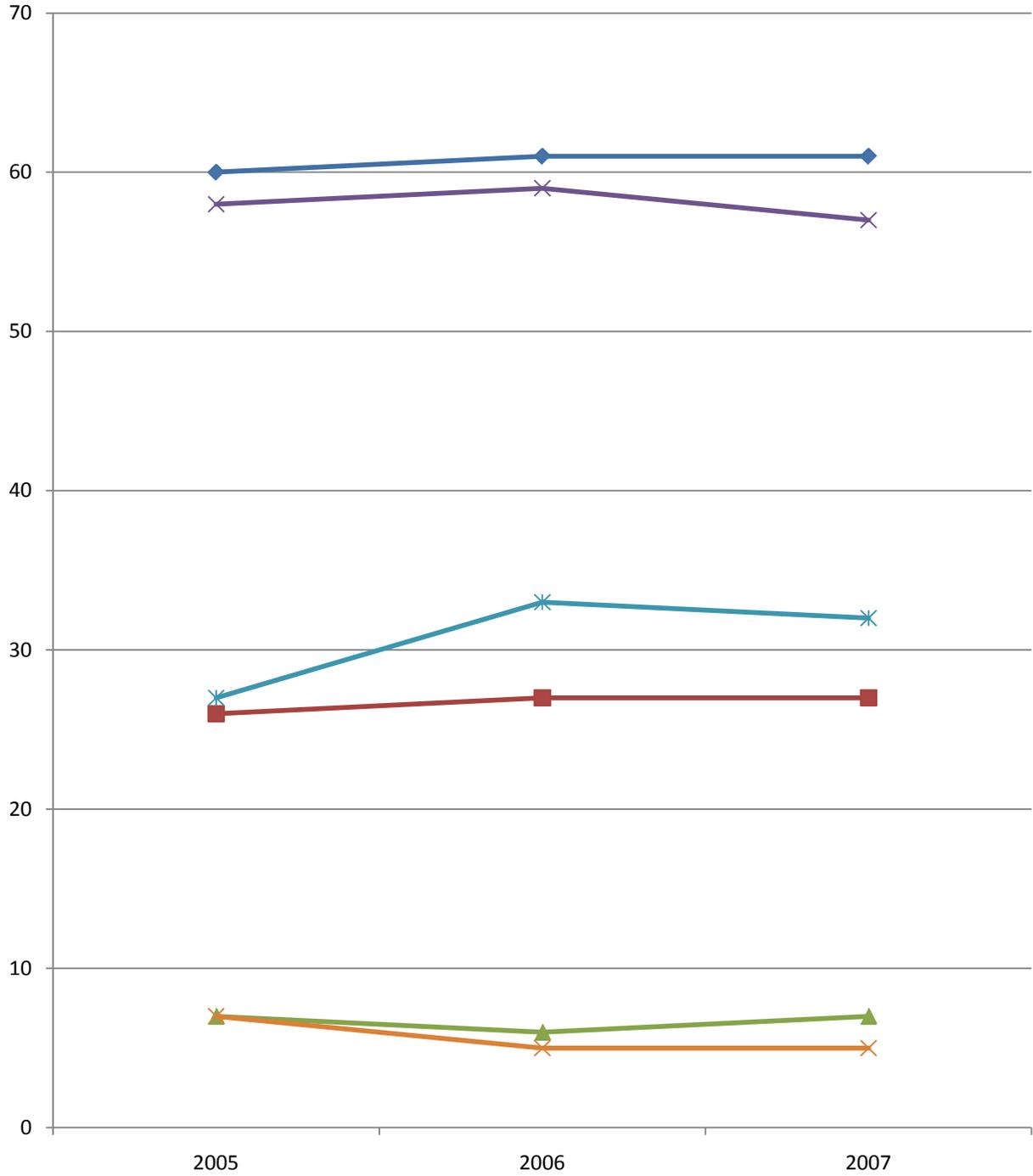
● mcare NC



◆ NATIONAL less than 2500 g birth wt - % of all births (low and very low)

■ less than 2500 g birth wt - % of all births (low and very low)

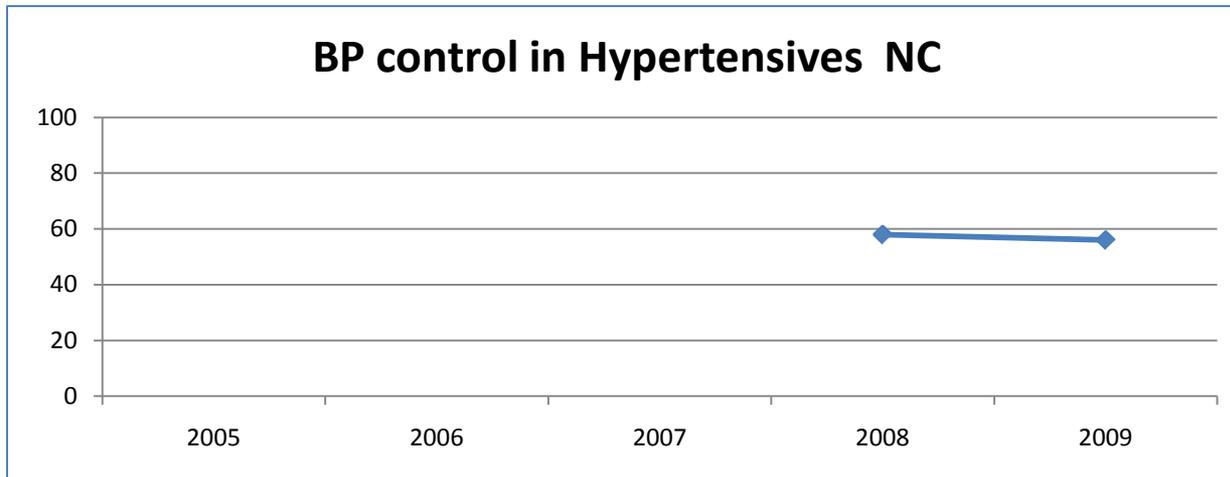
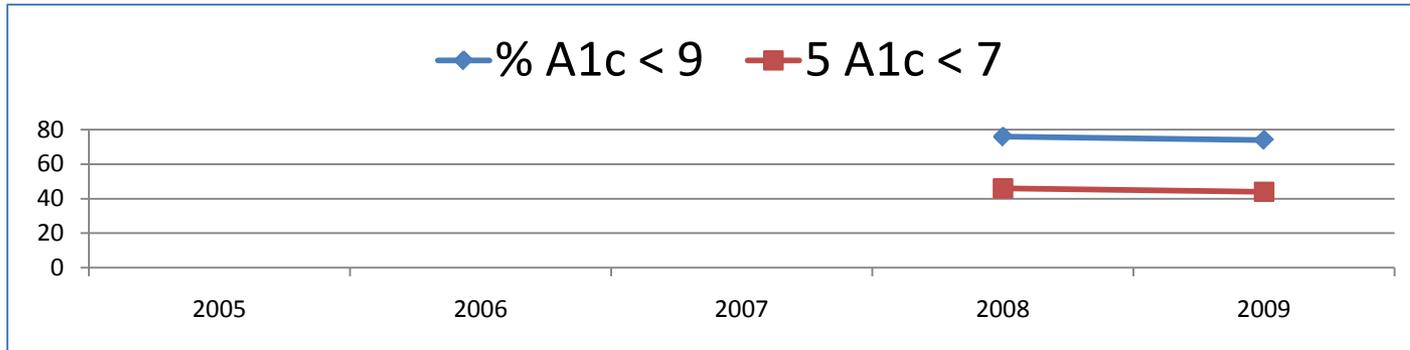




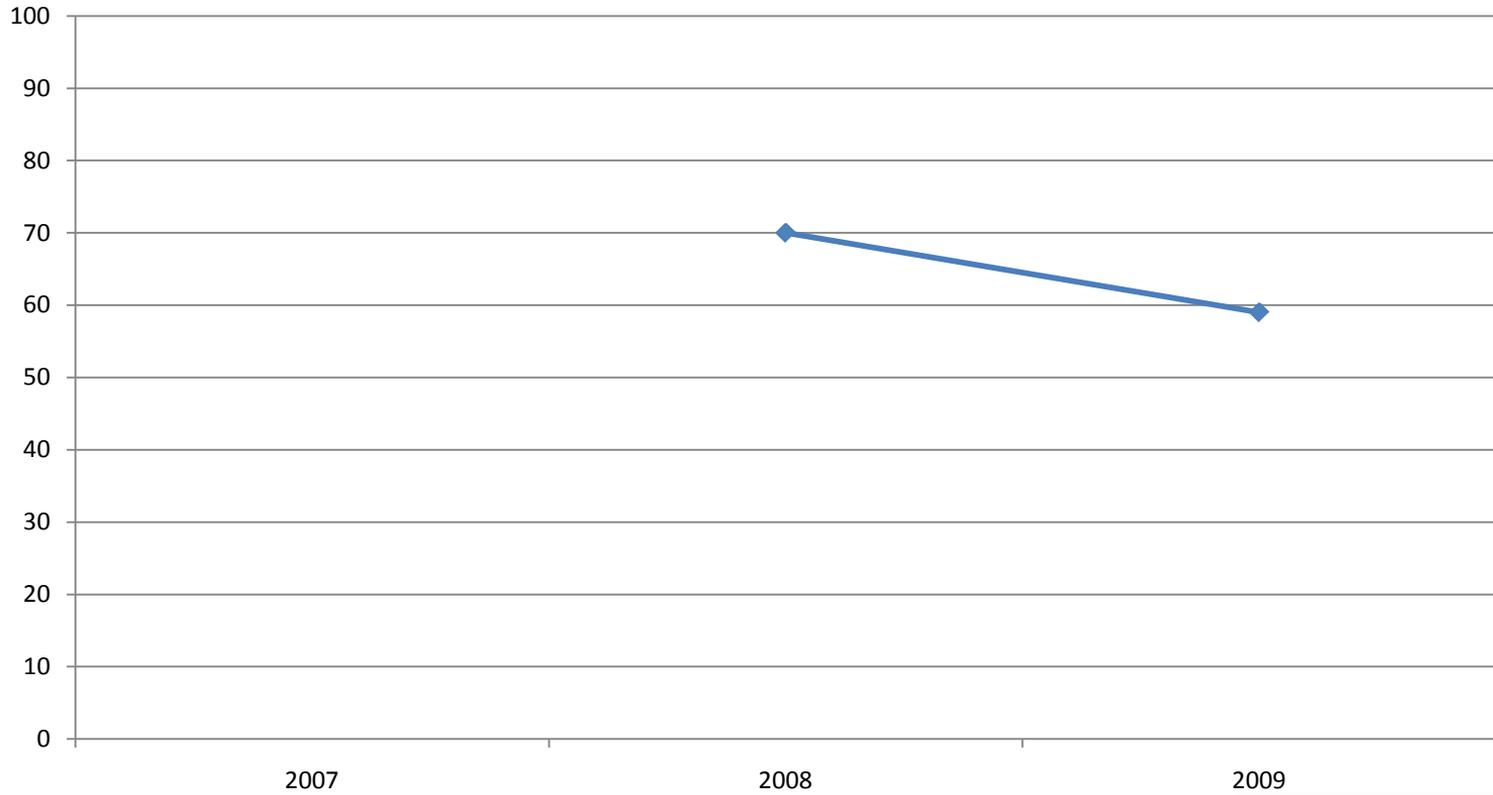
- ◆ NATIONAL trimester of care- 1st - %
- NATIONAL trimester of care 2nd -%
- ▲ NATIONAL trimester of care 3rd -%
- × trimester of care- 1st - %
- \* trimester of care 2nd -%
- × trimester of care 3rd -%

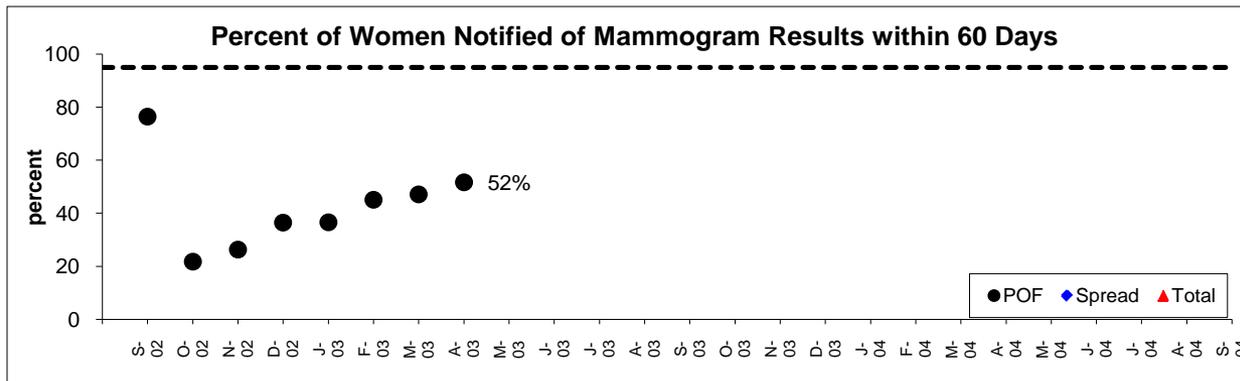
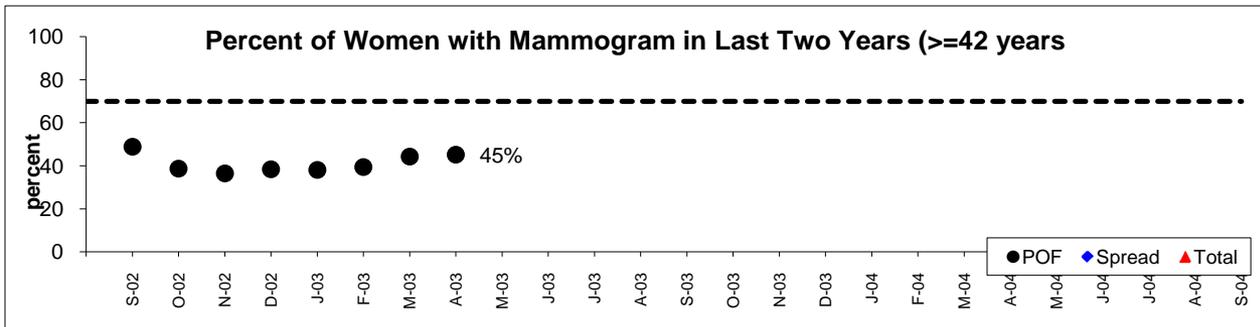
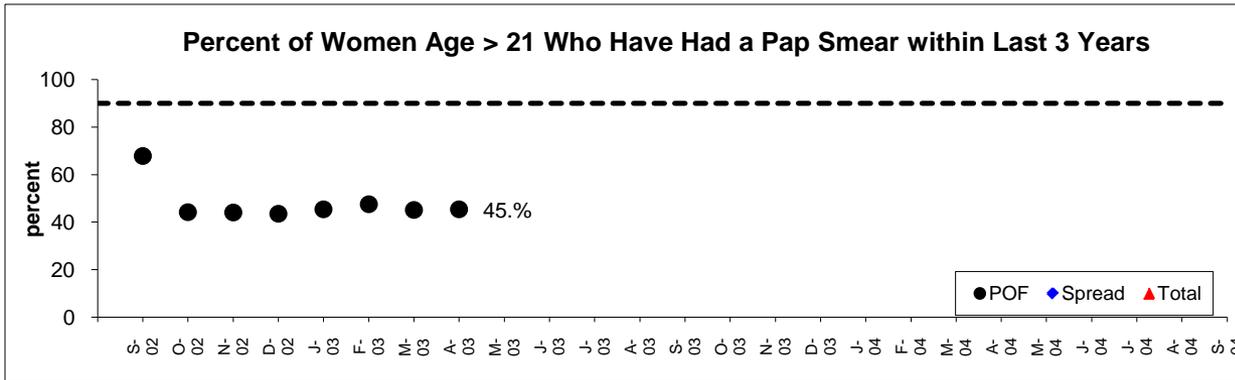


# NC Only

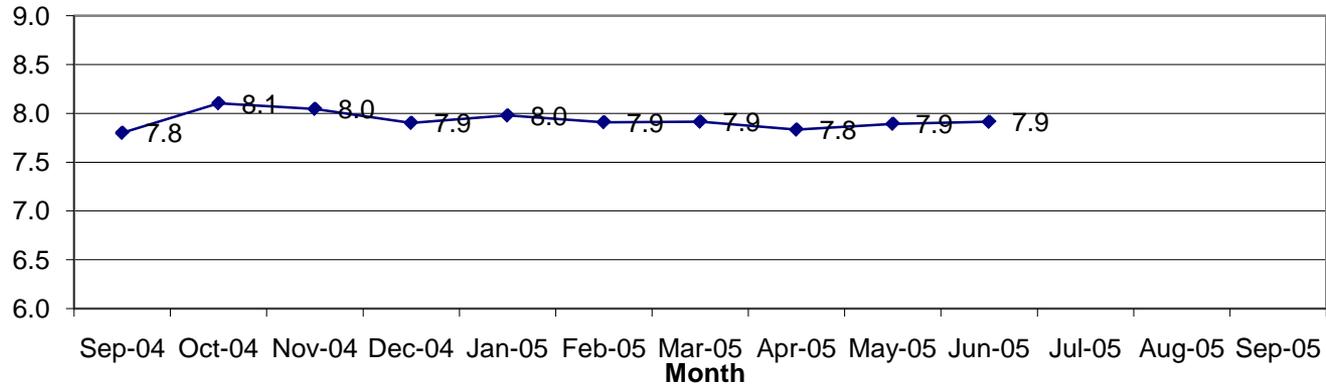


## immi age 2- %





Avg A1c



% bp control in CV and DM registries

