

NACHC Primary Care Association and Health Center Controlled Network Conference 2019
General Session: The Latest from DC and Pressing Issues from the States
November 18, 2019 - San Diego, California

Discussion Summary and Key Themes

The November 18th Opening General Session affirmed the relevancy of five priority areas requiring aligned, strategic action at the national, state/regional, and local levels:

1. Workforce Shortages and Turnover
2. Limited Financial Resources
3. System Disruption
4. Competition
5. Emerging Public Health Issues

The Session also identified recommendations for future health center expansion, prioritizing:

1. Infrastructure Investment in Existing Health Centers and
2. Expansion of Quality Improvement Programs and Systems

These themes were explored in greater detail with input from Session participants. See detailed summary below.

Background and Methods

NACHC hosted the 2019 Primary Care Association (PCA) and Health Center Controlled Network (HCCN) Conference, November 18-20, 2019 in San Diego, California for over 335 attendees. This conference was designed to strengthen relationships and share knowledge among these leaders in the health center movement. The conference theme was “Successfully Navigating the Future of Health Care Delivery: Today, Tomorrow, and Beyond.”

With participants from PCAs, HCCNs, National Cooperative Agreement (NCA) partners, representative health centers and other stakeholders, the November 18th opening session began with a federal, regulatory, research and advocacy update from NACHC staff. The next portion of the session was a facilitated, interactive discussion to promote peer networking and enable NACHC to collect real-time field feedback to inform its strategic planning.

The session included interactive audience polling through the NACHC mobile application, small group discussion, and a feedback activity using a “Pop-up Listening Wall”. The Pop-Up Listening Wall aligned with the conference theme and depicted a map of the United States where participants could post their key issues and their ideas for addressing the issues.

The session challenged participants to address questions, listed below. These questions related to *expansion* of the health center program in the future and *pressing issues and supports needed* to support health centers over the next 5 to 10 years.

Expansion

- If you could **expand** the health center program to serve patients in the next five to 10 years, what would that look like?

Pressing Issues in the States and Supports Needed

- What are your top issues in your state/region?
- If additional financial or non-financial supports were made available to health centers over the next 5 to 10 years, which would be most effective and what would be the result?
 - How would you describe these supports in the context of Expansion?

In addition to the questions noted above, participants were encouraged to post responses to the following questions on the Pop-up Wall during the session and throughout the conference:

- What are the strategic components of your state plan (PCAs) or business plan (HCCNs), or “playbook”, that are critical in addressing your top issues?
- In what areas and in what manner, do you seek NACHC’s assistance or recommend NACHC involvement?

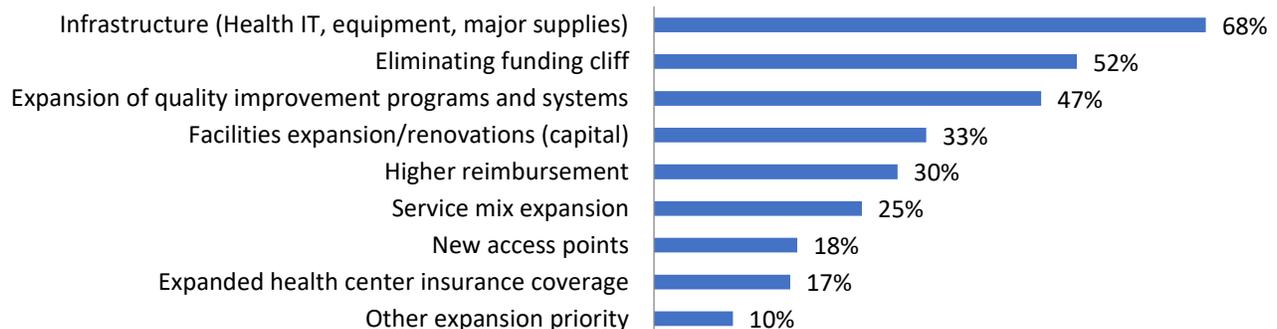
Results

The session was lively and interactive with over 100 respondents to each of the polling questions, nearly 150 comments added to the Pop-up Listening Wall, and discussions in small and large groups. This document summarizes the feedback provided both during the session and posted to the Pop-up Listening Wall during the entire conference.

Expansion – Responses Summary

Discussion on this topic began with an audience poll (Exhibit A).

**Exhibit A. Responses to Poll: If you could expand the health center program to serve patients in the next 5-10 years, what would that look like?
Pick your top 3. (Total Votes: 341)**



A key theme from the large group discussion reflecting on audience poll results, shown in real time, was health centers need to “get back to basics” by:

- Strengthening health centers’ internal systems to position them for future expansion, especially expansion of services.
- Prioritizing strategies to focus on bolstering fundamentals before adding on more sites and services.

Pressing Issues in the States and Supports Needed – Responses Summary

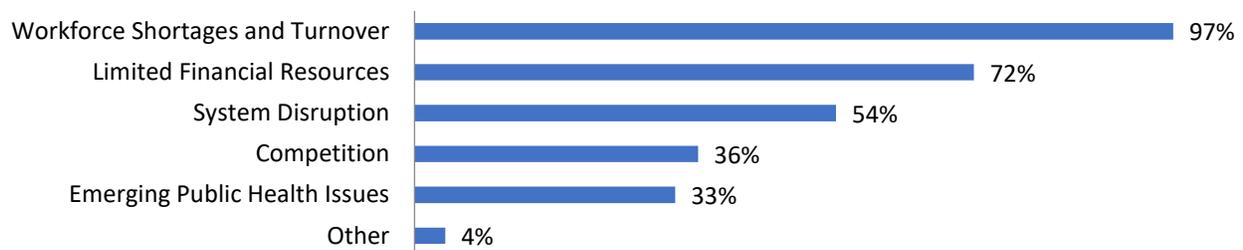
This session began with an overview of the following five key health center issues NACHC leadership identified as most relevant issues for health centers over the next 5 to 10 years.

- **Clinical and non-clinical workforce shortages and turnover:** pipeline development; recruitment; engagement; retention; competency and innovation in the context of health centers’ integrated model.

- **System disruption:** partisanship; uncertain status of the Affordable Care Act; state empowerment for Medicaid expansions; growing federal debt.
- **Competition:** hospital/regional health care system market domination; hospital/health plan/provider network mergers; retail clinics and primary care start-ups.
- **Limited financial resources:** funding cliff uncertainty; reimbursement models in transition; investments needed to transition care models from volume-based to value-based payment models.
- **Emerging public health issues:** health centers addressing the nation’s biggest public health crises (e.g. Zika outbreak, ending HIV, opioid disorder epidemic, natural disasters, etc.); evolution of current model toward an adaptive and sustainable approach ready to respond to urgent health priorities as they arise.

While discussing these issues, participants used the audience polling application to rate the relevancy of these issues to their health centers. These polls yielded a range of 102 to 114 total respondents (Exhibit B).

Exhibit B. Responses to Poll: Please pick your top 3 Strategic Topics below based on which topic is the biggest threat to the health center program in your state, region, or market area?



A summary of input on each of these five issues is organized below in order of the most to least polled votes by session respondents. Most key themes are paraphrased from a synthesis of multiple, similar posts to the Pop-Up wall and notes from small and large groups discussions. *Direct quotes are included in italics.*

1. Workforce: Most relevant (97% of votes for Top 3 issues; 96% rated Very Relevant)

Key Themes from Comments

- Increasing financial resources (loan repayment and funding for higher salaries) to recruit and retain staff.
 - PCAs need support with understanding best practices and training curricula on new loan repayment programs and changes to existing programs at both the federal and state levels.
 - (Our health centers are) *competing for trained/skilled staff against hospital systems – (there are not enough providers especially in rural areas).*
- Providing professional development opportunities to health center staff.
 - These needs include training and technical assistance on specific topics and funding to cover staff time and resources required for staff to participate in professional development.
 - Topics include new models of care (e.g. team-based care), reducing staff burnout across all positions and roles and increasing wellness, and bringing these concepts together by:
 - *Increasing awareness and practice on resilience and self-care including supportive work environment (team-based).*
- Growing the pipeline of qualified and interested health center staff.
 - Establishing new partnerships with a broader range of organizations (e.g. medical associations and medical schools).
 - Understanding best practices for creating workforce pipelines from within the health center, i.e. “grow your own” programs, especially for medical and dental assistants.
 - *BHW (Bureau of Health Workforce should provide) funding directly to PCAs to support “grow your own” strategy at health centers.*

- Expanding the ability of health centers to be reimbursed for services provided by a broader range of health center staff.
 - *PCAs need funding for advocacy and training and technical assistance on how to change licensure and reimbursement policies to enable a broader range of behavioral health providers to work in health centers.*
- Engaging health center leadership in the importance of an intentional, long-term, organizational workforce strategy beyond loan repayment programs.
 - *Health centers need to place an organizational priority on intentional workforce strategies.*

2. Limited financial resources: Most relevant (72% of votes for Top 3 issues; 72% rated Very Relevant)

Key Themes from Comments

- Eliminating the funding cliff.
 - *Health centers need steady funding with targeted, additional funds for particular issues.*
- Supporting health centers in the shift from volume to value in its care models.
 - Health centers need investments to change its care models by understanding best practices for models, quantifying financial viability of the models, and training staff to implement new models.
- Working with state Medicaid programs to shape optimal payment models and understand the value proposition of primary care to support increased reimbursement.

3. System Disruption: Most relevant (54% of votes for Top 3 issues; 53% rated Very Relevant)

Key Themes from Comments

- Sharing policy approaches to engage with state Medicaid programs considering 1115 waiver/1332 changes to Medicaid that negatively impact the communities served by health centers.
- Sharing innovative operational and payment models to thrive in value based payment environments.
- Supporting data analytics and interoperability required to demonstrate value to payers and improve population health management.
 - *(Health centers/PCAs need a) playbook/policy options to counter 1115 waiver/restrictions in Medicaid expansion.*
 - *(Health centers/PCAs need support with) model development that does not rely on fee-for-service, face-to-face encounters with a provider.*
 - *(Health centers need) more qualified staff to support data analytics and quality improvements.*

4. Competition: Most relevant (36% of votes for Top 3 issues; 50% rated Very Relevant)

Key Themes from Comments

- Conducting collective strategic planning for health centers to collaborate as a system and shape strategies to improve marketing efforts and increase financial investments in health center innovations in order to remain competitive.
 - *A cohesive system of care (with) ingenuity, financial support, and a seat at the table in this newly developing health care market.*
- Using data to monitor and improve operational and financial performance in order to be competitive.
- Reducing competition and improving collaboration between critical access hospitals and rural health centers through sound policy strategies.

5. Emerging Public Health Issues: Most relevant (33% of votes for Top 3 issues; 53% rated Very Relevant)

Key Themes from Comments.

- *Health centers need networked well-trained staff and comprehensive climate resilience plans.*

Other Issues (in addition to the 5 Issues identified above)

Key Themes from Comments

- Engaging and exchanging data with partners to improve health equity and address social risk/social

determinants of health in the community

- Using data to address social determinants of health and coding data (e.g. using ICD-10 z-codes) to document social risk to support improved reimbursement (e.g. for risk adjustment.) (Total Comments=3; 1 each from PA and OR; one noted for entire U.S.)

Conclusions

Relevant environmental factors or issues listed in order of priority are:

1. Clinical and Non-Clinical Workforce Shortages and Turnover
2. Limited Financial Resources to Health Centers
3. System Disruption
4. Competition
5. Emerging Public Health Issues

Key themes from posted comments across all the issues described:

- The need to strengthen and stabilize base grant funding rather than introducing new initiatives to increase sites and types of services. This emphasis reflects concerns with developing the workforce to tackle these issues and acquiring and optimizing the tools such as data analytics and exchange with partners to improve quality and reduce costs.
- Engaging partners as health centers consider how each will address the reality there are limited federal dollars and unlimited health center needs.

In small group discussions, many attendees expressed the sense the health center movement is at a pivotal moment in its history.

- Rooted in the Civil Rights movement, health centers may celebrate the recent awakening in the health care market to move health care services “upstream” to address social risk, prevention, and primary care health care needs.
- In contrast, health care financing lags behind this shift upstream and lacks a consistent and holistic approach that will enable health centers to adapt systematically as a cohesive network.
- Uncertainty in the system can penetrate throughout the health center network to each employee.
 - For example, some PCA leaders acknowledged the feeling of playing “air violin” (i.e. pretending to know more than they feel they do) when it came to explaining new value based care and payment models to their members.
 - The perpetual return of the funding cliff against a backdrop of mounting federal debt can cast a dark shadow over any long-term vision.

Small groups also discussed PCAs and health centers are experiencing a generational shift as many health center leaders are retiring or preparing to do so. They understand the need to embrace new models of care and compete in an evolving market, and they want to ensure the next generation of business-minded leaders are ready to thrive and adapt to changing market conditions—all while remaining true to the roots of the health center movement and the 29 million people who rely on it.

The issues discussed during the conference were nearly always described as complex and uncertain but not insurmountable if health centers can work collectively on innovative approaches with coordinated, strategic support from PCA, HCCN, and national partners.