

# Quick Operations Management Reference Tool for Community Health Centers

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# Outline

- Background and Benefits
- How to Create Your Own Dashboard
- Five Dashboard Sections

## Outcomes

Identify Potential Problem Areas

Learn How to Complete A Dashboard

Learn How to Select Variables

# Background of the CHC Dashboard

- HRSA OPR Site Visits
- HRSA UCLA/JJ Training
- Health Care Costs and Quality
- Productivity and Outcomes
- Includes BPHC Required Measures
- Compare With Similar CHCs
- Conduct a Trend Analysis of Individual CHC



# Benefits of Using a Dashboard

- Convenient Way of Looking at Variety of Data
- Focus on Manageable Set of Data Elements
- Get Clinical and Financial staff to Look at Each Others Measures to Track Operations
- Broad Mix Overview Big Picture
- Current Snapshot Compared to Past
- Comparative Effectiveness Dashboard for Community Health Centers

# Creating Your Own Dashboard

- 15 Minutes to Complete
- 33 Variables from UDS Reports
- Summary on One Page
- Averages and Guidelines
- Some CHCs Use Different Items
- 24 Program Requirements

# Dashboard Sections

- Need
- Services
- Management
- Finance
- Governance



# Dashboard Section 1: Need

## ■ Program Requirements

### 1. Community Needs Assessment

## ■ Questions

Are the community needs being met? Changing?

Does the CHC need to refocus its target market?

Are funding sources changing?

## Section 1: Need

	<i>Average/ Guideline</i>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	
Number of Patients Served	15,000	13,383	13,730	13,863	15,041	
Number of Encounters	45,000	44,147	46,147	47,149	50,610	
Total Staff FTE	70.00	94.13	93.79	90.18	109.02	✓
BPHC Grant (millions)	\$1.00	\$0.95	\$0.92	\$0.94	\$0.94	
Total Revenue (millions)	\$7.40	\$8.04	\$9.58	\$10.44	\$11.02	✓
Total Expenses (millions)	\$7.00	\$7.99	\$9.56	\$10.83	\$11.82	✓

# Dashboard Section 2: Services

## ■ Program Requirements

2. Required Primary Care Services
3. Adequate Staffing
4. Accessible Hours and Location(s)
5. After Hours Coverage
6. Hospital Privileges
7. Sliding Fee Discounts
8. Quality Improvement Plan

## ■ Questions

Staffing, accessibility, monitored?

## Section 2: Service

	<u>Average/ Guideline</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	
% of Prenatal Patients Served 1st Trimester	goal >70%	53%	54%	70%	77%	
% of Women with Pap Test	goal >70%		20%	17%	37%	✓
% of Children Immunized	goal >80%				55%	✓
% of Total Newborns Low Birth Weight	goal <8%	15%	15%	11%	5%	
% of Diabetics whose last HbA1c <= 9%.	goal >90%		46%	53%	46%	✓
% of Hypertensives < 140/90	goal >80%				22%	✓
% of Depression Screenings (Optional)	goal >80%					
% of Completed Oral Health Plans (Optional)	goal >70%					

# Dashboard Section 3: Management

## ■ Program Requirements

9. Key Management Fully Staff

10. Affiliation Agreements Contracted Services

11. Collaborative Relationships with Providers

## ■ Questions

Integrated Primary Care Team in Place?

Team Productivity Goals Reached?

Low Administrative Overhead?

<b><u>Section 3: Management</u></b>	<b><u>Average/ Guideline</u></b>	<b><u>2005</u></b>	<b><u>2006</u></b>	<b><u>2007</u></b>	<b><u>2008</u></b>
Physician FTE	8.00	5.90	4.61	5.40	5.82
Mid-levels FTE	4.00	5.04	6.70	6.03	6.13 ✓
Medical Encounters	34,000	36,695	39,889	40,524	43,904
Dental Encounters	4,500	4,490	4,155	4,000	5,643
Behavioral Health Encounters	2,700	0	46	0	0 ✓
Medical Team Productivity	4,300	4,358	5,011	4,816	✓
Dental Team Productivity	2,700			2,254	
Administrative Overhead	25%			22%	

# Dashboard Section 4: Finance

## ■ Program Requirements

17. Board Authority to Oversee Operations

18. Board Composition Majority Users

19. Conflict of Interest Policy

## ■ Questions

Service to Uninsured and Underinsured?

Board aware of operational factors?

Board majority users

Representative of the community?

## Section 4: Finance

	<u>Average/ Guideline</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
Total Cost Per Total Patient	<\$538	\$580	\$671	\$717	\$752 ✓
Medical Cost Per Medical Encounter	<\$120	\$111	\$122	\$121	\$120
Dental Cost Per Dental Encounter	<\$140	\$158	\$186	\$204	\$117
Change in Net Assets as a % of Expense	<5%	14%	1%	17%	-7% ✓
Working Capital Monthly Expense Ratio	<4.00	1.33	1.95	1.80	0.69
Long Term Debt to Equity Ratio	>0 <.5	0.00	0.20	0.07	0.06
Charges to Reimbursable Costs Ratio	110%			64%	✓
Ratio of Uncompensated Care	140%			264%	✓

# Dashboard Section 5: Governance

## ■ Program Requirements

- 18. Board Authority to Oversee Operations
- 19. Conflict of Interest Policy
- 20. Board Composition Majority Users
- 21. Waiver of Board Requirements Appropriate
- 22. Board Size 9 to 25 Members
- 23. Board Expertise Adequate
- 24. Board Member Health Care Income <10%

## ■ Questions

Service to Uninsured and Underinsured?

<u>Section 5: Governance</u>	<u>Average/ Guideline</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
Uninsured %	30%	37%	28%	24%	25%
Medicaid %	45%	50%	58%	60%	59% ✓
Medicare %	10%	6%	10%	9%	8%
Other Public Insurance %	5%	0%	0%	0%	0%
Private Insurance %	10%	7%	6%	6%	6%




# Compare Similar CHCs

- Share Information Between CHCs
- Identify Potential Best Practices
- Regional Health Boards
- Include State Primary Care Associations
- Encourage Partnerships with Educational Institutions and Businesses

## Section 1: Need

	<i>Average/ Guideline</i>	<b>CHC 1</b>	<b>CHC 2</b>	<b>CHC 3</b>	<b>CHC 4</b>
Number of Patients Served	15,000	10,102	13,863	24,577	30,018
Number of Encounters	45,000	33,623	47,149	92,692	122,737
Total Staff FTE	70.00	48.30	90.18	164.37	214.03 ✓
BPHC Grant (millions)	\$1.00	\$0.49	\$0.94	\$1.58	\$1.89
Total Revenue (millions)	\$7.40	\$3.71	\$9.98	\$15.48	\$22.4 ✓
Total Expenses (millions)	\$7.00	\$3.54	\$9.93	\$13.37	\$21.8

## Section 2: Service

	<u>Average/ Guideline</u>	<u>CHC 1</u>	<u>CHC 2</u>	<u>CHC 3</u>	<u>CHC 4</u>
% of Prenatal Patients Served 1st Trimester	goal >70%	88%	70%	72%	73%
% of Women with Pap Test	goal >70%				
% of Children Immunized	goal >80%				
% of Total Newborns Low Birth Weight	goal <8%	9%	11%	9%	6% 
% of Diabetics whose last HbA1c < 9%.	goal >90%				
% of Hypertensives < 140/90	goal >80%				
% of Depression Screenings (Optional)	goal >80%				
% of Completed Oral Health Plans (Optional)	goal >70%				

### Section 3: Management

	<u>Average/ Guideline</u>	<u>CHC 1</u>	<u>CHC 2</u>	<u>CHC 3</u>	<u>CHC 4</u>
Physician FTE	8.00	5.70	5.40	13.50	9.75
Mid-levels FTE	4.00	3.00	6.03	6.70	9.44 ✓
Medical Encounters	34,000	33,623	40,524	92,682	71,659
Dental Encounters	4,500	0	4,000	13,544	28,307 ✓
Behavioral Health Encounters	2,700	0	0	2,797	1,764 ✓
Medical Team Productivity	4,300	4,670	4,816	4,237	4,952 ✓
Dental Team Productivity	2,700		2,254	3,000	2,540
Administrative Overhead	25%	26%	22%	32%	20% ✓

## Section 4: Finance

	<u>Average/ Guideline</u>	<u>CHC 1</u>	<u>CHC 2</u>	<u>CHC 3</u>	<u>CHC 4</u>	
Total Cost Per Total Patient	<\$538	\$305	\$717	\$548	\$727	✓
Medical Cost Per Medical Encounter	<\$120	\$92	\$121	\$137	\$129	✓
Dental Cost Per Dental Encounter	<\$140		\$204	\$160	\$117	✓
Change in Net Assets as a % of Expense	<5%	-0.90%		-0.02%	1.15%	
Working Capital Monthly Expense Ratio	<4.00	0.03		0.52	1.72	
Long Term Debt to Equity Ratio	>0 <.5	0.65		0.00	1.17	
Charges to Reimbursable Costs Ratio	110%	111%	64%	124%	128%	✓
Ratio of Uncompensated Care	140%	79%	264%	238%	74%	✓

<u>Section 5: Governance</u>	<u>Average/ Guideline</u>	<u>CHC 1</u>	<u>CHC 2</u>	<u>CHC 3</u>	<u>CHC 4</u>
Uninsured %	30%	12%	24%	25%	13%
Medicaid %	45%	17%	60%	54%	32%
Medicare %	10%	32%	9%	4%	10%
Other Public Insurance %	5%	0%	0%	6%	0%
Private Insurance %	10%	38%	6%	10%	45% ✓

# Wrap-up Discussion

- Easy to Create the Dashboard
- Focus on Manageable Set of Data Elements
- Clinical and Financial Measures
- Trend Analysis of Individual CHC
- Compare Similar CHCs
- Simple, but Comprehensive Tool for CHCs

# Questions?

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## **Community Health Center Program Requirements**

### **Need**

1. Community Needs Assessment
2. MUA/MUP Designation

### **Finance**

13. Financial Management Policies
14. Program Data Reporting Systems
15. Billing and Collections
16. Budget to Accomplish Service Delivery Plan
17. Service Level Funded Scope of Project

### **Services**

3. Required Primary Care Services Provided
4. Adequate Staffing
5. Accessible Hours and Location(s)
6. After Hours Coverage
7. Hospital Privileges & Continuum of Care
8. Sliding Fee Discounts
9. Quality Improvement/Assurance Plan

### **Governance**

18. Board Authority to Oversee Operations
19. Conflict of Interest Policy
20. Board Composition Majority Users
21. Waiver of Board Requirements Appropriate
22. Board Size 9 to 25 Members
23. Board Expertise Adequate
24. Board Member Health Care Income <10%

### **Management**

10. Collaborative Relationships with Providers
11. Affiliation Agreements Contracted Services
12. Key Management Fully Staffed

See <http://bphc.hrsa.gov/about/requirements.htm>  
for program requirement definitions.

## Community Health Center Self-Assessment Dashboard

	1 Red	2 Yellow	3 Green		Average/ Guideline	2006	2007	2008	Focus
<b>Need</b>									
1. Community Needs Assessment	—	—	—	<b>Need</b>	Total Number of Patients	15,000	_____	_____	_____
2. MUA/MUP Designation	—	—	—		Number of Encounters	45,000	_____	_____	_____
	—	—	—		Total Staff FTE	70.00	_____	_____	_____
	—	—	—		BPHC Grant Dollars (millions)	\$1.00	_____	_____	_____
See <a href="http://bphc.hrsa.gov/about/requirements.htm">http://bphc.hrsa.gov/about/requirements.htm</a> for definitions.	—	—	—		Patient Revenue (millions)	\$4.20	_____	_____	_____
	—	—	—		Total Revenue (millions)	\$7.40	_____	_____	_____
	—	—	—		Total Expenses (millions)	\$7.00	_____	_____	_____
<b>Services</b>									
3. Required Primary Care Services Provided	—	—	—	<b>Services</b>	% of Prenatal Patients Served 1st Trimester	goal >70%	_____	_____	_____
4. Adequate Staffing	—	—	—		% of Women with Pap Test	goal >70%	_____	_____	_____
5. Accessible Hours and Location(s)	—	—	—		% of Children Immunized	goal >80%	_____	_____	_____
6. After Hours Coverage	—	—	—		% of Total Newborns Low Birth Weight	goal <8%	_____	_____	_____
7. Hospital Privileges & Continuum of Care	—	—	—		% of Diabetics whose last HbA1c < 9%	goal >90%	_____	_____	_____
8. Sliding Fee Discounts	—	—	—		% of Hypertensives < 140/90	goal >80%	_____	_____	_____
9. Quality Improvement/Assurance Plan	—	—	—		% of Depression Screenings (Optional)	goal >80%	_____	_____	_____
	—	—	—		% of Completed Oral Health Plans (Optional)	goal >70%	_____	_____	_____
<b>Management</b>									
10. Collaborative Relationships with Providers	—	—	—	<b>Management</b>	Physician FTE	8.00	_____	_____	_____
11. Affiliation Agreements Contracted Services	—	—	—		Mid-levels FTE	4.00	_____	_____	_____
12. Key Management Fully Staffed	—	—	—		Medical Encounters	34,000	_____	_____	_____
	—	—	—		Dental Encounters	4,500	_____	_____	_____
	—	—	—		Behavioral Health Encounters	2,700	_____	_____	_____
	—	—	—		Medical Team Productivity	4,300	_____	_____	_____
	—	—	—		Dental Team Productivity	2,700	_____	_____	_____
	—	—	—		Administrative Overhead	25%	_____	_____	_____
<b>Finance</b>									
13. Financial Management Policies	—	—	—	<b>Finance</b>	Total Cost Per Total Patient	<\$538	_____	_____	_____
14. Program Data Reporting Systems	—	—	—		Medical Cost Per Medical Encounter	<\$120	_____	_____	_____
15. Billing and Collections	—	—	—		Dental Cost Per Dental Encounter	<\$140	_____	_____	_____
16. Budget to Accomplish Service Delivery Plan	—	—	—		Change in Net Assets as a Percent of Expense	<5%	_____	_____	_____
17. Service Level Funded Scope of Project	—	—	—		Working Capital to Monthly Expense Ratio	<4.00	_____	_____	_____
	—	—	—		Long Term Debt to Equity Ratio	>0 <.5	_____	_____	_____
	—	—	—		Charges to Reimbursable Costs Ratio	110%	_____	_____	_____
	—	—	—		Ratio of Uncompensated Care	140%	_____	_____	_____
	—	—	—		Integrated Service Network EMR	Yes/No	_____	_____	_____
<b>Governance</b>									
18. Board Authority to Oversee Operations	—	—	—	<b>Governance</b>	Uninsured %	30%	_____	_____	_____
19. Conflict of Interest Policy	—	—	—		Medicaid %	45%	_____	_____	_____
20. Board Composition Majority Users	—	—	—		Medicare %	10%	_____	_____	_____
21. Waiver of Board Requirements Appropriate	—	—	—		Other Public Insurance %	5%	_____	_____	_____
22. Board Size 9 to 25 Members	—	—	—		Private Insurance %	10%	_____	_____	_____
23. Board Expertise Adequate	—	—	—				_____	_____	_____
24. Board Member Health Care Income <10%	—	—	—				_____	_____	_____

## Community Health Center Self-Assessment Dashboard

### Need

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### Management

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BPHC Grant Dollars (millions)	\$1.00	\$0.95	\$0.92	\$0.94	\$0.94
Total Revenue (millions)	\$7.40	\$8.04	\$9.58	\$10.44	\$11.02
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### Services

	goal	2005	2006	2007	2008
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% of Hypertensives < 140/90	>80%				22%
% of Depression Screenings (Optional)	>80%				
% of Completed Oral Health Plans (Optional)	>70%				

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Other Public Insurance %	5%	0%	0%	0%	0%
Private Insurance %	10%	7%	6%	6%	6%