



# New Mexico Primary Care Association Annual Conference

June 1, 2023

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Office of Health Center Program Monitoring

Health Resources and Services Administration, Bureau of Primary Health Care (BPHC)

Vision: Healthy Communities, Healthy People



# **BPHC Organizational Structure**

Office of the Associate Administrator

Division of Workforce Management

# Office of Strategic Business Operations

Optimize the use of data, technology, and communications to advance operational excellence, enable data-driven decisions that maximize efficiency and impact, and support a shared understanding of the value of the Health Center Program.

#### Office of Health Center Investment Oversight

Create a measurable and lasting impact to improve health outcomes, health equity, and Health Center Program performance through effective oversight of Health Center Program funding.

#### Office of Health Center Program Monitoring

Promote and support the health center model of care. OHCPM engages health centers and other stakeholders to optimize organizational performance, improve primary care outcomes, and advance health equity.

# Office of Policy and Program Development

Develop policies and programs that advance Health Center Program (HCP) impact and leadership.

#### Office of Quality Improvement

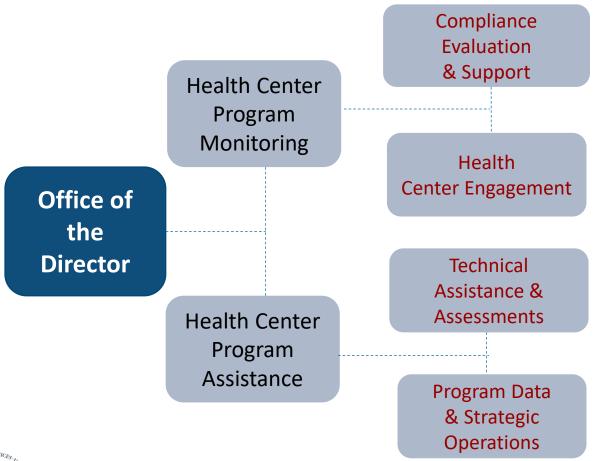
Advance the Health Center Program's mission and impact by enabling quality improvement and activating innovation in health centers through program initiatives, training and technical assistance, strategic partnerships, and program evaluation and research.





# Office of Health Center Program Monitoring (OHCPM)

## Organizational Structure and Purpose





Implement Monitoring Strategies that support:

- Compliance with Program Support
- Successful Implementation of Grants
- Recognized Leaders in Primary Care
- High Performing Grantees





#### **OHCPM Focus Areas**

#### Continuous Compliance Support and Excellence

Operational Site Visits





Health Center Engagement



Proactive Technical Assistance





Service Area
Competition/
Renewal Designation

Progressive Action Conditions





**Changes in Scope** 

**Prior Approval** 





Budget Period Renewal/Annual Certification





# **Operational Site Visit(OSV)** FY2023

#### **OSV Overview**

#### **Purpose**

Support HRSA's oversight of the Health Center Program

#### When

Conducted at midpoint of Period of Performance (PP)

#### **OSV Team**

Federal Representative(s) and consultants

#### **Type of visits**

- Traditional Onsite (2.5 days)
- Traditional Virtual (2.5 days)
- •New! Compliance and Engagement Model (2-3 days)

#### OSV Timeline

Initial Notification to Health Centers

4-6 months Prior to OSV ı

3 months Prior to OSV

OSV
Confirmation
Email

Pre-OSV call and
Preparation

nths 4-6 weeks
Prior to OSV

OSV

Operational Site Visit (Onsite or Virtual)

Resolution Opportunity

**Compliance** 

2-3 weeks Post OSV Final OSV Report

> 45 days Post OSV





# **Operational Site Visit (OSV): New Approach**

#### **Engaging Health Centers in Compliance and Excellence Approach**

#### **Framework of Pilot**

- Continuous Compliance
- Proactive Technical Assistance
- Reduce Compliance Findings

Support the Health Center
Model of Care and Operational
Excellence

#### Consists of:

**Streamlined OSV Process** 

- Pre-visit technical assistance
- Pre-visit desktop assessment
- One-day virtual
- Post OSV technical assistance

#### **Examines Potential Benefits and Outcomes:**

- Proactive Technical Assistance
- Fewer compliance findings
- Greater clarity during Compliance Resolution Opportunity (CRO) process
- Less health center staff time away from operational responsibilities







# **Operational Site Visit (OSV) Update**

Timeframe: 1/1/2023 - 05/26/2023

**OSV Statistics** 

**Total Number of Reports Completed:** 

85



Compliance Resolution
Opportunity (CRO)

Total Non-Compliant Elements: **562** 

Non-Compliant Elements Resolved through CRO:



Health Centers with 100% Compliance

**Total: 65** 

• Without CRO: 5

• With CRO: **60** 





# **OSVs** | Compliance Findings

# Timeframe: 1/1/2023 - 5/26/2023

Top 5
Compliance
Findings for all
Health
Centers



**Element a:** Providing and Documenting Services withing Scope of Project

Clinical Staffing

**Element e:** Credentialing and Privileging Records

- Board Authority
  Element c: Exercising Required Authorities and
  Responsibilities
- Clinical Staffing

  Element d: Procedures for Review of Privileges
- Sliding Fee Discount Program

  Element I: Evaluation of the SFD Program





# **OSVs** | New Mexico: Compliance Findings

Timeframe: 1/1/2023 - 05/26/2023

Top 5
Compliance
Findings for
New Mexico



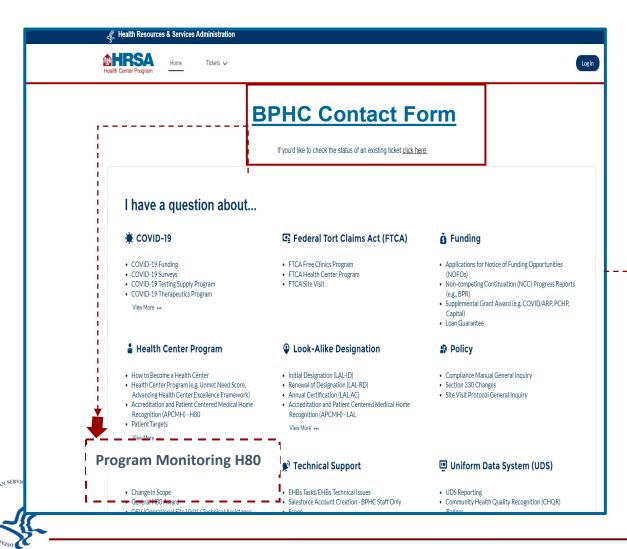
**Element d:** Adopting, Evaluating, and Updating Health Center Policies

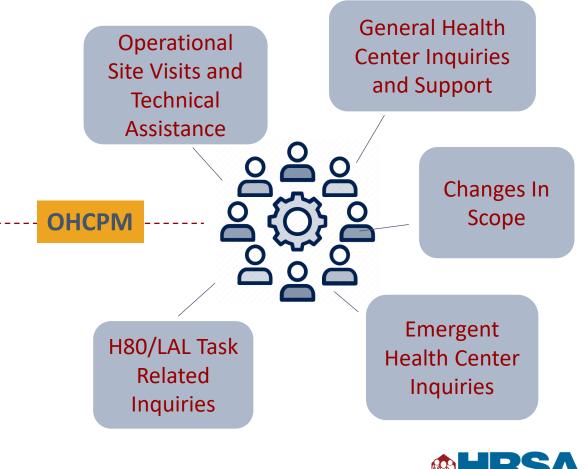
- Required and Additional Health Services
  Element a: Providing and Documenting
  Services withing Scope of Project
- Board Authority
  Element c: Exercising Required Authorities and
  Responsibilities
  - Board Authority
    Element e: Adopting, Evaluating, and Updating
    Financial and Personnel Policies
- Clinical Composition
  Element c: Current Board Composition





# **OHCPM** | Health Center Engagement Strategy





Health Center Program

# **Questions?**







## **Thank You!**

#### Angela R. Powell

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Bureau of Primary Health Care (BPHC) / Health Resources and Services Administration (HRSA)

Health Center Program Support

377-464-4772, 8 a.m. to 8 p.m. ET, Monday - Friday (except federal holidays)

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