

Protecting the Safety Net: Preparing for Health Care Reform Action Research Project

Overview: Mosaica: The Center for Nonprofit Development and Pluralism, received funding from Kaiser Permanente of the Mid-Atlantic States for the Protecting the Safety Net (PSN) Project, a community-based action research effort that is exploring how health care reform will affect the operations and financial sustainability of safety-net health care providers in metropolitan Washington that are not officially designated community health centers or federally qualified health centers (CHCs/FQHCs).

Community Need: Health care reform will create fundamental changes in the structure and delivery of health care. Implications are particularly significant for safety-net clinics serving the uninsured or under-insured, including undocumented and legal recent immigrants and refugees who are excluded from new options. Reform provides for expansion of CHCs/FQHCs. However, many free clinics and other non-FQHC clinics are unable or unwilling to become FQHCs because of factors such as geographic limitations, philosophical issues, and limited recordkeeping/billing capacity. Their options and future financial sustainability are uncertain.

In the National Capital Region and nationally, these issues are being explored, but many safety-net clinics are not sure how to address them and only recently have recognized an immediate need to do so. They need accurate information about options and challenges under health care reform, models to consider, implications of actions by other components of the safety net, opportunities to share ideas and seek joint solutions, and a better understanding of the future of public and private funding streams that currently support their operations. PSN is gathering information on these issues, sharing it within and across jurisdictions, and assisting clinics within and across jurisdictions to prepare for health care reform.

Project Goals:

1. To ensure that free and other safety-net clinics in the National Capital Region and other key stakeholders (such as clinic associations/intermediary organizations, CHCs/FQHCs, public and hospital-based clinics, other health care providers, funders, and other nonprofits serving low-income populations) have access to accurate, practical, timely information about the implications of health care reform for clinic operations and financial sustainability.
2. To provide an understanding of how the implementation of health care reform is likely to affect the funder mix and availability of philanthropic and public funding for safety-net clinics.
3. To provide a safe space for clinics to jointly explore issues related to health care reform, such as philosophy, capacity, and appropriateness of various models/options for operational and financial viability.
4. To facilitate jurisdiction-specific and regional learning and planning around ways to protect a safety net of clinics that provide high quality medical homes for diverse populations and enhance overall health care capacity.
5. To enable safety-net clinics to begin planning and working collaboratively with each other and other stakeholders to prepare for health care reform.

Project Activities: Project activities involve community-based action research, information sharing, and technical assistance, all supported by a project advisory committee of clinic and association leaders, health care funders, and other experts. Key tasks:

1. **Clinic information gathering:** Through interviews, a clinic online survey, and key informant sessions, gather information from 20-plus non-FQHC nonprofit safety-net clinics and from area associations and related entities regarding knowledge and views about health care reform and its implications, including philosophy, capacity, and willingness to consider various types of models and options for becoming engaged in health care reform.
2. **Funder assessment:** Through meetings and interviews, assess public, private, and individual funder views about post-reform support for safety-net clinics.
3. **Models/options:** Document health care reform-related models and options for safety-net clinics, within and outside the region – e.g., FQHC/safety-net clinic affiliations, participation in chronic disease or other health homes, affiliation with insurance exchange providers, innovative links to large providers, attainment of patient-centered medical home status, and shared billing entities.
4. **Technical assistance/mini-case studies:** Assist 3-4 selected clinics to gather and use information from key stakeholders (internal and external) on issues, options, and preferences for addressing health care reform, then help these clinics explore potential for collaborative action through facilitated group discussions and individualized technical assistance.
5. **Analysis, reporting, presentations:** Prepare and present study findings with safety-net clinics and key stakeholders within each jurisdiction and regionally.
6. **Clinic “support” sessions and regional learning:** Host and facilitate at least three information sharing, learning, and support sessions for safety-net clinics and 2-3 cross-jurisdictional learning sessions in collaboration with RPCC.

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