Improving Connections: Working With Your Local Community Health Centers

April 10, 2020
About COHHIO

- Advocacy
- Housing Ohio Conference
- Landlord Tenant Law
- Housing Info Line
- Fair Housing
- SOAR
- Ohio Votes
- Ohio Balance of State CoC
- Technical Assistance
- Youth Initiative
- HMIS
Webinar Information

All participants lines are muted.

Use the questions feature in the GoToWebinar control panel to submit questions.

This webinar will be recorded and posted to COHHIO’s website.

The PowerPoint is available under handouts.
Ohio Association of Community Health Centers

- Non-Profit membership organization representing Ohio’s Federally Qualified Health Centers (FQHCs) & FQHC Look-Alikes (FQHCLAs) – commonly referred to as Community Health Centers

- **Mission**: To ensure access to high-quality affordable health care for all Ohioans through the growth and development of Ohio's Community Health Centers
What is a Community Health Center?

- Community-based and patient-directed organization, delivering comprehensive, culturally competent, high-quality primary health care services

- The LARGEST primary care network in Ohio (and the country)!
  - Comprehensive care to 1 in 14 Ohioans
  - 800,000 unduplicated patients
  - 56 Organizations with 400+ sites
  - In 70 of Ohio’s 88 counties
Mission Driven

- **Mission**: To provide accessible, comprehensive, and quality primary health care services to medically underserved communities and vulnerable populations

- **Cornerstones**
  - Independent, non-profit or public community-based
  - High-quality and affordable primary care and preventive services
  - Open to all regardless of insurance status or ability to pay
  - Must serve a high-need, medically underserved area or population (MUA/MUP)
  - Governed by the community (>50% board members must be patients)
Ohio Patient Demographics

**Ages Served**
- Under Age 21
- Aged 21 - 44
- Aged 44 - 64
- Aged 65+

**Income Levels**
- 100% and Below
- 101 - 150%
- 151 - 200%
- > 200%

Source: 2018 UDS data
Required Services

- **Primary, Preventive, Enabling**: Provided onsite or through established written agreements and referrals

  - Mental Health
  - Substance Abuse
  - Pharmacy
  - Immunizations
  - Well Child
  - Gynecology
  - Obstetrics
  - Family Planning
  - Pre/perinatal
  - Preventive Dental

  - Diagnostics
  - Screenings
  - Specialty
  - Case Management
  - Health Education
  - Outreach
  - Transportation
  - Translation
  - Emergency Medical Services

90+ Onsite Dental Centers
Types of Providers & Visits

- Providers
  - Primary Care Physicians
  - OB/GYNs & Certified Nurse Midwives
  - Pediatricians
  - Nurse Practitioners
  - Physicians Assistants
  - Dentists
  - Psychiatrists
  - Optometrists
  - Pharmacists
  - Behavioral Health Providers
  - Nurses
  - Dental Hygienists

- Visits
  - Medical
  - Dental
  - Mental Health
  - Substance Use Disorders (SUD) including Opiates
  - Pharmacy
  - Vision
  - Enabling (care coordination, translation, financial eligibility)

Ohio CHCs currently employ more than 6,500 FTE staff: from 2013-2018, that number DOUBLED!
Examples of Enabling Services

- Health Insurance Enrollment/Financial Eligibility Counselors
  - Presumptive Eligibility for Medicaid
  - Medicaid
  - Health Insurance Marketplace
  - Medicare (some locations)

- Care coordination

- Translation
Health Care Opportunities for Sheltered Families and Individuals

Access to Ohio’s Community Health Centers during the COVID-19 Pandemic
Telehealth 101

- Telehealth as defined in Ohio Department of Medicaid’s Emergency Telehealth Rules:
  - The direct delivery of health care services to a patient via **synchronous**, interactive, real-time electronic communication comprising **both audio and video elements**; or
  - Activities that are **asynchronous** and do not have both audio and video elements such as **telephone calls, images transmitted via facsimile machine, and electronic mail**.
Patient Needs for a Telehealth Visit

Relatively private location, and one of the following:

- Mobile device
- Landline phone
- Laptop/computer
- iPad/tablet
When to Connect to a CHC

Sheltered Individual

- Change in Health Status
- Lack of access to or supply of psych or BH medication
- Lack of access to or supply of MAT medication for substance use disorder
- Lack of access to or supply of Chronic disease medication (Diabetes, hypertension, etc)
- Patient has no primary care provider and needs linked for primary care and medical home
- Patient already sees the FQHC and needs follow up care
When to Connect to a CHC

Isolated/Quarantined Individual/Family

- Virtual visit to check in on patient to assist shelter and local Health Department to assess and monitor patient status during isolation or quarantine
- Virtual visit to help shelter and local Health Department confirm/determine the end to isolation/quarantine
- All the same reasons as under shelter resident
Keeping Community In Community Health

- Ohio’s Community Health Centers:
  - Are fully integrated, team-based care practices
  - Excel at implementing evidence-based models
  - Are held to the highest quality standards
  - Accept all, regardless of ability to pay or insurance status
  - Are laser-focused on data analytics and positive patient outcomes
  - Provide wraparound services to support patients’ SDOH

Are locally-cultivated, patient-centered, and OPEN for all Ohioans!
Contact Information

Julie DiRossi-King, COO | jdirossi@ohiochc.org
Dr. Dana Vallangeon, CMO | dvallangeon@ohiochc.org
Find us online: www.ohiochc.org
Mindy Muller, Chair
Butler County Housing and Homeless Coalition
https://www.facebook.com/BCHHC-109784147319767
General Email: bchhcoalition@gmail.com
Email: mindymuller@cdp.training
T: 513/858-1738