

Expanding Access to Health Care in Underserved Communities

An Invitation to Join the Wisconsin Community Health Center Incubator Program

A Program Developed in Partnership by

WPHCA and UW Center for Nonprofits

With support from the Wisconsin Partnership Program



Center for Nonprofits
UNIVERSITY OF WISCONSIN-MADISON



Introduction

The Wisconsin Primary Care Association, in partnership with the UW Center for Nonprofits, is seeking communities interested in increasing access to primary care in underserved communities across Wisconsin. The goal of this initiative is to:

1. increase awareness of health care access models, including Community Health Centers, rural health clinics and free clinics
2. provide strategic, tactical, and grant support in developing competitive federal Section 330 Community Health Center New Access Point grant applications to establish a new federally qualified health center, commonly known as a Community Health Center.

General Information

The Wisconsin Incubator program has two options for participation:

1. The Planning and Development Process
 - a. A 6- to 12-month robust learning process with Webinars, white papers, meetings and coaching opportunities led by subject matter experts and peers to guide communities on their path to establishing a Community Health Center. Participating communities commit an individual or small group to regular participation.
2. The Mini-Grant
 - a. Through a second application and review, two communities will be selected to receive a \$7,500 grant to further their work toward submitting a federal grant application for a new Community Health Center. Participants who apply for the mini-grant must be participants in the Planning and Development Process.

The Planning and Development Process

This effort will include strategic and tactical support appropriate to each community's stage of readiness. Support will be targeted at:

- **Community organizing:** a process by which a group of community members work to implement programs, policies and other changes, and seek funding. It involves convening all appropriate stakeholders to develop or expand a Community Health Center to provide medical, dental, and behavioral care to additional populations.
- **Organizational development:** Following a community health needs assessment; community coalitions begin the process of developing a 501(c)3 organization with a mission, governance structure, policies and procedures that are compliant with Community Health Center requirements.
- **Federal grant application readiness:** The Health Resources and Services Administration (HRSA) Bureau of Primary Health Care (BPHC) manages a competitive New Access Point grant program to establish new Community Health Centers or expand existing Community Health Centers with new sites in new communities. It only funds applicants that demonstrate the greatest likelihood for successful implementation and program compliance at the time of the grant application. Competitive grants applications must address significant unmet health care needs, demonstrate

viable and sustainable health care and business plans, and incorporate broad community stakeholder collaboration.

- **Operational readiness:** Successful applicants must be prepared to provide care within 120 days of receiving notification of a grant award. This includes implementation of patient care systems (i.e., quality of care standards, referral systems), business operations (i.e., materials management and facilities), financial management (i.e., accounting and internal control systems, audit and revenue cycle, payroll and insurance), human resources management, information technology, and quality/risk management.

Planning and Development Process Milestones and Accomplishments

Participating Communities achieve the following:

1. Short term (3-6 months)
 - a. Increase awareness of the Community Health Center model as an option to increase access to primary care in underserved communities by providing training to community stakeholders on Health Center program requirements, community organizing strategies, and assisting communities with health needs assessments
 - b. Engage communities in developing a community planning team/coalition and developing a timeline/work plan to submit a New Access Point grant
2. Medium term (6-12 months)
 - a. Incubator communities will complete one or more sections of the New Access Point grant: needs assessment, health care and business plan
 - b. At least two incubator communities will complete and submit a New Access Point grant.
3. Long term (12-18 months +)
 - a. Communities will submit competitive New Access Point grant applications, and/or,
 - b. Communities will submit a Look-Alike application (a designation that allows an organization to share some of the financial benefits of a Community Health Center for functioning as a Community Health Center, but lacks a grant award.)
 - c. Wisconsin's underserved communities will have greater access to primary medical, dental, and behavioral health services.
 - d. Wisconsin's underserved communities will leverage resources to increase local economic development through increased jobs and services.

The Mini-Grant

Communities participating in the **Planning and Development Process** may also be invited to apply for one of two \$7,500 grants to be used for costs associated with developing the New Access Point grant application. Mini-grant applicants will be required to submit an FQHC readiness assessment, project plan, and budget. Grant award recipients will be required to make a \$7,500 match. Grant awards will be made based on funding priorities such as communities with high poverty, inadequate access to health care as evidenced by population to provider ratios, special populations, including migrant or homeless individuals; significant unmet health needs, or designated Health Professional Shortage Areas (HPSAs), medically underserved populations (MUPs) or medically underserved areas (MUAs).

Mini-Grant Eligibility

1. Any incubator project must be implemented by Wisconsin organizations in underserved communities for the benefit of Wisconsin residents. The project must be focused on providing primary medical care, with provisions for providing or contracting for dental and behavioral care.
2. Communities are required to engage a broad range of stakeholders, including existing Community Health Centers, tribal, or rural health clinics, hospitals, private clinics, social service agencies, public health departments, employers and others.
3. Incubator grant award recipients must be a 501(c)3 or identify a separate 501(c)3 or public health department to serve as the fiscal agent to receive and administer grant funds on behalf of the applicant.

Process to Join Wisconsin FQHC Incubator Program

1. **Submit a letter of intent to participate, no longer than 3 pages, by Wednesday, October 19, 2011.**

Letters should address the following:

- a. Contact information for a lead community convener/facilitator
- b. Description of the unmet community health needs and the geographic area to be considered as part of the Incubator project
- c. List of those currently involved in improving access to health care in this community. Specifically identify individuals, organizations and leaders committed to participating in the Incubator project and addressing unmet health needs within the community.
- d. Describe activities that have been taken to develop community health access options.
- e. Please share activities, resources or tools that you think would be helpful to your efforts.
- f. Outline activities that participation in the Incubator Program would allow the organization to pursue in the near future.
- g. Note interest or intent to also apply for the \$7,500 FQHC Incubator grant.
- h. Send Letters of Intent by e-mail or postal service to:

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Community Relations Specialist
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