

## FQHC Strategy

### Background

This NE area Health System has an ambulatory network with over 1,000 providers in more than 140 practices and 47 specialties. They had recently undergone exponential growth in neighboring counties and were in early stages of developing Population Health Management (PHM) infrastructure, with the goals to improve capabilities in care management, access to care, patient experience and information technology.

The Health System was seeking in particular to optimize its organizational care management infrastructure to support upcoming risk arrangements, expand its care management services to a larger population and maximize revenue capture for essential care management services.

### Approach

CHS brought to bear consulting expertise and a templated toolkit to both determine the most appropriate FQHC go-forward plan and support the full range of implementation through acquisition of FQHC look-alike (FQHC-LA) status. The engagement approach started with an initial assessment:

Our initial assessment determined that this health system would be best served by selecting a first round of 7 existing clinics best poised for FQHC readiness and sustainability for transition to FQHC-LA. CHS' team of financial, operational and clinical experts worked with the health system to configure our evidence-based FQHC development tools, templates and workflows while providing project management and side by side implementation support including interim CFO coverage to ensure success through the following stages of FQHC-LA development.

1. FQHC-LA implementation and new corporation formation
2. Leadership and governance implementation, configuration and implementation support
3. Financial modelling and prospective payment system (PPS) rate development support
4. 6-month compliance period and application preparation and reviews
5. Application submission and support through designation date
6. 12-month rate setting advisory support

## Outcomes

- Established a new 501(c)3 nonprofit corporation with its own board of directors, leadership and staffing that now owns and operates the transitioned clinics
- Receives enhanced reimbursement for Medicaid and Medicare visits through a cost based Prospective Payment System (PPS), ensuring a sustainable expansion of high-quality services for those traditionally underserved
- Positioned to purchase discounted prescription drugs through the 340B Federal Drug Pricing Program, receive automatic Health Professional Shortage Area designation, and access National Health Service Corps providers.
- Provides comprehensive primary care and enabling services, incorporating dental, vision, women's health and behavioral health services, thus providing complete whole person care within a single medical home
- Provides services to all service area residents regardless of their ability to pay without compromising their financial stability, thereby acting as a critical safety net for the most vulnerable in their community
- Serves approximately 40,000 patients representing 117,000 visits annually, with continued growth projected
- Planning additional clinic sites to FQHC look-alike thus expanding access, the provision of care in an economically sustainable model, and reinforcing consistent care management and care model
- Improved readiness for success in value-based payment arrangements

**“COPE Health Solutions brought deep experience and expertise into a collaborative approach with our team that enabled us to not only ensure financial sustainability of current services but also to expand access to care for our Medicaid population and other underserved members of our communities.”**



**James Demopoulos**  
Senior Vice President and  
Chief Operating Officer  
Lehigh Valley Physician Group



To learn more about how we can help you with FQHC strategies, please contact [info@copehealthsolutions.com](mailto:info@copehealthsolutions.com) or call 213-259-0245.