



## MPHCA E-UPDATE

March 11, 2011

### MPHCA NEWS

#### **An Appeal from MPHCA and NACHC - Please Help Us Showcase CHCs during the One-Year Anniversary Week (March 20-27) Celebrating the Affordable Care Act (ACA)**

As most of you know, Congress is out of session the week of the NACHC Policy and Issues Forum and that week is also the one-year anniversary of the passage of the Affordable Care Act. We know that many of you and your centers' folks will be in DC during that time. However, we are asking that EVERY member of Congress be invited to visit a MS health center while they are home the week of March 21<sup>st</sup>

We cannot stress the importance of getting our Congressmen into our centers enough as we expect Congress to continue their current efforts to cut CHC appropriations.

We need our CHCs without representatives going to P&I, to make an extra effort to meet with their Members back home. We are asking that each of you invite your respective Congressmen to visit your center during the week of March 21<sup>st</sup>. Of course, we know this is short notice but it has never been more important for your Congressman to see the great work of your center and its contributions to the communities you serve and the voters that elected him!!!

Mississippi and other states have challenged the constitutionality of ACA and there will probably be press coverage (maybe more negative than positive considering our Governor's opposition to ACA) during the week but nonetheless, there will be a lot of visibility around ACA and a lot of other groups will be highlighting it, so we encourage your center to do something to celebrate or acknowledge ACA's importance to health centers.

To help with events or Congressional visits at your centers during the special week, NACHC is working with HHS to live stream Secretary Sebelius's address to the P&I on Wednesday afternoon 3/23 (we expect that to occur sometime between 3:30 and 4:00) so that any center could access it and broadcast it from a computer and even project it on to a larger screen for staff, board, patients and guests to view as well.

HHS will be sending representatives out to cover events/Congressional visits at HHS-selected CHCs and will be able to provide some logistical and media assistance to health centers holding events chosen by HHS to highlight. NACHC will be letting MPHCA know very shortly, which CHCs are being targeted by HHS to host events and we will share that information with all of you as soon as it is received.

**If you are willing to invite your Congressman to visit your CHC or to hold an event in recognition of the one-year anniversary of ACA at your center, please send Kim Hancock an email and let her know of your interest so that she can coordinate with NACHC and HHS to make sure HHS-selected, MS CHCs are fully-informed and prepared to conduct a successful event or**

**Congressional visit. It is our hope to have at least one event in each Congressional District for MS.**

NACHC and MPHCA have been repeatedly told that health centers are being watched at "the highest" levels of the administration and given the benefits for health centers and their patients in the ACA, it is appropriate that we try recognize this anniversary locally in as many places as possible. NACHC is working with HHS to make templates and materials available for events and to provide as much assistance as they can.

**Again, please let Kim Hancock know if you are interested in holding an event.**

## MPHCA EVENTS/EDUCATIONAL OFFERINGS

**March 31, 2011**

**Clinical Measures Workshop Part II**

Flowood, MS

For more information, contact Joyce Smith at 601-981-1817 or [jsmith@mphca.com](mailto:jsmith@mphca.com).

**April 1, 2011**

**Billing and Coding Seminar**

Flowood, MS

For more information, contact Joyce Smith at 601-981-1817 or [jsmith@mphca.com](mailto:jsmith@mphca.com).

**May 12-13, 2011**

**First Annual Medical Directors Retreat**

Vicksburg, MS

For more information, contact Joyce Smith at 601-981-1817 or [jsmith@mphca.com](mailto:jsmith@mphca.com).

**September 21-24, 2011**

**MPHCA to Convene 25th Annual Conference & 30th Anniversary Celebration**

Harrah's Tunica & Mid-South Convention Center/Robinsonville, MS

For more information, contact Kim Hancock at 601-981-1817 or [khancock@mphca.com](mailto:khancock@mphca.com)

Watch for more information coming soon to [www.mphca.com](http://www.mphca.com) & we hope to see you in 2011.

**For complete information on trainings listed above, please click on**

**[http://www.mphca.com/Trainings\\_and\\_Events.htm](http://www.mphca.com/Trainings_and_Events.htm).**

## TRAINING OPPORTUNITIES

**Tips for Implementing Your Quality Improvement Plan** with Jan Wilkerson of the Georgia Primary Care Association **Thursday, March 31st, 2011 from 2pm to 3pm EST**. Focus on implementing QI plans, identifying strategies to advance goals, evaluation of intervention impacts and disseminating findings throughout the organization. Slides will be emailed and available online prior to the conference call at <http://www.hrsa.gov/qualityimprovement/>). Telephone: 888-989-0722 Participant passcode: 2341898. Audio replay available one hour after session ends at Telephone Number: 888-568-0877, Passcode: 2355

Archive: [Maximizing the Effectiveness of Quality Improvement Plans](#) with HRSA's Jim Macrae and Kathy Reims Focus on importance of QI planning, program requirements and elements of effective QI plans.

National Center for Farmworker Health [FREE and discounted trainings and technical assistance](#) APPLY TODAY! Topics include customer service, cultural competency, governance, strategic planning, communication, health literacy, leadership, developing promotora programs and more. DEADLINE March 18th, 2011. Great opportunity for migrant health centers.

[Mental Health First Aid Monday and Tuesday, May 23 & 24, 2011](#) 9am to 5pm at IKEA Orlando Resort. Intended for Primary care providers, educators, businesses, parents, clergy & anyone interested in mental health. Register by May 9th, 2011 for \$149.00 per person. Another opportunity will be offered in Tampa September 19-23, 2011. For learning goals and objectives, click [here](#). Excellent overview of key mental health topics for primary care providers

## MISSISSIPPI & MEMBER NEWS

### Letter from Mary Wakefield in Response to NACHCs request to Secretary Sebelius

As many of you may remember, in December of last year ***NACHC sent a letter to Secretary Sebelius raising concern about state funding cuts to health centers in light of the increased federal investments in the Affordable Care Act (ACA) while recognizing the severe fiscal situation facing most states.*** Mary Wakefield has responded to that letter on behalf of Sec. Sebelius noting the importance of a continued federal-state partnership in supporting the work of health centers, outlining what the federal dollars are intended to do and urging continued or expanded state, local and private support to achieve the goals of the ACA law.

[Click here to view the letter from Mary Wakefield.](#)

[Click here for NACHCs original letter to Secretary Sebelius.](#)

### [Council of State Government: Medicaid and CHIP Eligibility - Update](#)

An overview of the status of Medicaid and CHIP eligibility rules throughout the states. This short brief presents facts and figures that summarize current income eligibility rules in each state.

## POLICY & REGULATION

### Comments Sought on FTCA for Non-Health Center Patients

Last week, the Department of Health & Human Services (HHS) released [FTCA Medical Malpractice Program Regulations: Clarification of FTCA Coverage for Services Provided to Non-Health Center Patients](#). **HHS is accepting comments on the proposed rule until April 29th.**

### Federal Tort Claims Act Medical Malpractice Program Regulations

Last week HHS released [FTCA Medical Malpractice Program Regulations: Clarification of FTCA Coverage for Services Provided to Non-Health Center Patients](#). **Comments are due April 29th**

***and NACHC will be submitting comments and encourages PCAs and health centers to also weight in.***

#### Congressional Leaders Show Few Signs of Compromise as Budget Showdown Looms

Congressional leaders showed few signs of compromise in their ongoing budget battle Sunday, with Republican and Democratic leaders publicly accusing one another of not being serious about crafting a responsible federal spending plan quickly.

## FINANCE & PAYMENT

### **CMS Issues Guidance on Past Denied Vaccine Claims**

The Centers for Medicare & Medicaid Services (CMS) has discovered an error with Federally-Qualified Health Center (FQHC) 77x type of bills in the Fiscal Intermediary Shared System; bills containing Influenza or Pneumococcal vaccine administration Healthcare Common Procedure Coding System codes are being returned to providers (RTP'd) with reason code 32958. CMS has instructed Medicare contractors to temporarily deactivate reason code 32958 pending a permanent fix to allow these HCPCS codes on 77x type of bills. Therefore, FQHC providers may now resubmit all claims that have been RTP'd for reason code 32958 for reprocessing. A permanent fix to this issue is scheduled to be implemented on Monday, April 4, 2011.

## HEALTHCARE HEADLINES...

## BUSINESS NEWS, TRENDS & ANALYSIS

### **HHS Secretary: ACOs Don't Necessarily Need Hospitals**

In an interview with MedPage Today, Health & Human Services (HHS) Secretary Kathleen Sebelius discusses that accountable care organizations (ACOs) do not necessarily need to include a hospital, [FierceHealthCare](#) reports. Her remark was in response to concerns expressed by some physician groups that ACOs would be dominated by hospitals and physicians would be forced to give up their small or independent practices. The Secretary emphasized that HHS wants to see a lot of different models of innovation and care delivery systems emerge with the formation of ACOs.

### **HHS Awards Early Innovator Grants**

HHS announced the award of **seven cooperative agreements to help a group of "Early Innovator" states design and implement the information technology infrastructure** needed to operate Health Insurance Exchanges. Kansas, Maryland, New York, Oklahoma, Oregon, Wisconsin, and a consortium of New England states will receive a total of approximately \$241 million. [Click here to see the press release.](#)

### **President Offers Opt Out with Conditions**

[President Obama](#) has thrown his support behind a bill that would permit states to opt out of key features of the [healthcare reform](#) law before they take effect, including the controversial requirement that virtually all adult Americans buy insurance. The caveat, though, is that states must offer alternatives that provide comparable coverage to at least as many of the uninsured as the new law would, at no greater cost to federal taxpayers. It's a move that invites opponents of the law to shift from repealing it to improving it.

### **Score for Healthcare Reform Law Now 3-2**

Last Tuesday night, D.C. Federal Court Judge Gladys Kessler upheld the Affordable Care Act, marking the third time that a court has reviewed the health reform law on its merits and found it constitutional, including the individual responsibility provision of the law. Judges in Florida and Virginia struck down the provision. The law will wend its way to the Supreme Court for a final judgment of whether it is constitutional or not.

### **Judge: States Must Continue with Health Overhaul**

A federal judge who declared President Barack Obama's health care overhaul unconstitutional ruled Thursday that states must continue implementing it while the case makes its way through the courts.

### **Experts Say Affordable Care Act Sets Nation on Right Course**

In the latest Commonwealth Fund/*Modern Healthcare* Health Care Opinion Leaders Survey, more than nine of 10 respondents agreed that the Affordable Care Act sets the right course for health reform. And despite wide differences of opinion in Congress, and varied levels of support among the general public, nearly seven of 10 (68%) of the experts surveyed favor implementing the law with little or no change. The survey's findings are discussed in a Commonwealth Fund [data brief](#) published this week.

### **Health Reform Across the States: Increased Insurance Coverage and Federal Spending on the Exchanges and Medicaid**

A new report by the Robert Wood Johnson Foundation estimates the effects of the Affordable Care Act (ACA) on states, in particular the increases in insurance coverage, subsidies in the exchanges, Medicaid enrollment and federal spending.

### **States Consider Exchange Legislation**

19 states and DC proposed legislation related to health insurance exchanges that will set up governance and administrative structure. The proposed bills generally include broad policy requirements but leave the operational details to those charged with governing the exchange.

### **Doctors Should Discuss Obesity with Patients**

Patients told by their physicians they were overweight or obese were more likely to acknowledge a weight problem and try to do something about it, a new study shows. Researchers from the Medical University of South Carolina and Imperial College London found that getting an honest assessment from a physician appeared to be a key factor in whether or not study participants considered themselves overweight.

### **Many Americans Have Poor Health Literacy**

A 2006 study by the U.S. Department of Education found that 36 percent of adults have only basic or below-basic skills for dealing with health material. This means that 90 million Americans can understand discharge instructions written only at a fifth-grade level or lower. About 52

percent had intermediate skills: They could figure out what time a medication should be taken if the label says "take two hours after eating," while the remaining 12 percent were deemed proficient because they could search a complex document and find the information necessary to define a medical term.

### **FDA Approves New Drug for COPD Exacerbations.**

The FDA has approved roflumilast, a phosphodiesterase type 4 inhibitor, to reduce the number of exacerbations from severe chronic obstructive pulmonary disease (COPD), the agency announced on Tuesday. Roflumilast is approved for adults with severe COPD to treat their symptoms of excess mucus and cough. It is to be taken as a daily pill. A medication guide will accompany the drug to alert patients of the risk for changes in mood, thinking, or behavior, and unexplained weight loss. Common adverse effects include diarrhea, nausea, headache, insomnia, back pain, reduced appetite, and vertigo. [FDA news release](#)

### **Americans Want Docs to Be Online**

A new survey from Intuit Health, the developer of patient portal and communication technology, finds two major trends when it comes to Americans and their healthcare: they're worried about their medical bills, and they expect their physicians to be easily accessible online.

### **Hazards: Misuse of Drugs Crowds Emergency Rooms**

Some 700,000 Americans are taken to the hospital each year after ingesting drugs, both legal and illegal, a new study reports. And the care costs nearly \$1.4 billion in emergency room charges alone.

### **Program Cuts Cavities in Low-Income Toddlers**

Preventive dental care from pediatricians and family doctors may help reduce the widespread problem of early childhood cavities in low-income kids, a new study finds.

## **WORKFORCE DEVELOPMENT**

### **The National Health Service Corps (NHSC)**

The National Health Service Corps (NHSC) announced a change in policy regarding the number of NHSC scholars at sites with the greatest need (currently a HPSA score of 17 or higher, depending on discipline and specialty). Previously, the Corps has allowed only one scholar placement at sites with the greatest need to maximize the number of sites served and to geographically distribute the NHSC scholars. NHSC will now consider requests for up to two scholar placements per site for all disciplines on a case-by-case basis.

### **NHSC Announces Online Applications and FQHC Pre-Approval**

NACHC reports that at the National Health Service Corps (NHSC) Advisory Council meeting February 10-11, **NHSC announced that it plans to roll out online applications in June with Community Health Centers being PRE-APPROVED!** This will eliminate the need to register sites as grantees/sites do now. FQHCs will only have to enter and update site vacancies and will be able to do that directly through an on-line customer portal. **NHSC will notify health**

**centers when the registration process has been eliminated and the online customer service portal is available for posting vacancies.**

**Applications Invited for Academy Health/Aetna Foundation Minority Scholars Program.**

The **Aetna Foundation** has announced that it is continuing its professional development program for minority health researchers in partnership with **Academy Health**, a professional society for health services researchers and health policy analysts. Candidates must be full-time graduate students, postdoctoral fellows, or clinical fellows in health services or disparities research and identify themselves with one or more of the following underrepresented minority groups: Black/African-American; Hispanic/Latino; and American Indian/Alaska Native. Complete program guidelines and the online application are available at the Academy Health Web site.

**Contact:** [Link to Complete RFP](#)

## CLINICAL QUALITY

**RSA Announcement: Open Enrollment for HRSA's PSPC 3.0**

You are invited to join the HRSA's Patient Safety and Clinical Pharmacy Services Collaborative (PSPC) to improve health outcomes and medication safety for high-risk patients in your community. For the past twenty-nine months, PSPC has positioned over 120 communities in 43 States to transform health care delivery to high-risk patients with impressive results in patient safety and overall health status using a rapid quality improvement model. Community based teams, as part of a national learning network, learn from the success of other teams and implement these practices through practical steps that provide integrated care in a primary health home, with sustainable and measurable delivery of medication management.

**We are excited to share with you that the PSPC has launched open enrollment for organizations who want to still participate in the third year of this work.** Join other leaders across the country and become a part of this breakthrough movement!

To view more information about PSPC, please click [here](#).

To view a list of community based teams who are currently participating, please click [here](#).

If you have any questions, please email [patientsafety@hrsa.gov](mailto:patientsafety@hrsa.gov).

We look forward to partnering with you!

**Medical and Dental Access and Performance Focus of New Reports**

The Commonwealth Fund's [Scorecard on Child Health System Performance](#) that ranks states on 20 health indicators for children, including dental care access, is now available. The report recognizes the role of new dental providers in improving the healthcare system. A new [issue brief](#) by PEW Center also illustrates the scope of the dental access problem, indicating that more than 31 million people cannot find or expect to find a dentist in or near their community. The report includes a color-coded map revealing the severity of the dentist shortage in all 50 states.

### **CDC Releases National Trends in Health Statistics Report**

The [2011 edition of Health, United States](#) was just released by CDC/National Center for Health Statistics. The report presents national trends in health statistics on such topics as birth and death rates, infant mortality, vaccination, life expectancy, morbidity and health status, risk factors, use of ambulatory and inpatient care, health personnel and facilities, financing of health care, health insurance and managed care, and other health topics.

### **Resource Brief Released on Culturally Competent Services**

The Maternal and Child Health Library at Georgetown University has updated its [Culturally Competent Services Resource Brief](#), a guide to websites and related professional resources. The brief contains links to federal agency and other organizational websites, along with descriptions of selected resources. Selected resources developed by the library include annotated bibliographies on culturally competent services, links to minority health organizations and non-English-language materials and resources. A knowledge path on racial and ethnic disparities in health is also available as well as [resource briefs on other topics](#).

### **Free Medical Home Assessment Tool Offered**

The Primary Care Development Corporation, a not-for-profit organization providing financing and services to expand access to care in underserved communities, has released an update of its free online patient centered medical home [assessment tool](#). It allows a primary care practice to measure its current operations against the National Committee for Quality Assurance's new 2011 medical home standards, PCMH 2011.

### **Non-Ryan White Centers Offered HIV Learning Community Opportunity**

HealthHIV, one of the largest national HIV organizations, and the National Association of Community Health Centers (NACHC) are partnering to provide 30 non-Ryan White funded health centers serving racial and ethnic minority communities the opportunity to join the [HIV in Primary Care Learning Community](#). Participating health centers will engage in a clinical HIV curriculum and receive training and technical assistance from expert faculty in practice and system redesign; expansion in the context of patient centered medical home and care coordination; partnership development; leadership in turbulent times; and coding and billing to maximize revenue. Practice-based coaches will provide ongoing support. Health centers will be selected for this innovative and transformative opportunity through a competitive process.

### **HHS Launches Data Warehouse**

The Department of Health & Human Services (HHS) recently launched the [Health Indicators Warehouse](#)(HIW). The website, a collaboration of various HHS offices and agencies and maintained by the Center for Disease Control & Prevention's Nation Center for Health Statistics will serve as the data hub for the HHS Community Health Data Initiative. It contains standardized health outcomes and nearly 1,200 downloadable health determinant indicators from 170 data sources, plus associated evidence-based interventions.

## **INFORMATION TECHNOLOGY**

### **Register for CMS Listserv on EHR Meaningful Use Incentive Program**

The Centers for Medicare & Medicaid Services (CMS) is offering a Listserv on the Medicare and Medicaid [Electronic Health Record \(EHR\) Meaningful Use Incentive Program](#). Health care

providers can subscribe for regular updates, and can post questions and concerns about the program.

### Want More Info on EHR Incentive Program?

The Centers for Medicare & Medicaid Services (CMS) has developed some tip sheets as resources for those who want to better understand the Medicare and Medicaid electronic health record (EHR) incentive programs. You can view them electronically or [order free printed copies](#).

- [Eligibility Flow Chart](#)
- [Medicare Tip Sheet for Eligible Professionals](#)
- [Medicaid Tip Sheet for Eligible Professionals](#)
- [Medicare EHR Incentive Program, Physician Quality Reporting System, and e-Prescribing Comparison](#)

### CHIME Recommends Stage 2 Meaningful Use Delay

The College of Healthcare Information Management Executives (CHIME) is recommending a delay in Stage 2 electronic health records Meaningful Use compliance, Health Care IT News [reports](#). CHIME believes that it would not be prudent to move to Stage 2 until about 30 percent of eligible hospitals and eligible providers have been able to demonstrate EHR MU under Stage 1 and that delaying Stage 2 would give regulators more time to develop clear policies and chief information officers more time to introduce and manage organizational change.



March 2, 2011, Issue #66 [Click here to view this publication](#)

## FUNDING AND OTHER OPPORTUNITIES

### CMS Announces Grant Program for Medicaid Incentives to Prevent Chronic Disease

CMS just announced a new \$100 million grant program that will test and evaluate the effectiveness of providing financial and non-financial incentives to Medicaid beneficiaries of all ages who participate in prevention programs and demonstrate changes in health risk and outcomes, including the adoption of healthy behaviors. The Office of the Governor or the State Medicaid agency may apply for funding under this grant opportunity. **State notices of intent are due to CMS by April 4, 2011. Complete grant applications are due to CMS by May 2, 2011.** [Click here to view grant solicitation.](#)

### HHS Announces \$100 Million in ACA Grants to Prevent Disease

As part of the nation's efforts to prevent an increase in the number of people with chronic health conditions, the Department of Health and Human Services (HHS) yesterday announced a new, \$100 million program allowing states to offer incentives to Medicaid enrollees who adopt healthy behaviors such as quitting smoking or losing weight. One way to encourage difficult changes in

life habits such as overeating or smoking, research has shown, is to offer economic incentives to those who reach stated goals. With that in mind, the Centers for Medicare & Medicaid Services (CMS) will encourage states to adopt such strategies as rewarding Medicaid enrollees who meet goals established for them such as weight loss, smoking cessation or diabetes prevention or control. Rewards could range from direct cash incentives, gift cards to grocery stores or other retailers, reduced Medicaid program fees (if any apply) or offering services not normally available through Medicaid. The program focuses on those behaviors that can cause some of the most critical chronic conditions that together affect millions of Americans. More information on the state incentive grants is available on the [CMS website](#).

#### [HRSA Family Health History Patient Education Pilot](#)

##### **Application Deadline: April 4, 2011**

The Health Resources and Services Administration is piloting a family health history patient education toolkit in up to six health centers that will each receive \$40,000 to integrate the Does It Run In the Family? health history patient education toolkit into their clinical care and/or outreach services. The Maternal and Child Health Bureau is partnering with the Bureau of Primary Care to offer this exciting opportunity to health centers. Projects will be implemented over a 15-month period from May 2011 through July 2012. Questions may be directed to Vaughn Edelson, Programs Manager, Genetic Alliance, at [vedelson@geneticalliance.org](mailto:vedelson@geneticalliance.org) or 202.966.5557 x213.

#### [NACHC Community Healthcare Awards of Excellence](#)

##### **Application Deadline: April 15, 2011**

The National Association of Community Health Centers (NACHC) has opened up the nomination process for its 2011 Community Healthcare Awards of Excellence. Questions may be directed to Susan Hansen at: [Shansen@nachc.com](mailto:Shansen@nachc.com) or (301)347-0400.

#### [CHIPRA Outreach and Enrollment Grants](#)

##### **Application Deadline: April 18, 2011**

On February 3, 2011, CMS released a funding opportunity announcement for a second round of \$40 million in CHIPRA outreach and enrollment grants to states, local governments, community-based and nonprofit organizations, tribes and others to support outreach activities and enrollment of children who are eligible for Medicaid or CHIP. The grant solicitation encourages prospective grantees to focus their efforts in one of the following Focus Areas: using technology to facilitate enrollment and renewal; retention; engaging schools in outreach, enrollment and renewal; reaching children more likely to experience gaps in coverage; and enrollment and renewal of teens. Awards will be announced in July. CMS will be holding an applicant teleconference on March 9, 2011 from 2:00-4:00 p.m. EST.

#### [Childhood Obesity Research Demonstration](#)

##### **Application Deadline: April 18, 2011**

The National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity and Obesity and partners posted information on a funding opportunity announcement related to childhood obesity research. A total of \$5.25 million is available for grantees to develop, implement, and evaluate multi-sectoral, multi-level intervention demonstration projects for underserved children ages 2-12 years and their families utilizing the Obesity Chronic Care Model and other similar models.

#### [USDA Distance Learning and Telecommunications Grants](#)

##### **Application Deadline: April 25, 2011**

The U.S. Department of Agriculture is accepting applications for telecommunications grants worth up to \$500,000 each to provide access to health care resources in rural areas. The grants through the USDA's Distance Learning and Telemedicine Grant Program can be used to purchase equipment or provide technical assistance. A 15% in matching funds must be provided.

#### [Dental Health for All](#)

**Application Deadline: December 14, 2011**

Program funding for mobile dental clinics across the United States.

#### [FedEx Social Responsibility Program](#)

**Application Deadline: Applications accepted on an ongoing basis**

Core giving areas are emergency and disaster relief, pedestrian and child safety, education, and health and human services.

#### [William Randolph Hearst Foundations Health Grants](#)

**Application Deadline: Applications accepted on an ongoing basis.**

Provides funding to improve access to quality health care for underserved populations in rural and urban areas.

#### [Commonwealth Fund Foundation Grants](#)

**Application Deadline: Rolling**

Multiple awards of up to \$50,000 each for non-profits. The Fund supports research on health and social issues and makes grants to improve healthcare practice and policy. Types of support include employee-matching gifts, program development, program evaluation and research. Support generally is given for a period of no longer than three years. Preference is given to projects that seek to solve problems, especially those affecting vulnerable groups such as the poor, young and needy. The Commonwealth Fund requests letters of inquiry to initiate the grant application process.

#### [Family Planning Services Grants](#)

**Application Deadline: Applications accepted on an ongoing basis.**

Grants to provide family planning services.

#### [Research on Rural Mental Health and Drug Abuse Disorders \(R01\)](#)

**Application Deadline: Applications accepted on an ongoing basis**

Grants to stimulate research on mental health, HIV/AIDS and/or drug abuse problems in rural and frontier communities.

#### [Stimulus Assistance: USDA Rural Development Programs](#)

**Application Deadline: Applications accepted on an ongoing basis**

Grant, loan, and loan guarantee assistance to rural residents, rural communities, and rural utility systems.

#### [HRSA Community Health Center Planning Grants](#)

**Application Deadline: March 18, 2011**

Health Resources & Services Administration (HRSA) planning grants to support the development of comprehensive community health centers in medically underserved communities. HRSA will award \$10 million in funding to support approximately 125 grantees. In the notice, HRSA requires a one year-project period with an annual cap of \$80,000.

### [RGK Foundation Grants](#)

#### **Application Deadline: Applications accepted on an ongoing basis.**

Grants that support projects in the broad areas of education, community, and medicine/health.

#### **Examples Sought of Community Health Centers Leveraging the Social Determinants of Health**

The Institute for Alternative Futures (IAF), with funding from the Kresge Foundation, is soliciting entries from health centers across the U.S. on their activities leveraging the social determinants of health. IAF is studying the current and future role of Community Health Centers in improving the health of their patients and of their communities through their work beyond the clinic. IAF is looking for efforts that change conditions in the community and environment in order to improve health. These efforts may focus on housing, education, jobs, income, social exclusion (isolation, racism), parenting, neighborhood safety, transportation, food quality and availability, activity and recreational opportunities. Send entries to IAF via the [online form](#). Questions may be directed to Yasemin Arikan at [yarikan@altfutures.org](mailto:yarikan@altfutures.org) or 703-684-5880.

### [William Randolph Hearst Foundations Health Grants](#)

#### **Application Deadline: Applications accepted on an ongoing basis.**

Provides funding to improve access to quality health care for underserved populations in rural and urban areas.

### [Research on Rural Mental Health and Drug Abuse Disorders \(R01\)](#)

#### **Application Deadline: Applications accepted on an ongoing basis**

Grants to stimulate research on mental health, HIV/AIDS and/or drug abuse problems in rural and frontier communities.

## RESOURCES

#### **Geiger Gibson /RCHN Community Health Foundation Research Collaborative: Policy Research Brief # 20- Who Are the Health Center Patients Who Risk Losing Care Under the House of Representatives' Proposed FY 2011 Spending Reductions?**

This timely report examines the impact of the proposed \$1.3 billion spending cut to the health center program, especially with regards to the characteristics of the patients most likely to lose access to health center services. Research results indicate that this patient population is overwhelmingly low income, minority, uninsured or Medicaid-dependent, and at elevated risk for serious and chronic health conditions.

#### **Kaiser Family Foundation: State Budgets Under Federal Health Reform - The Extent and Causes of Variations in Estimated Impacts**

This analysis examines the potential costs and savings that the ACA may generate for state budgets. The report explores why recent state estimates of the likely impact of health reform on their budgets vary widely, and discusses the major expected sources of costs and savings as reform implementation continues.

### **Center on Budget and Policy Priorities: Medicaid Block Grants Would Shift Financial Risks and Costs to States**

This new report explains how states would bear the impacts of recession and face higher medical costs if Medicaid is converted to a block grant or if federal funding were otherwise capped. It details how federal financing would work under a block grant and why this would prove inadequate.

### **Health Affairs: Medicaid/SCHIP Cuts And Hospital Emergency Department Use**

This paper finds that a decrease in Medicaid/CHIP enrollment would lead to an increase in ED visits by the uninsured, but little change in overall ED volume. These findings suggest that reductions in eligibility and enrollment as part of cost containment efforts will largely reduce access and shift costs.

### **New Report Details Affordable Care Act Resources and Flexibility for States**

The U.S. Department of Health and Human Services (HHS) released a new report showing that the Affordable Care Act provides states with significant flexibility and resources to improve health care benefits and protect consumers. Already, the law has provided or offered \$2.8 billion in funding to states. This is a fraction of the total funding available under the law to help states implement new consumer protections, expand health coverage, and improve health care quality.

*Mississippi Primary Health Care Association distributes the MPHCA E-Update 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.*