Navigating the Health Center Program:
An Introduction for American Indian/Alaska Native Communities

Department of Health and Human Services
Health Resources and Services Administration
Bureau of Primary Health Care
American Indian/Alaska Native Workgroup
Presenters

- Alan Pruhs, Executive Director, Association for Utah Community Health, Salt Lake City, UT
- Michele Lefebvre, Project Director, Paiute Indian Tribe of Utah, Cedar City, UT
- Maria K. Clark, Project Director, Pueblo of Jemez, Jemez, NM
- William Davis, J.D., Grants Management Specialist, HRSA Office of Federal Assistance Management
Learning Objectives

• Gain an understanding of the advantages and responsibilities of being a Health Center Program (HCP) grantee

• Learn about the resources that Primary Care Associations can provide to those seeking to become a HCP grantee

• Learn about HRSA’s grants process resources
History of AUCH

Five photos of health centers for the Association of Utah Community Health
Health Centers in Utah

- 13 Health Centers
  - 11 Community Health Center (330 (e)) Grantees
    - 1 Grantee operating under 638 self-determination contract
    - 1 Tribal-sponsored Grantee
  - 1 Dual Community Health Center (330 (e)) and Migrant Health Center (330 (g)) Grantee
  - 1 Homeless Health Center (330 (h)) Grantee
- 40 Clinic Locations
New Access Points in Utah

- 2013 NAP Applications
  - 6 applications total
  - Federal Fiscal Year 2013 (September 2013)
    - 3 funded, 1 Tribal-sponsored Grantee as a New Start
  - Federal Fiscal Year 2014 (November 2013)
    - 3 funded, 1 as a New Start
Technical Assistance

• Statewide Expansion Plan
• Collaborations
• Needs Assessments (Form 4: Community Characteristics, Form 9: Need for Assistance, MUA/Ps, HPSAs, and UDSMapper map)

• Healthcare Marketplace Assessment
• Sample Documents (sliding fees, job descriptions, grant documents, policies, etc.)
• NAP Requirements
• EHB Navigation
Technical Assistance (Continued)

- Health Center Program Requirements
- Sample Policies and Procedures
- Sliding Fee Discount Schedule
- Coding and Documentation
- Productivity Benchmarks
- UDS Reporting
- HPSA Facility Scores
- Updated Needs Assessments
- Quality Improvement and PCMH Standards
Strengths of Tribal Applicants Contributing to their Success

• Targeting a high need service area in a sparsely populated region
• Realistic patient projections
• Familiarity with the Health Center Program
• Awareness of and sensitivity to the unique health care needs of their communities
• Integration of tribal leadership into health center governance
PAIUTE INDIAN TRIBE OF UTAH

Michele Lefebvre,
Tribal Health Director
Paiute Indian Tribe of Utah CHC

Kanosh CHC

Koosharem CHC
Paiute Indian Tribe of Utah

- The Tribe has been funded by Indian Health Services since 1982 and currently operates under Title 1 of PL 93-638; however they are exploring the possibilities of moving to a Title 5
- Community Health Centers are located in Millard, Sevier, Iron and Washington Counties – 2 are HRSA 330 CHC’s the other two operate as look-alikes
- Central office is located Cedar City – approximately 120 miles North of Las Vegas. Our HRSA 330 CHC’s in Kanosh and Richfield are between 100 to 115 miles North of the central office.
- The Tribe has 900 federally enrolled tribal members, most reside off the reservation.
- Provider staffing includes: 5 Physician Assistant, 3 Nurses, 4 CNA’s, 1 Nutritionist, 3 contracted Physicians, 1 contracted Dentist, 1 contracted Psychologist, and intra-agency referrals to Behavioral Health counselors.
Paiute Indian Tribe of Utah (Continued)

• Service Area includes: Fillmore, Holden, Kanosh (Millard County), Richfield, and Joseph (Sevier County). Total service area population is 13,469 with target population being 4,026.

• In 2013, 20,784 individuals resided in Sevier County of those, 3,150 lived in poverty, 230 were homeless, and 3,824 were uninsured. In Millard County there were 7,221 residents and of those 2,156 lived in poverty, 178 were homeless, and 1,574 were uninsured.

• The high level of poverty, job loss and little economic growth creates an increase in health disparities and individuals are at greater risk of poor health, including increased substance abuse, domestic violence and mental health issues.

• Health indicators reflect the top three health issues are: Diabetes, Cardiovascular Disease, and Cancer (breast/colon), other health disparities contributing to poor health include smoking, high blood pressure, obesity, limited access to fruits and vegetables, and lack of exercise.
The Pueblo of Jemez
1 of 19 Pueblos in NM

Photo: Map, road and beautiful scenery for surrounding area of The Pueblo of Jemez Health Center
Picture of mountain range and surrounding area for Pueblo of Jemez health center
Pueblo of Jemez

Picture of mountain range and surrounding area for Pueblo of Jemez health center
Pueblo of Jemez (POJ)

- Under Title I of PL 93-638 Indian Self-Determination Act the Pueblo of Jemez (POJ) contracted programs, functions, services and activities (PFSAs) from the Indian Health Service (IHS) starting in 1992.
- In 2000, the POJ contracted nearly 100% of its shares and PFSAs from the IHS.
- In 2010, the POJ completed its journey and became a self-governance tribe under Title V of PL 93-638 which allows greater independence and flexibility in the delivery of healthcare (i.e. PFSAs).
- Under the ACA and Reauthorization of the Indian Health Care Improvement Act, the POJ passed two tribal resolutions to expand its federal mission to serve non-Indians.
Pueblo of Jemez HHS

• The Jemez Department of Health & Human Services (JHHS) is located 50 miles Northwest of Albuquerque, New Mexico

• JHHS Governance includes the Office of the Governor, Tribal Council and a Health Board

• JHHS employs approximately 140 people in 17 Programs
  • Medical – 3.5 Providers; 1 LMHC; Contract Nutritionist; on-site X-Ray and Ultrasound;
  • Dental – 2 Dentists; 2 Hygienists; 3 DAs
  • Pharmacy – 3 Pharmacists; 4 Techs
  • Behavioral Health – 1 Contract Psychiatrist; 4 Licensed Therapists; Family Support Worker; Peer Support Specialist; Adolescent Counselor
Pueblo of Jemez

- There are 3,073 enrolled Jemez Tribal Members of which 2,126 live on the Pueblo (i.e. reservation) and 1,092 live off the Jemez Pueblo.
- In 2013 there were 31,300 ambulatory visits and 2,801 patients served.
- Target Population – low-income population of the service area, a group of around 11,000 individuals of which 9,700 individuals un-served. This population, and the larger population of Sandoval County, face significant barriers to primary health care access, and persistent health disparities that exceed national severe benchmarks.
Discussion

• Alan Pruhs, Executive Director, Association for Utah Community Health, Salt Lake City, UT

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• Maria K. Clark, Project Director, Pueblo of Jemez, Jemez, NM
Technical Assistance and Tips When Applying for a Grant

Will Davis
Grants Management Specialist
Department of Health and Human Services
Health Resources and Services Administration
Office of Federal Assistance Management
Get Registered

- Register your organization
  - Data Universal Number System (DUNS)
    A DUNS number is required to identify organizations and it tracks where federal grant money is allocated
  - System for Award Management (SAM)
    Designating an E-business point of contact. Registering with SAM is required for organizations to use Grants.gov
  - Grants.gov
    The system that allows applicants to submit grant applications
- Register early
  - It can take up to 30 business days to get completely registered.
Tips for Applying for a Grant

• Register to get email notifications when opportunities are available at:
  • http://www.grants.gov/web/grants/manage-subscriptions.html
  • http://www.hrsa.gov/grants/
• Read through and pay close attention to instructions on the Funding Opportunity Announcement (FOA)
• Be sure to address each section of the FOA
• Be detailed, yet concise
• Become an expert on the grant program you want to apply for
Technical Assistance

• HRSA has developed the: HRSA Grants Technical Assistance (TA) Webpage, viewed at: http://www.hrsa.gov/grants/apply/

• Whom to Call:
  - Grants Management: Section VII of FOA
  - Program: Section VII of FOA
  - Grants.gov 1-800-518-4726, 24/7
  - HRSA’s Electronic Handbooks (EHBs) Help Desk – 877-464-4772 (TTY: 877-897-9910), 8 am to 8 pm ET, weekdays (except Federal holidays)
Contact Information

- Alan Pruhs, 801-716-4601, alan@auch.org, http://www.auch.org/
- Michele Lefebvre, michele.lefebvre@ihs.gov
- Maria K Clark, 575-834-3091
  Maria.Clark@jemezpueblo.us
- Will Davis, J.D., HRSA Grants Management Specialist
  301-443-8217, Wdavis@hrsa.gov
- BPHC AI/AN Workgroup, bphcaian@hrsa.gov
Questions