

care, and health education. A total of \$33,000 in grants ranging from \$5,000 to \$7,000 will be awarded in this funding cycle.

Contact: [Link to Complete RFP](#)

Department of Housing and Urban Development's Community Challenge Planning Grants and the Department of Transportation's TIGER II Planning Grants

Application deadline: Jul 26, 2010

Funding to foster reform and reduce barriers to achieving affordable, economically vital, and sustainable communities; and grants to fund the planning, preparation, or design of surface transportation

FY10 Partnerships Active in Communities to Achieve Health Equity

Application deadline: Aug 2, 2010

Grants to improve health outcomes among racial and ethnic minorities through the establishment of community-based networks.

2011 Healthy Vision Community Awards Program

Application deadline: Aug 30, 2010

Funding for health education activities that support healthy vision and the Healthy Vision 2010 objectives.

HRSA Primary Care Residency Expansion and Nurse Managed Health Clinics Grants

Application Deadline: July 19, 2010

Certain health centers may be eligible for these new grants. Program details, including eligibility requirements, are available on the HRSA grant website.

HRSA School-Based Health Center Capital Program

Application Deadline: July 30, 2010

The Health Resources & Services Administration (HRSA) held a technical assistance call this week on this new funding opportunity for equipment purchases. A copy of the presentation is available online. To listen to a recording of the call, dial 1 (888) 566-0133; passcode 2165.

FY10 Partnerships Active in Communities to Achieve Health Equity

Application Deadline: August 2, 2010

The purpose of the PAC Program is to improve health outcomes among racial and ethnic minorities through the establishment of community-based networks that employ evidence-based disease intervention strategies; address social determinants and environmental barriers to healthcare access; and increase access to and utilization of preventive health care, medical treatment, and supportive services.

National Eye Institute Healthy Vision Community Awards (HCVA) Program

Application Deadline: August 30, 2010

The HVCA program provides up to \$10,000 in seed money to nonprofit and community-based organizations to support grassroots eye health education efforts. Proposed projects must focus on eye health education, be innovative, have the potential for sustainability once funding ends, and address one or more of the following topics:

- Age-Related Macular Degeneration
- Diabetic Eye Disease
- Glaucoma
- Occupational Eye Safety
- Vision Rehabilitation

There is an online application process for the program.

The RGK Foundation

Application Deadline: Rolling

The RGK Foundation supports a range of programs in such areas as education, community and health. The medicine/health grant program supports programs that promote the health and well-being of children, access to health services and foundation-initiated programs. Grants average \$25,000 and range from several thousand to \$150,000. Eligible applicants include nonprofit organizations with 501 (c)(3) status. *All applicants first must submit a letter of inquiry completed online.*

Resources

The audio transcript of the June 15, 2010 national provider conference call, "ICD-10 Implementation in a 5010 /Environment", hosted by the Centers for Medicare & Medicaid Services (CMS) is now available. To access the transcript, go to http://www.cms.gov/ICD10/02c_CMS_Sponsored_Calls.asp on the CMS website. In the Downloads section select the June 15, 2010 ICD-10 Conference Call Zip file. The audio transcript is 1 hour and 51 minutes in length. The written transcript will be available soon.

Medicaid Coverage and Spending in Health Reform: National and State-by-State Results for Adults at or Below 133% FPL (Executive Summary)

Analysis, performed by the Urban Institute, shows that the expansion of Medicaid under the health reform law will significantly increase the number of people covered by the program and reduce the uninsured in states across the country, with the federal government picking up the vast majority of the cost. Analysis includes the impact on all 50 states and the District of Columbia, and the distribution of new Medicaid enrollees and costs.

Organization: Kaiser Commission on Medicaid and the Uninsured
Date: 05 / 2010

[Solving the Problem of Childhood Obesity Within a Generation: White House Task Force on Childhood Obesity](#)

Discusses children's health and the epidemic of childhood obesity. Mentions challenges facing children in underserved rural communities across the country.

Organization: White House
Date: 05 / 2010

Medicare Offers Guidance for Billing and Coding Professionals

The Centers for Medicare & Medicaid Services (CMS) has developed a resource for billing and coding professionals. The product is designed to be easy to understand and accessible, and is available at no charge. While designed for fee for service providers, FQHC billers and coders might want to review the information. For more information on the new suite of products and resources for billing and coding professionals, visit the [Medicare Learning Network billing and coding professional website](#).

HHS Launches New Website for Consumers

The U.S. Department of Health & Human Services recently unveiled [www.HealthCare.gov](#), an online tool that will help consumers find information and resources to access quality, affordable health care coverage. Set in motion by the Affordable Care Act, the site provides consumers with both public and private health coverage options tailored specifically for their needs in a single, easy-to-use tool. ABC News offers a [brief introduction to the new site](#) and its functionality.

HHS Sends Final "Meaningful Use" Rules to OMB

The Department of Health & Human Services (HHS) has sent its final meaningful use rules and certification criteria for electronic health record (EHR) system testing to the Office of Management and Budget (OMB), which is typically one of the last bureaucratic hurdles before rules are released. OMB received a copy of the meaningful use final rule Monday, according to a posting on the [OMB website](#). Under the Medicare provisions of the stimulus law, to receive an estimated \$14 billion to \$27 billion in federal subsidies for EHR purchases, healthcare providers must use certified electronic health records in a "meaningful manner."

New Site Allows Public to Compare Hospital Outpatient Data

The public can now review data on the quality of outpatient care provided by individual hospitals at the Centers for Medicare & Medicaid Services (CMS) [Hospital Compare website](#). The [site](#) previously contained only data on inpatient care quality. All the data are derived from records of Medicare patients treated at more than 3,600 hospitals nationwide. As with the inpatient data, hospitals show wide variation in the measures. With CMS already launching Hospital Compare, [Nursing Home Compare](#), and [Home Health Compare website](#), can "Community Health Center Compare" be in our future?

Quality Measures Certain to Be Integral Part of "Meaningful Use"

According to a Healthcare IT News [article](#) this week, even before healthcare providers begin to demonstrate the first set of meaningful use requirements next year, federal health information technology policymakers are already working on how high to set the bar for providers to qualify for the next round of financial incentive payments in 2013. One set of criteria - that providers show the use of health IT to achieve healthcare quality outcomes - will appear in progressively more sophisticated stages. A tenet of meaningful use, quality measures are expected ultimately to help providers both hone their treatment protocols and lower healthcare costs. The National Quality Forum (NQF), a performance improvement organization, is looking at several sources of quality data from which to identify categories of measurement and to weigh the readiness of providers.

New Report on Growing Rate of Senior-Aged STDs

On the heels of National HIV Testing Day (June 27), a [Reuters report](#) on a study in the Annals of Internal Medicine indicates that the rate of sexually transmitted diseases (STDs) in older men taking erectile dysfunction (ED) drugs like Viagra, Cialis and Levitra is twice as high as in their non-medicated peers. According to the report this is not a reflection on the medications, but rather on the sexual behavior and practices of the males using them to treat ED. Part of the problem is that older adults appear to forego safe sex practices. For instance, the researchers note, 50-year-olds are six times less likely to use a condom than men in their 20s. The most commonly found STD was HIV, followed by chlamydia, syphilis, and gonorrhea.

HHS News

National Health Service Corps (NHSC) is expanding and reaching out to better serve communities in need around the country and is currently recruiting 4,000 new Corps members to receive loan repayment awards. New materials have been developed that help to outline the program's eligibility requirements and the process to apply, which can be found at: <http://nhsc.hrsa.gov/loanrepayment/apply.htm>

The U.S. Department of Health and Human Services took an important step to improve access to critical HIV/AIDS prescription drugs.

The \$25 million reallocated for AIDS drug assistance provides resources to States that have AIDS Drug Assistance Program (ADAP) waiting lists or have implemented strategies to contain costs and delay or prevent a waiting list. Improving access to care and treatment for people living with HIV is a top priority for HHS. These funds are just one part of a broader effort to improve the health status of people living with HIV. Created under the Affordable Care Act, the Pre-Existing Condition Insurance Plan will provide a new health coverage option for Americans who have been uninsured for at least six months and have been unable to get health coverage because of a health condition-including HIV. This option will be available until 2014, when insurers will be banned from discriminating against adults with pre-existing conditions.

For more information, see the fact sheet:

www.hhs.gov/news/facts/adap.html To learn more about the Pre-Existing Condition Insurance Plan, please visit: www.healthcare.gov/law/about/provisions/pcip/

HHS Secretary Kathleen Sebelius Launches Let's Move Cities and Towns

Jun 14, 2010 -- Secretary of Health and Human Services Kathleen Sebelius last week launched the Let's Move Cities and Towns component of the Let's Move! campaign at the U.S. Conference of Mayors Annual Meeting in Oklahoma City, OK.

[HHS Names Committee to Update Criteria for Medically Needy Areas](#)

The Health and Human Services Department (HHS) on Friday appointed a new panel charged with updating the criteria for medically underserved populations (MUPs) and Health Professional Shortage Areas (HPSAs). Those named to the 24-member committee, created as part of the Democrats' health reform law, represent the programs most affected by the MUP and HPSA designations, including community health centers and rural health clinics.

Pre-Existing Condition Insurance Plan Available August 1, 2010 for Eligible Mississippians

The U.S. Department of Health and Human Services (HHS) has announced the establishment of a new Pre-existing Condition Insurance Plan (PCIP) that will offer coverage to uninsured Americans who have been unable to obtain health coverage because of a pre-existing health condition. On August 1, eligible residents of Mississippi will be able to apply for coverage through the state's Pre-Existing Condition Insurance Plan program.

The Pre-Existing Condition Insurance Plan will provide a new health coverage option for all Americans who have been uninsured for at least six months, have been unable to get health coverage because of a health condition, and are a U.S. citizen or are residing in the United States legally.

Created under the Affordable Care Act, the Pre-Existing Condition Insurance Plan is a transitional program until 2014, when insurers will be banned from discriminating against adults with pre-existing conditions, and individuals and small businesses will have access to more affordable private insurance choices through new competitive Exchanges. In 2014, Members of Congress will also purchase their insurance through Exchanges.

Visit www.healthcare.gov to learn more about the Pre - Existing Insurance Plan Program.

NEWS

[The Coming Medicaid Expansion](#)

Under the new healthcare law, Medicaid will expand by at least 16 million people as eligibility is raised in 2014 to a new nationwide standard of 133 percent of the poverty level. The surge in enrollment will be highest in states in the South and West, where eligibility standards have been stringent.

[AIDS Waiting Lists Grow Amid Economic Woes](#)

Many people with HIV are losing jobs, along with insurance, or discovering that they are infected at a time when the AIDS Drug Assistance Program - ADAP - they depend on is being overwhelmed by demands being made on it. Federal and state budgets aren't meeting the challenge.

[Blacks Most Likely to Be Hospitalized for Hypertension](#)

Blacks are hospitalized for hypertension about five times as often as whites, six times as often as Asians and Pacific Islanders, and twice as often as Hispanics, according to survey data from the 2009 National Healthcare Quality and Disparities Reports.

[Depression Late in Life Nearly Doubles Dementia Risk](#)

Elderly people who are depressed may be at twice the risk of developing dementia or Alzheimer's disease over time -- but it's unclear whether depression causes dementia or vice versa, researchers said.

The Centers for Disease Control and Prevention's (CDC) Division of HIV/AIDS Prevention (DHAP) is launching a series of five targeted HIV/AIDS communication products for partners.

e-HAP FYI will provide a monthly digest consisting of DHAP announcements, federal HIV and AIDS announcements, resources, Act Against AIDS campaign updates and notifications of other developments in CDC's HIV prevention science, programs, and policies; e-HAP In-Depth will provide quarterly overviews and analyses of emerging and ongoing issues of critical importance to domestic HIV prevention (e.g., emerging biomedical interventions, resource allocation, CDC's investments in disproportionately affected communities, and policy changes);

e-HAP Pubs will offer bimonthly notification of CDC's HIV-related scientific publications including summaries and links to full-text articles;

e-HAP Web Updates will alert you to updates to the DHAP Web site (www.cdc.gov/hiv) and social media news updates; and

e-HAP Direct (targeted distribution) will provide as-needed statements, Dear Colleague letters, and other communications from the Division.

If you have any questions or suggestions, please contact the newly formed DHAP Office of Communications at DHAPCommunications@cdc.gov.

[SAMHSA and the Ad Council Launch National Campaign to Raise Awareness About Mental Health Problems in Multicultural Communities](#)

Jul 8, 2010 -- The Substance Abuse & Mental Health Services Administration (SAMHSA), in collaboration with the Ad Council, announced today the launch of a national public service advertising campaign to promote recovery from mental health problems within multicultural communities by educating and inspiring young adults to talk openly about issues of mental health.

[Obama Uses Recess Appointment to Install Berwick as Head of Medicare, Medicaid](#)

Jul 8, 2010 -- Kaiser Health News reports that using his authority to make interim appointments while Congress is in recess, President Obama yesterday **appointed** Donald Berwick, M.D., as administrator of the Centers for Medicare & Medicaid Services.

[Obama Administration Unveils National Strategic Plan to Prevent and End Homelessness](#)

Jun 22, 2010 -- Cabinet members and Administration officials from the United States Interagency Council on Homelessness deliver a plan to finish the job of ending veteran and chronic homelessness by 2015 and among families, youth, and children by 2020.

[Health Centers Will Save Billions Under Health Care Reform Act, Says Study](#)

The recently enacted health care reform legislation provides an additional \$11 billion in funding for community health centers, or CHCs, during the next five years, and, according to a new research brief, this will enable CHCs to double the number of people they serve by 2015. The cumulative effect should produce at least \$180 billion in system-wide health care savings by 2019, say the brief's authors.

[Obama to Outline Plan to Cut H.I.V. Infections](#)

President Obama will unveil a new national strategy this week to curb the AIDS epidemic by slashing the number of new infections and increasing the number of people who get care and treatment. In the report, the administration calls for steps to reduce the annual number of new H.I.V. infections by 25 percent within five years. "Approximately 56,000 people become infected each year, and more than 1.1 million Americans are living with H.I.V.," the report says.

Clinical Data Often Undervalued, Underutilized

Electronic medical records carry the promise of physicians being able to analyze patient data to identify trends and patterns that might help patient care. But health care organizations are failing to see that potential, because they are dealing with data overload that is expected to worsen as more of them work toward meaningful use of electronic medical records.

CMS Medicare and Medicaid Programs; Electronic Health Record Incentive Program

On July 13, 2010, the Centers for Medicare & Medicaid Services (CMS) released a final rule outlining the Medicare and Medicaid incentive guidelines for Eligible Providers (EPs) and Eligible Hospitals (EH) for Stage 1 of Meaningful Use (MU). The final rule defines the minimum requirements that providers must meet through their use of certified Electronic Health Record (EHR) technology in order to qualify for the payments. The MU rule is to be used in tandem with rules that have been released by the Office of the National Coordinator that define Certified EHR Technology.

CMS has modified the eligibility requirements for Critical Access Hospitals (CAH) by expanding the definition of acute care hospitals to include the CMS Certification Number (CCN) of 1300-1399, which now enables CAHs to qualify for the Medicaid incentives under MU as long as 10% of their inpatient census constitutes Medicaid recipients. Also, CMS has incorporated a definition of a hospital-based EP as one who performs substantially all of his or her services in an inpatient hospital setting or emergency room only, which conforms to the Continuing Extension Act of 2010. Additionally, the final rule reduces the the number of quality measures for both EHs and EPs to those that are NQF-endorsed and electronically specified as of the publication of the final rule. Further, the rule establishes a core set of Objectives(15) and Measures to be met by all EPs and EHs and a menu set of Objectives and Measures of which any five may be chosen.

Another rurally important note is that CMS has expanded the definition of Physician Assistant-led Rural Health Clinics: 1) When a PA is the primary provider in a clinic (for example, when there is a part-time physician and full-time PA, CMS would consider the PA as the primary provider); 2) When a PA is a clinical or medical director at a clinical site of practice; or 3) When a PA is an owner of an RHC.

Requirements for meaningful use incentive payments will be implemented over a multi-year period, phasing in additional requirements that will raise the bar for performance on IT and quality objectives in later years. The rule also includes the formula for the calculation of the incentive payment amounts; a schedule for payment adjustments under Medicare for covered professional services and inpatient hospital services provided by EPs, eligible hospitals and CAHs that fail to demonstrate meaningful use of certified EHR technology by 2015; and other program participation requirements.

http://www.ofr.gov/OFRUpload/OFRData/2010-17207_PI.pdf

Initial Set of Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology

On July 13, 2010, the Office of the National Coordinator for Health Information Technology (ONC) released a final rule to complete the adoption of an initial set of Standards, Implementation Specifications, and Certification Criteria, to align with the requirements of the Centers for Medicare and Medicaid Services (CMS) Meaningful Use Incentive Stage 1 objectives and measures. The rule establishes the specifications to attain Certified Electronic Health Record (EHR) Technology, either as complete systems or modules, to meet the CMS Stage 1 requirements. The Complete EHRs and/or EHR Modules will be tested and certified according to adopted certification criteria to ensure proper implemented adoption standards and implementation specifications comply with the certification criteria.

http://www.ofr.gov/OFRUpload/OFRData/2010-17210_PI.pdf

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[Unsubscribe](#) *Mississippi Primary Health Care Association distributes the MPHCA e-Update every Wednesday to inform members and partners of issues important to Community Health Centers.*

The MPHCA e-Update is the official e-bulletin of the Mississippi Primary Health Care Association. It is e-mailed weekly as a membership service to Mississippi Community Health Center executive leadership, board members, health professionals, non-clinical staff, and other MPHCA members and partners.

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