

Welcome!

2022 WEBINAR SERIES
"SPECIAL TOPICS IN RURAL HEALTH"



**Sponsored by Representative Kathy L. Rapp
and Senator Michele Brooks**

**Coordinated by the
Pennsylvania Rural Health Association**

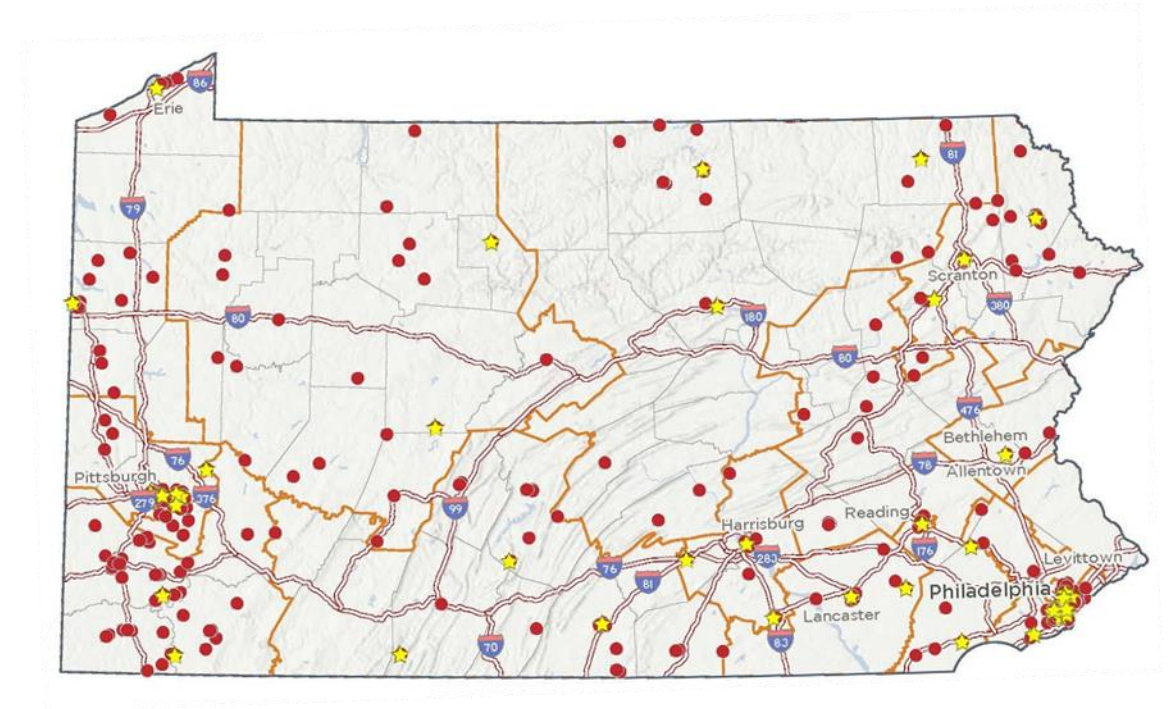
Community Health Centers

Solving Healthcare Access Challenges
through High Quality Community
Based care



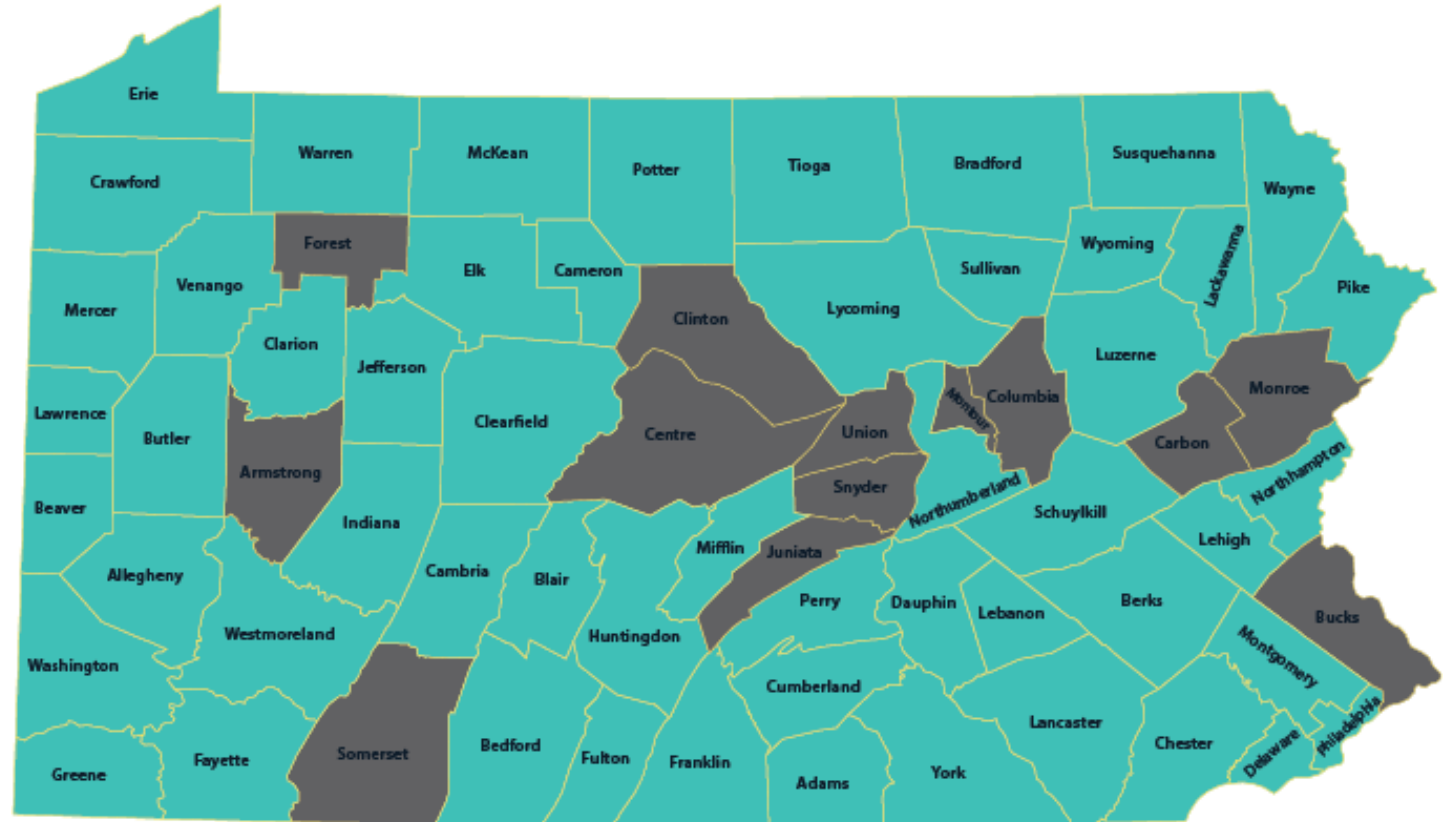
PENNSYLVANIA THROUGH A RURALITY LENS

- **51** Federally Qualified Health Centers (FQHC) and FQHC look-alikes in Pennsylvania
- Serve **892,521** patients, of these patients
 - **15%** uninsured
 - **84.7%** are \leq **200%** of poverty
 - **48%** of whom are covered by Medicaid
- **350+** Health Center Delivery Sites



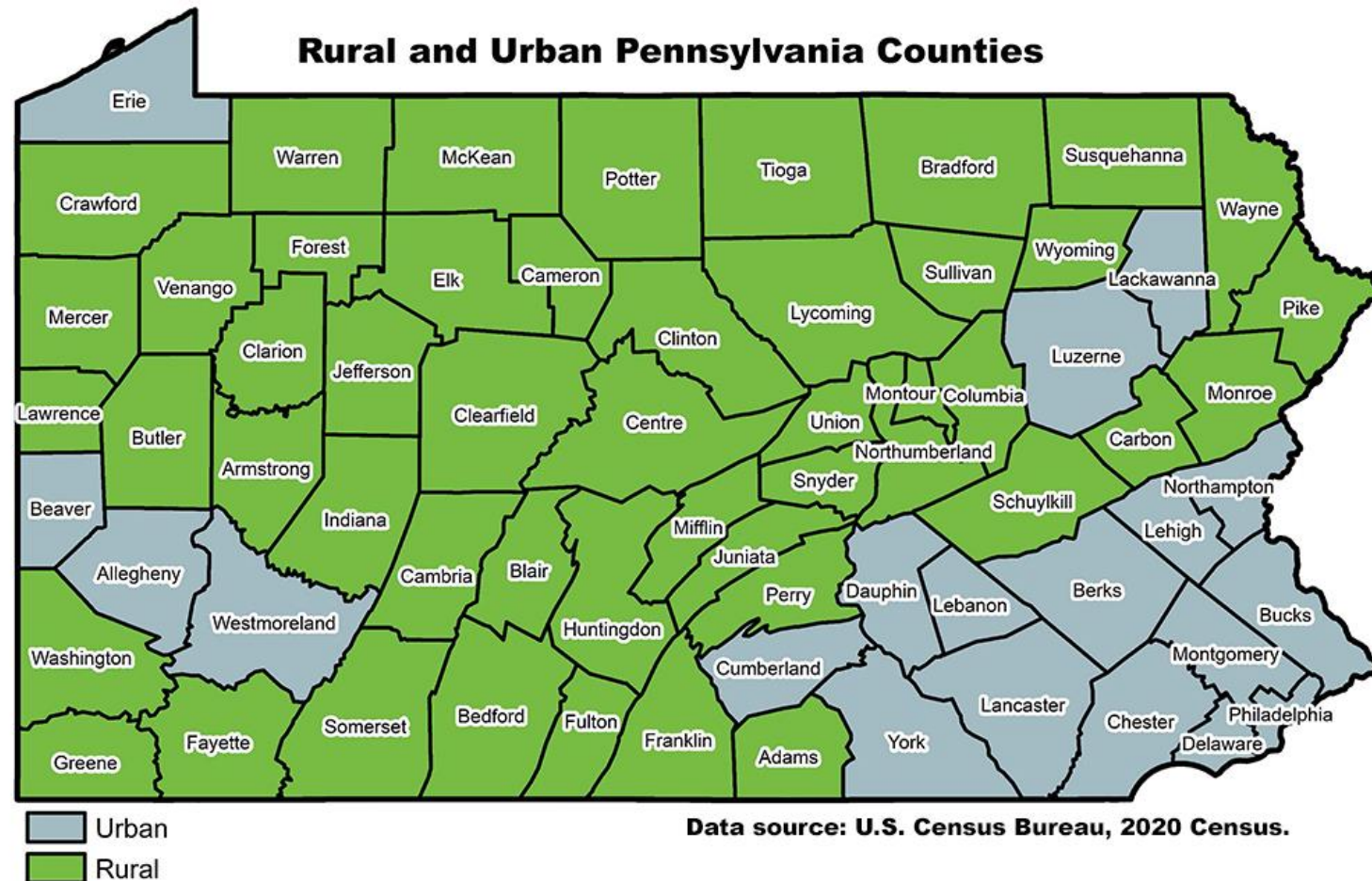
PENNSYLVANIA COMMUNITY HEALTH CENTER LANDSCAPE

- Locations in 54 of Pennsylvania's 67 counties
- Provide more than 3 million visits annually
- Contribute more than \$500 million to economies of local communities and provide more than 3,500 FTE jobs in PA



*Counties without health centers appear in grey

PENNSYLVANIA THROUGH A RURALITY LENS



WHAT IS AN FQHC?

Community Health Centers (FQHCs) offer comprehensive, quality primary medical, behavioral and dental health care. The distinguishing characteristics of FQHCs are:

Fees based on ability to pay

Quality primary healthcare, open to **ALL**

Highly competent healthcare professional team

Consumer/community control

PENNSYLVANIA COMMUNITY HEALTH CENTERS PATIENT DEMOGRAPHICS

Demographics*	2020
Patients	892,521
Children (<18 Years Old)	25.85%
Adults (18-64)	62.74%
Older Adults (65+)	11.41%
Racial and/or Ethnic Minority	54.16%
Hispanic/Latino Ethnicity	20.38%
Black/African-American	32.67%
Other	11.26%
Best Served in Another Language	17.02%

PENNSYLVANIA COMMUNITY HEALTH CENTERS PATIENT CHARACTERISTICS

Characteristics*	2020
Patients at or Below 200% Poverty	84.69%
Patients at or Below 100% Poverty	60.62%
Uninsured	14.99%
Medicaid/CHIP	47.91%
Medicare	13.52%
Other Third Party	23.57%

* Pennsylvania Health Center Program Uniform Data System (UDS) Data,
<https://data.hrsa.gov/tools/data-reporting/program-data/state/PA>

PENNSYLVANIA COMMUNITY HEALTH CENTERS PATIENT SERVICES

Services*	2020
Medical Services	81.98%
Dental Services	22.30%
Mental Health Services	10.31%
Substance Abuse Services	.99%
Vision Services	1.42%
Enabling Services**	8.26%

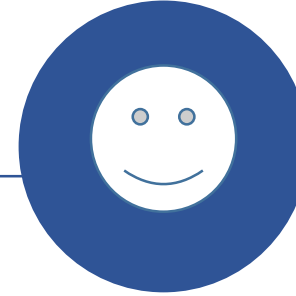
* Pennsylvania Health Center Program Uniform Data System (UDS) Data,
<https://data.hrsa.gov/tools/data-reporting/program-data/state/PA>

** Enabling services include case management, referrals, translation/interpretation, transportation, eligibility assistance, health education, environmental health risk reduction, health literacy, and outreach.

Healthcare Access in Rural Pennsylvania



- **37%** of rural residents do not have access to a primary care physician due to local shortages.
- **26%** of Pennsylvania's rural residents live in Health Professional Shortage Areas (HPSAs), compared to **1.7%** of urban residents.
- **75%** of Pennsylvania's primary care physicians practice in one of the five most populated cities.
- Health centers serve **1 in 5 rural** residents across the U.S.



- **In 2020:**
 - per capita personal income in rural Pennsylvania was **\$15,041** less than the urban per capita personal income.
 - the poverty rate was higher in rural Pennsylvania than urban Pennsylvania.
 - **23%** of rural Pennsylvanians 25 and older had a bachelor's degree, compared to **36% of urban Pennsylvanians 25 and older.**

PENNSYLVANIA COMMUNITY HEALTH CENTERS SOLVING HEALTHCARE ACCESS CHALLENGES



- **Located in underserved communities** with health professional shortages, high levels of poverty, and poor health outcomes;
- **Deliver comprehensive, culturally competent**, high quality primary health care, as well as supportive services such as health education, translation, and transportation;
- **Provide services regardless** of patients' ability to pay and charge for services on a sliding fee scale; and
- **Develop systems of patient-centered** and integrated care that respond to the unique needs of diverse medically underserved areas and populations.



Community Health Centers in Action

THE WRIGHT
CENTER
— for —
COMMUNITY
HEALTH

The Primary
Health
NETWORK

THE WRIGHT CENTER FOR COMMUNITY HEALTH (TWC)

- **Since July 1, 2020**, the Hawley Clinic provided care for 1,525 new patients and conducted 7,548 patient visits.
- At this time, **70 patients** are actively engaged in MAT for opioid use disorder at the Hawley Clinic.
- **The Quarter 4 of FFY 2021-2022 SDOH** screenings at the Hawley Clinic revealed that 23% of patients were experiencing transportation barriers, 18% were experiencing difficulty with utility payments, and 14% were experiencing food insecurity.



THE WRIGHT CENTER FOR COMMUNITY HEALTH (TWC)

- **Delivering Whole Person Care:** Developed a systematic culture of whole person care throughout all service lines.
- **Providing Wrap-Around Services:** Leveraging the role of community health workers to deconstruct barriers and link patients to social services and support.
- **Promoting Prevention:** Centering Lifestyle Medicine, a growing field of medicine focused on: nutrition, exercise, sleep, stress management, relationships and the avoidance of risky substances, to prevent, treat and even reverse chronic disease.
- **Removing Transportation Barriers:** Making care more accessible through a Mobile Unit, School Based Health Clinics, home visiting services, transportation support services & telehealth.



PRIMARY HEALTH NETWORK

- **After over 38 years of service**, Primary Health Network has grown to become the largest FQHC in Pennsylvania and one of the largest in the nation.
- **Last year**, PHN reached over 76,000 patients in 16 counties in Pennsylvania and one county in Ohio
- **In 2021**, PHN completed over 300,000 medical, dental, and behavioral health appointments.
- **We offer** primary care, dental, behavioral health and numerous specialty care services
- **We staff** over 150 physicians, dentists, physician assistants, and certified nurse practitioners, plus over 500 support members



Social Determinants of Health (SDOH)

The conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.



WHAT DOES GOOD HEALTH LOOK LIKE?

Many times we define “good health” as being physical-eating and sleeping well, no aches pains, but in actuality, it is also includes social and economic opportunities:

- Available resources to meet daily needs
- Access to quality education and jobs and health care services
- Available community-based resources for recreational and leisure-time activities
- Reliable transportation
- Positive social norms and attitudes
- Public safety
- Language/Literacy
- Culture



A background image showing three healthcare professionals, two women and one man, looking at a tablet together. The image is overlaid with a semi-transparent blue rectangle containing the text.

OUR GOALS

- **Apply what we know** about SDoH to improve individual and population health.
- **Work together** to establish policies and procedures that positively influence social and economic conditions and those that support changes in individual behavior.
- **Improving the conditions** in which our patients and communities live, learn, work, and play to influence a healthier overall community.

HOW WE ARE HELPING

Community Health Centers, like PHN and the Wright Center are working within their communities to:

- **Screen patients** on their SDOH needs and refer them to appropriate community partners and agencies.
- **Tracking their progress** to ensure needs are being met.
- **Developing innovative programs:**
 - Mobile health
 - Age Friendly Care
 - Telehealth
 - PCMH



Community Health Worker Program Data

Number Screened

5,200

Majority Payer Mix

**Medicaid
Medicare**

Positive Screens

1,100

Gender Breakdown

60% Female

Patients Requesting
Assistance
from CHW

950

Highest
Positive Screened
Age Groups

**40-54
25-39**



**Highest Ranked Social
Needs- By Age Group**

Health Literacy

80 +

Social Isolation/
Companionship

65-79

55-64

40-54

Utility Needs

25-39

Financial Resources
Strain

18-24

**Community
Ranked
Social Needs**

**Highest to
Lowest**

- **Utilities**
- **Social Isolation**
- **Food Insecurity**
- **Housing Instability**
- **Transportation**
- **Health Literacy**
- **Childcare**

COMMUNITY HEALTH CENTER DATA

- Health Center Program Uniform Data System (UDS) Data Overview
- Each calendar year, HRSA Health Center Program awardees and look-alikes are required to report a core set of information, including data on patient characteristics, services provided, clinical processes and health outcomes, patients' use of services, staffing, costs, and revenues as part of a standardized reporting system known as the UDS.
- Health Center Program Uniform Data System (UDS) Data, <https://data.hrsa.gov/tools/data-reporting/program-data/>

FOR MORE INFORMATION

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Mark your Calendars for Upcoming “SPECIAL TOPICS IN RURAL HEALTH” Webinars!

Wednesday, August 3, 2022

9:00 am-10:00 am

Oral Health Access and Workforce: Why is Rural Such a Problem?

Helen Hawkey, Executive Director, PA Coalition for Oral Health, Delmont, PA

Wednesday, August 17, 2022

10:00 am-11:00 am

Transforming Rural Health Care in Pennsylvania through Innovation in Payment and Service

Gary Zegiestowsky, Chief Executive Officer and Janice Walters, Chief Operating Officer, Pennsylvania Rural Health Redesign Center, Harrisburg, PA

Tuesday, September 6, 2022

9:00 am-10:00 am

Cultivating Rural Health Professionals: How We Can Grow Our Own in Pennsylvania

Ben Fredrick, MD, Professor of Family & Community Medicine, Penn State College of Medicine and Program Director, Pennsylvania Area Health Education Center (PA AHEC), Hershey, PA