

Massachusetts Community Health Centers

2016 Uniform Data System Training Overview

Mary Ellen McIntyre
Technical Services & Special Populations Director
Jan. 10, 2017



Massachusetts League
of Community Health Centers

Speaker

Alec McKinney = EXPERT!

Housekeeping

Restrooms

Wi-fi

Emergency Exits

Cell Phones

Parking - \$26 flat rate

Lunch / Breaks

Who is the “Mass League”

- ✓ We are your state “Primary Care Association” (PCA)
- ✓ We are a member association and all 50 community health center organizations in the state are members (mix of federally funded and hospital-licensed; includes CRVFHP); 300+ health care access points
- ✓ We were founded in 1972 to support CHCs
- ✓ We are funded by HRSA to work with HRSA & CHCs to support development & services
- ✓ We receive federal, state and local funds as well as grants supporting a range of services

What services does the League provide to CHCs?

- Clinical technical assistance (TA) on quality improvement
- Support for oral health services, migrant health services
- TA to start and operate CHCs
- Loan repayment program for primary care providers
- Support and TA with enrollment in health coverage through Medicaid, HSN and Connector
- Guidance on rules & regulations impacting CHCs
- Assistance with use of EHRs & reporting on data
- Board and Staff training, education and networking
- Purchasing group, development and capital TA
- Policy, legislative and advocacy activities
- TA on Emergency Preparedness & Management


4

Expertise in the Room

- 1st UDS Report
- 2-5 UDS Reports
- 6-10 UDS Reports
- >10 UDS Reports
- BCRR Reports

6

MA Community Health Centers



- ✓ 50 Community Health Center organizations (FQHCs and hospital-licensed)
- ✓ 300+ sites reflect medical, dental, behavioral health, school-based and social services; provide patient-centered, culturally competent, high quality care
- ✓ **966,000 total patients (MA population: 6.7 million) = 1 in 7 residents**
- ✓ **4.6M total patient visits**

- Provide a broad range of primary & preventive care, including dental, eye and mental health/substance abuse care and other community-based services
- For Massachusetts 39 FQHC organizations:
 - 97% installed at all sites and used by all providers (v. 92% nationally)
 - 85% with PCMH recognition (v. 68% nationally)
 - 12.8% National Quality Leaders (v. 5.1% nationally)
 - 41.0% Health Center Quality Leaders (31.4% nationally)
- Transform communities by delivering quality care and addressing the factors that underpin and perpetuate poverty

7

MA Community Health Centers

- Serve anyone in need regardless of ability to pay
- Work to eliminate health disparities
- **Support more than 14,000 jobs and generate a total economic impact exceeding \$1.9 billion**
- **Generate more jobs in Massachusetts**
- **Serve as anchors for attracting new business and investments in local communities**
- Have added more than 300,000 patients since state health reform was enacted in 2006
- Have Community Boards

2015 Statewide:
2.5% uninsured
Per Nat'l Ctr for Health Statistics Report 5/17/16

All Health Centers	2006	2015
Uninsured	33%	16%
Medicaid	41%	49%
Medicare &	25%	30%*
minority group	1%	4%
Poverty **	66%	69%
Low Income **	63%	63%
	91%	86%

Source: 2015 UDS

*Includes subsidized coverage under Chapter 58

** Of known income

8

2015 Massachusetts Health Centers – Patients

Patients by Service Type	Patients *	Percent	Average...
Medical	818,000	84.7%	→ 15,700
Dental	187,000	19.4%	→ 4,500
Mental Health & Substance Abuse	117,000	12.1%	→ 1,600
Other (Vision, Other Professional, Enabling)	237,000	24.6%	→ 5,300
Total *	1,360,000		→ 27,100

* Duplicate patients (966,000 unduplicated) → **15,000 increase (1.6%) since 2014**

Sources: 2015 UDS, Table 5
2015 UDS, Table 3A
2015 Fact Sheet

Extrapolated for non-FQHCs non-respondents

Patient Trends – Since Pre-MA HCR

All CHC Patients	2006	2008	2010	2012	2014	2015		
Total *	594,000	712,000	790,000	850,000	951,000	966,000	→ 372,000 TOTAL PATIENT increase since 2006 = 63% INCREASE	

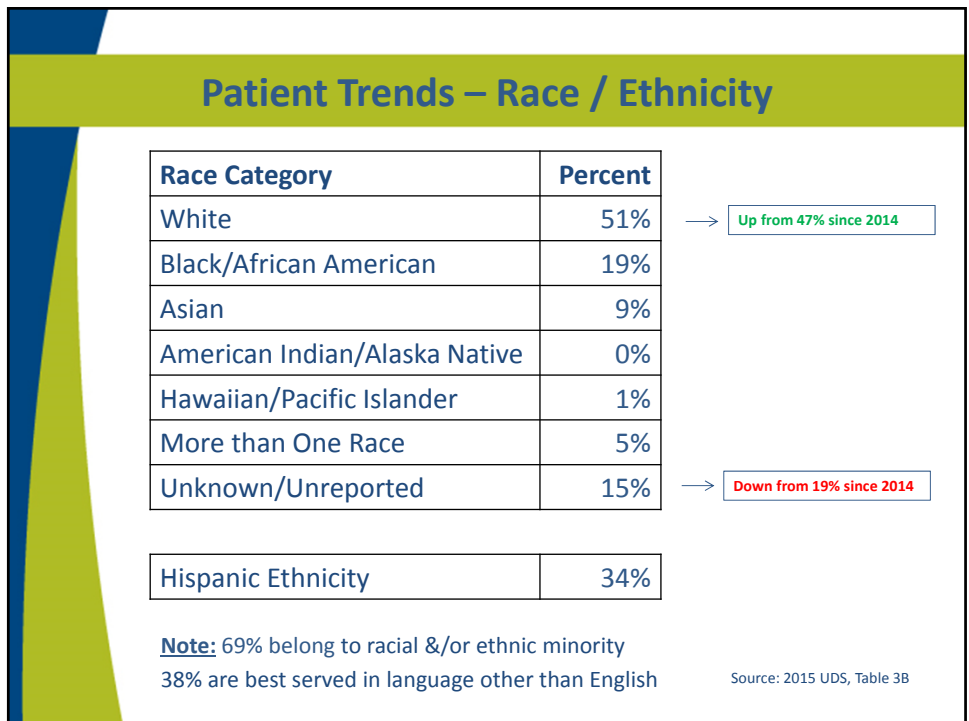
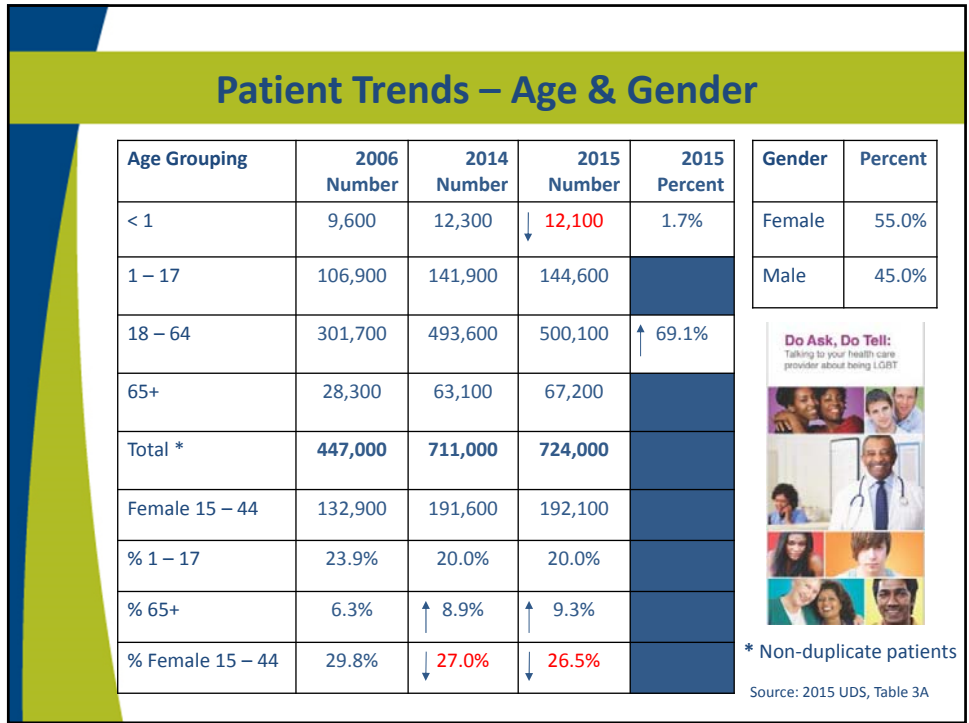
FQHC Patients	2006	2008	2010	2012	2014	2015	2006-2015 Increase	2006-2015 % Increase
Medical	380,000	450,000	494,000	535,000	604,000	611,000	231,000	60.7%
Dental	92,000	113,000	129,000	147,000	172,000	171,000	79,000	85.6%
Mental Health	20,000	28,000	31,000	40,000	47,000	52,000	32,000	160.7%
Substance Abuse	2,100	3,300	3,300	4,300	5,300	6,400	4,300	206.8%
Other	32,000	49,000	16,000	18,000	21,000	21,000	-11,000	-34.4%
Vision	NA	NA	49,000	53,000	71,000	77,000	29,000	60.5%
Enabling	56,000	51,000	68,000	76,000	79,000	89,000	33,000	59.4%
Total *	447,000	535,000	588,000	639,000	711,000	724,000	277,000	62.0%
Dental as % of Total	20.6%	21.1%	21.9%	23.0%	24.2%	23.6%		

277,000 TOTAL FQHC PATIENT increase (231,000 medical, 79,000 dental) = 62% INCREASE

* Non-duplicate patients

Sources: 2015 UDS, Table 5
2015 UDS, Table 3A
2015 Fact Sheet

Extrapolated for non-FQHCs non-respondents



Patient Trends – Poverty & Insurance Coverage

25th Percentile – 49%
 50th Percentile (Median) – 65%
 75th Percentile – 81%

FQHC Patients	2006	2008	2010	2012	2014	2015
Poverty *	62.5%	60.8%	65.2%	68.1%	63.6%	62.6%
Low Income *	91.3%	89.8%	90.1%	90.6%	86.6%	86.1%
Unknown Income	28.9%	24.1%	23.5%	26.7%	34.2%	34.6%
Uninsured	32.7%	21.4%	20.2%	19.8%	15.0%	16.5%
Other 3 rd Party	18.8%	28.3%	28.1%	28.9%	26.0%	24.1%

25th Percentile – 8%
 50th Percentile (Median) – 12%
 75th Percentile – 20%

25th Percentile – 12%
 50th Percentile (Median) – 20%
 75th Percentile – 33%

* Of known income

Sources: 2015 UDS, Table 4

2015 Massachusetts Health Centers – Visits

Visit Type	Visits	Percent
Medical	2,937,000	64%
Dental	580,000	13%
Mental Health & Substance Abuse	523,000	11%
Other (Vision, Other Professional, Enabling)	538,000	12%
Total	4,577,000	

Sources: 2015 UDS, Table 5
 2015 Fact Sheet

Extrapolated for non-FQHCs non-respondents

Workforce Trends – By FTE

Position Type	2006 FQHC FTE	2014 FQHC FTE	2015 FQHC FTE	Since 2014...
Physician (except Psychiatrists)	289.77	491.99	507.68	→ Up 3.2%
Midlevel (CNM, NP, PA)	152.91	351.36	369.94	→ Up 5.3%
Other Medical Personnel (Nurse, Lab, X-ray)	878.23	1,755.60	1,850.19	→ Up 5.4%
Dental	210.62	515.08	557.05	→ Up 8.1%
Mental Health	156.31	352.59	410.55	→ Up 16.4%
Substance Abuse	18.54	43.76	56.35	→ Up 28.8%
Other Professional (Vision, Pharmacy, Other)	117.81	177.81	195.08	→ Up 9.7%
Vision	NA	66.98	84.58	→ Up 26.3%
Enabling	516.85	869.86	920.51	→ Up 5.8%
Other Programs & Services	444.32	907.08	817.54	→ Down 9.9%
Administration / Facility	1,595.99	2,610.51	2,739.93	→ Up 5.0%
Total	4,381.35	8,142.62	8,509.40	Source: Up 4.5%

Workforce Trends – By FTE

Position Type	2006 FQHC FTE	2014 FQHC FTE	2015 FQHC FTE	Since 2014...
Physician (except Psychiatrists)	289.77	491.99	507.68	→ Up 3.2%
Midlevel (CNM, NP, PA)	152.91	351.36	369.94	→ Up 5.3%
Other Medical Personnel (Nurse, Lab, X-ray)	878.23	1,755.60	1,850.19	→ Up 5.4%
Dental	210.62	515.08	557.05	→ Up 8.1%
Mental Health	156.31	352.59	410.55	→ Up 16.4%
Substance Abuse	18.54	43.76	56.35	→ Up 28.8%
Other Professional (Vision, Pharmacy, Other)	117.81	177.81	195.08	→ Up 9.7%
Vision	NA	66.98	84.58	→ Up 26.3%
Enabling	516.85	869.86	920.51	→ Up 5.8%
Other Programs & Services	444.32	907.08	817.54	→ Down 9.9%
Administration / Facility	1,595.99	2,610.51	2,739.93	→ Up 5.0%
Total	4,381.35	8,142.62	8,509.40	Source: Up 4.5%

SINCE 2006:

Staffing has increased by 94%

- Substance Abuse by 204%
- Dental by 165%
- Mental Health by 163%
- Mid-levels by 142%

Other Updates to Share - Now

Welcome...

- Patient, Visit & Workforce Trends – *Mary Ellen McIntyre*
- DRVS / HCCN – *Mark Josephson*
- Importance of Documenting UDS Process – *Mark*

After Morning Break...

- Quality Improvement Awards – *Barbara Proffitt*

After Lunch...

- HRSA Funding Growth – *Mary Ellen*
- Website Resources – *Mary Ellen*
- Special Populations / Leads – *Mary Ellen*
- Proposed UDS Changes for 2017 – *Mary Ellen*
- League Evaluation – *Mary Ellen* (yellow color paper)

Other Updates to Share – After Morning Break

Welcome...

- Patient, Visit & Workforce Trends – *Mary Ellen McIntyre*
- DRVS / HCCN – *Mark Josephson*
- Importance of Documenting UDS Process – *Mark*

After Morning Break...

- Quality Improvement Awards – *Barbara Proffitt*

After Lunch...

- HRSA Funding Growth – *Mary Ellen*
- Website Resources – *Mary Ellen*
- Special Populations / Leads – *Mary Ellen*
- Proposed UDS Changes for 2017 – *Mary Ellen*
- League Evaluation – *Mary Ellen* (yellow color paper)

Other Updates to Share – After Lunch

Welcome...

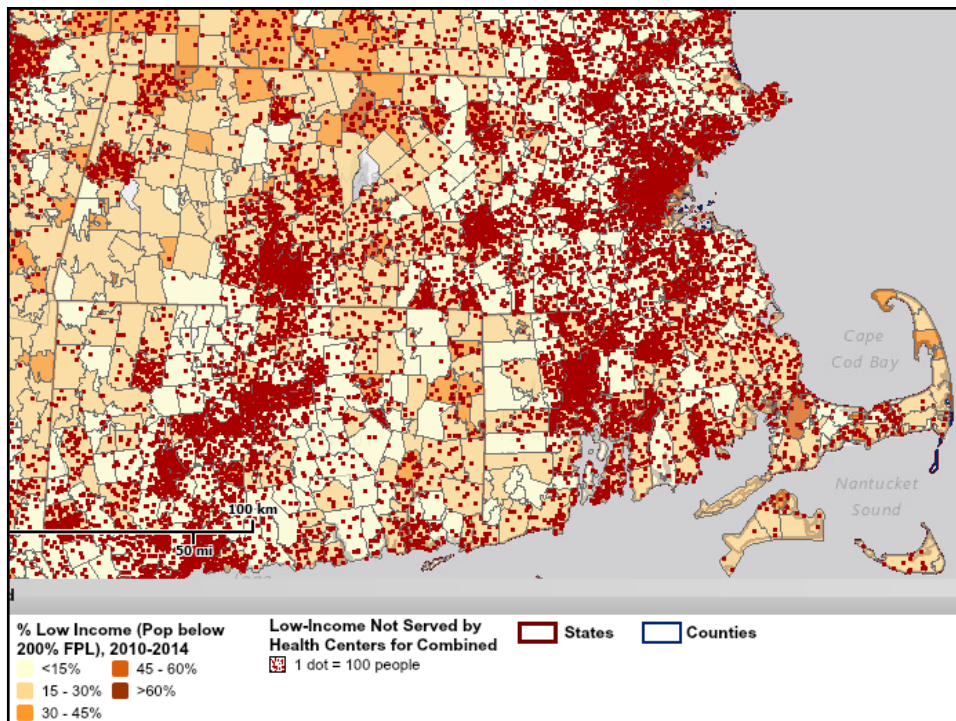
- Patient, Visit & Workforce Trends – *Mary Ellen McIntyre*
- DRVS / HCCN – *Mark Josephson*
- Importance of Documenting UDS Process – *Mark*

After Morning Break...

- Quality Improvement Awards – *Barbara Proffitt*

After Lunch...

- **HRSA Funding Growth** – *Mary Ellen*
- **Website Resources** – *Mary Ellen*
- **Special Populations / Leads** – *Mary Ellen*
- **Proposed UDS Changes for 2017** – *Mary Ellen*
- **League Evaluation** – *Mary Ellen* (yellow color paper)





FROM 2015 → PRESENT:

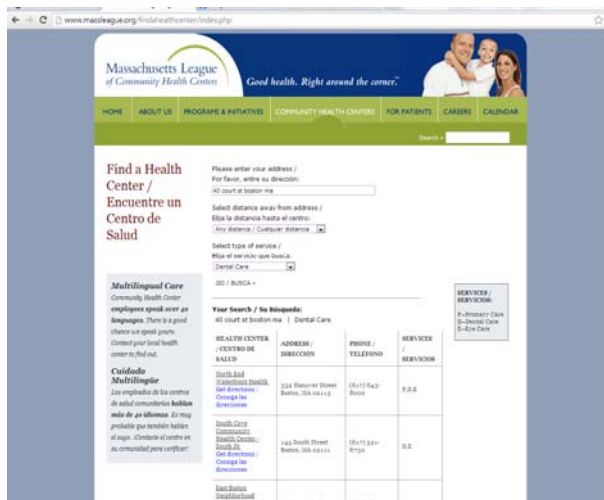
- New Access Points: 7
- HIIP: 12
- Expanded Services: 35
- Substance Abuse SE (MAT): 20
- Oral Health SE: 15
- DSHII: 39
- O&E: 2
- Quality Improvement: 35
- PCMH: 4

[\$43 MILLION]

A partial map of Massachusetts, showing the western and southern portions. Labeled locations include N. Adams, Adams, Pittsfield, Lee, Great Barrington, Provincetown, Wellfleet, Harwich, Hyannis, Mashpee, and Edgartown.

22

Website & UDS Materials



55 Total Dental Access Sites & 24 Total Eye Care Sites

www.massleague.org/findahealthcenter/



Good health. Right around the corner.™



HOME
ABOUT US
PROGRAMS & INITIATIVES
COMMUNITY HEALTH CENTERS
FOR PATIENTS
CAREERS
CALENDAR

Uniform Data System Training

Jan. 10, 2017:
Location: Seaport Hotel, Boston

The Uniform Data System (UDS) in-person training is a full day program covering the preparation of the 2016 UDS Report. The training addresses each of the report's tables, including a discussion of the changes that have been made and the definitions necessary to complete the Report. The UDS training is aimed at those who are responsible for gathering and reporting the data elements included in the UDS Report, as well as management and clinical staff who need to understand the definitions and concepts used.

Printed Materials: The UDS Training Manual, which will be distributed during the Training, includes the following material:

- Agenda
- UDS Presentation - Alec McKinney
- UDS 2016 Manual
- SUMMARY GRID OF UDS MANUAL REVISIONS FROM INITIAL MANUAL (released 12/8/16)
- UDS Tables - PDF, XLSX
- PAL 2016-02: Approved Uniform Data System Changes for Calendar Year 2016
- 2016 Clinical Measures Descriptions Handout
- 2015 Performance Indicators by State
- MLCHC Overview Presentation - Mary Ellen McIntyre

QUICK LINKS

- Find a Health Center
- Career Opportunities
- Calendar of Events

SPOTLIGHT



Faces of the Future

NEWSROOM

The reality of repealing the Affordable Care Act »
Jan 9, Boston Globe Op-Ed by Sylvia Burwell

The GOP's health care follies »
Jan 6, Boston Globe Editorial

To a Byzantine health

Additional Resources:

- JSI Memo: MA Payor Source Clarification from Feb. 2016
- PAL 2017-01: Proposed Uniform Data System Changes for Calendar Year 2017
- Massachusetts Program Grantee 2015 UDS Data
- 2016 Fact Sheets: General Information and Table-by-Table Overview
- UDS Health Center Performance Comparison Report - Grantee Adjusted Quartile Description FAQs
- Quick Reference Sheet: Accessing UDS Reports in EHB
- Quick Reference Sheet: Accessing UDS Submissions in EHB
- Quick Reference Sheet: CY2015 Formula Reference Guide for EHB Reports
- Section 330 CY2015 National Rollup
- Look-Alike CY2015 National Rollup
- National BPHC Section 330 CY2015: At a Glance
- National BPHC Look-Alike CY2015: At a Glance
- BPHC Clinical Measures Data Entry Tool 2016
- Status Verification of Agricultural Workers Sample, developed by National Center for Farmworker Health
- Documenting Homelessness throughout the Health Care System, developed by National Health Care for the Homeless Council
- Counting Patients Served at a Health Center Located in or Immediately Accessible to a Public Housing Site, developed by Community Health Partners for Sustainability
- UDS Assistance Resources Listing
- UDS Resources - on-demand webinars
- National Network for Oral Health Access Memo: Frequently Asked Questions to Assist Health Center Grantees to Submit Data on the UDS Dental Sealants Quality of Care Measure
- Azara UDS Whitepaper for DRVS Health Centers
- UDS Mapper

system, navigators help at-risk patients find their way »
Jan 4, statnews.com

More Newsroom Articles »

UPCOMING EVENTS

UDS Training »
Jan 10

CRVFHP Monthly Mtg »
Jan 17

Boston Conference of CHCs Mtg »
Jan 19

Behavioral/Mental Health Directors Forum »
Jan 19


Governmental Affairs Committee Mtg »
Jan 19

NACHC P&I Forum »
Mar 28-Apr 1

State House Day »
Apr 12

Patient Trends – Special Populations Trends

Special Population Category	2006 Number	2014 Number	2015 Number	2006-2015 Increase	2006-2015 % Increase	2014-2015 Increase	2014-2015 % Increase
Homeless (h)	21,700	37,300	34,000	12,300	57%	-3,300	-9%
Agricultural worker (g)	2,100	2,800	3,600	1,500	69%	900	32%
Public Housing (i)	14,900	35,000	81,400	66,500	447%	46,400	132%
School-Based	6,200	8,700	15,800	9,600	155%	7,100	81%
Veterans *	4,600	10,400	10,400	5,700	124%	7	0.1%



I CARE ABOUT AMERICA'S AGRICULTURAL WORKERS

Community and Migrant Health Centers serve approximately 20% of the estimated 4.5 million Ag Workers in the United States.

Special Populations / Leads

- **Special Populations / Leads – Mary Ellen & Barbara**
 - Homeless – **Liz Sanchez**, Pat Edraos, Perrin Braun, Kaitlin McColgan
 - Agricultural Workers – **Mary Ellen McIntyre**, Anna Gardner, Barbara Proffitt, Michael Malloy
 - Public Housing – **Perrin Braun**, Pat Edraos, Barbara Proffitt, Mary Ellen McIntyre
 - School Based Health Center – **Martha Farlow**, Janice Brathwaite, Perrin Braun, Pat Edraos
 - Veterans – **Janice Brathwaite**, Martha Farlow, Pat Edraos, Liz Sanchez
 - Other Populations & Integrated Services – Rural, LGBT, Elderly, Justice Involved Individuals, Oral Health, Eye Health, Behavioral Health (*and more!*)

Possible Additions for 2017

- **PAL 2017-01: Proposed Uniform Data System Changes for Calendar Year 2017 released Aug. 24, 2016**
- **CHANGE – revisions to clinical quality measures to fully align with CMS e-CQMs where possible (Table 6B, 7)**
- **NEW / CHANGE – Addition of Appendix E:**
 - Medication-Assisted Treatment (MAT) capacity and use moved from Appendix D
 - Addition of Outreach & Enrollment Assists (currently reported on O&E Quarterly Progress Reports)

Evaluations & Thank You!

Mary Ellen McIntyre
memcintyre@massleague.org

Good health. Right around the corner.

40 Court Street, 10th Floor
Boston, MA 02108
ph 617-426-2225
www.massleague.org


Massachusetts League
of Community Health Centers