

An overview of Southwest Virginia Community Health Systems, Inc.

To the
Health and Human Resources Subcommittee
Senate Finance Committee

Monday, October 25, 2010
Smyth County Community Hospital
Marion, Virginia



History

- Southwest Virginia Community Health Systems, Inc. (SVCHS)
- Serving Southwest Virginia for over 31 years as a Community Health Center (CHC) or Federally Qualified Health Center (FQHC)
- We provide the following services:
 - > Primary Care
 - > Preventative Care
 - > Laboratory Services
 - > X-Ray Services
 - > Mental Health / Substance Abuse Counseling
 - > Dental / Oral Health Services
 - > Telemedicine Services
 - > Migrant Outreach for Migrant Farm Families
 - > Medication Assistance (Mt. Rogers Medication Assistance Program and 340-B Medication Program) - Medication Assistance Programs would not be possible without state funding - thank you!
 - > Limited Transportation



Community Health Center Program

Bureau of Primary Health Care (BPHC)

Section 330

- Part of President Johnson's War on Poverty Effort
- Public/Private Partnerships
- Governed by Volunteer Non-Profit Board of Directors (51% must be users of services by law)
- Address the health care needs of the local community
- Serve all regardless of the ability to pay – sliding fee scale available
- Federal grant is used to underwrite a portion of the indigent care provided to qualified patients
- State funding also helps support this – thank you!
- About one-third of our Total Budget comes from the Federal Grant the other two-thirds we generate through Fee-For-Service, insurance contracts, grants, donations and state funding
- FQHC Provider status allows cost-based reimbursement for CHCs for Medicare patients
- Medicaid pays on a Prospective Payment System Rate
 - Based on established rate by cost



SVCHS Sites

- Saltville Medical Center - Smyth/Washington Counties (1979)
- Troutdale Medical Center – Grayson County (2002)
- Twin City Medical Center – City of Bristol Virginia/Tennessee (2003)
- Tazewell Community Health – Tazewell County (2005)
- Whitetop Community Health – Grayson County (2006)
- Meadowview Health Clinic – Washington County (2007)
- Southwest Virginia Regional Dental Center – PD 3 (2010)
- Radford – NP Program funded through the Virginia Health Care Foundation

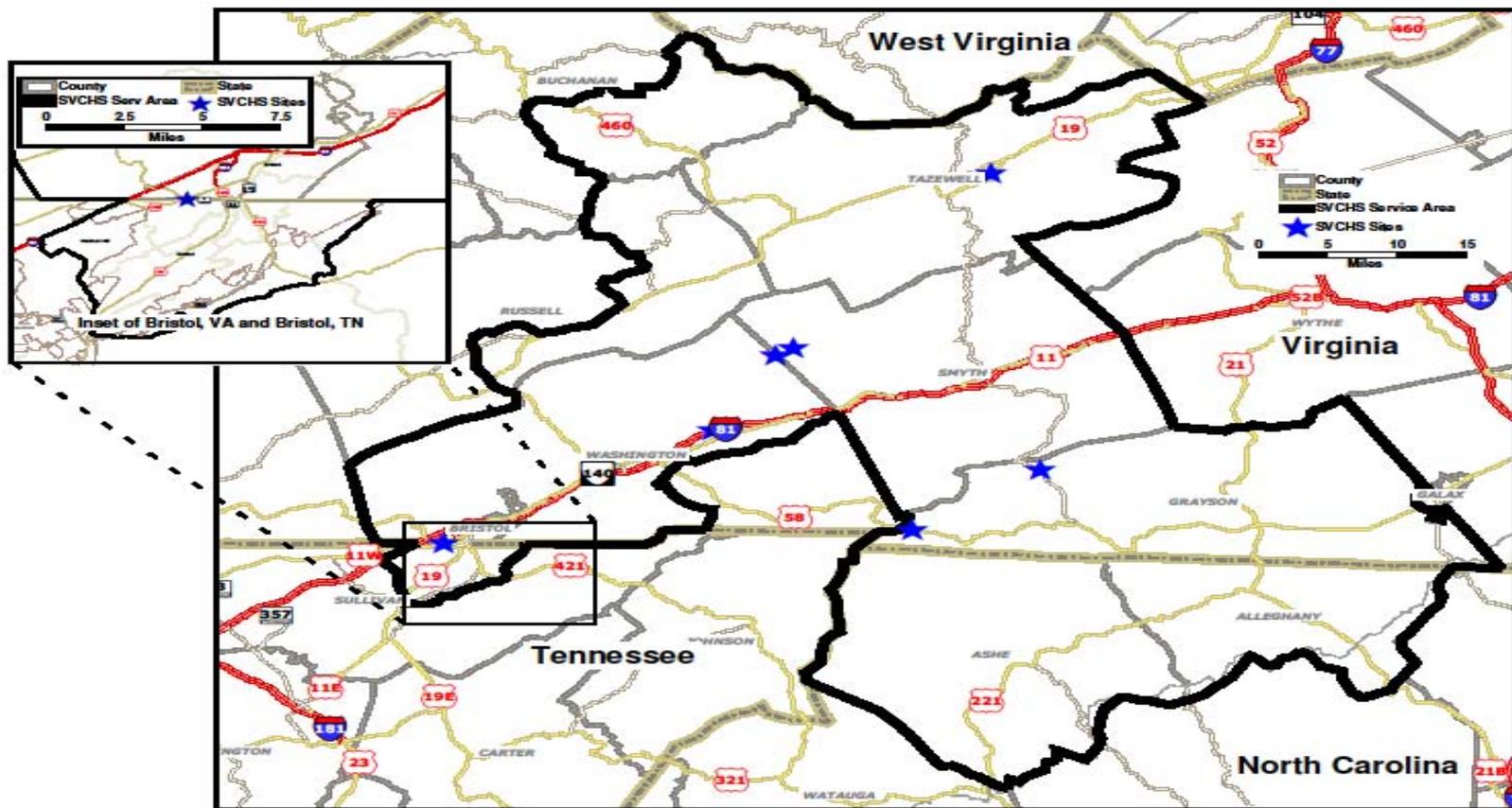


Other Projects

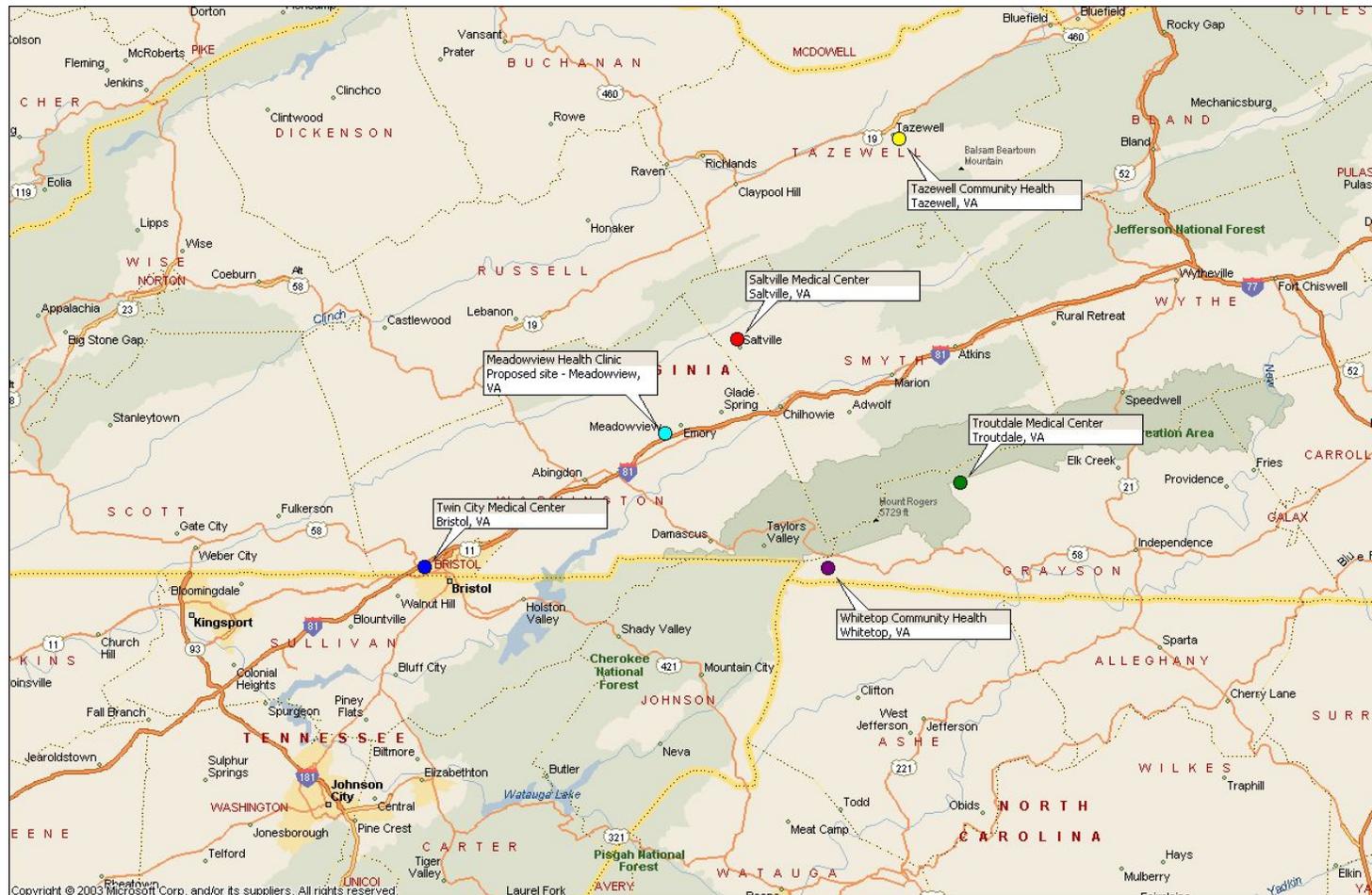
- Mobile Clinic - to better serve residents of public housing and migrant farm families
- Montgomery County – HRSA New Access Point Funding for a Community Health Center to serve as a Family Practice Residency Program
 - (VCOM and Montgomery County Regional Hospital as partners)
 - Operational in 2011 if approved
- Radford City – HRSA New Access Point Grant in 2011
 - Possible operation by 2012 if approved
 - Possible FP Residence and NP/PA Training site
- Pulaski County – HRSA New Access Point Funding for Health Care Services in an Adult Day Care and Fall Prevention Center
- SVCHS Central Pharmacy – HRSA Expanded Services Grant for 340-B medications for all SVCHS sites



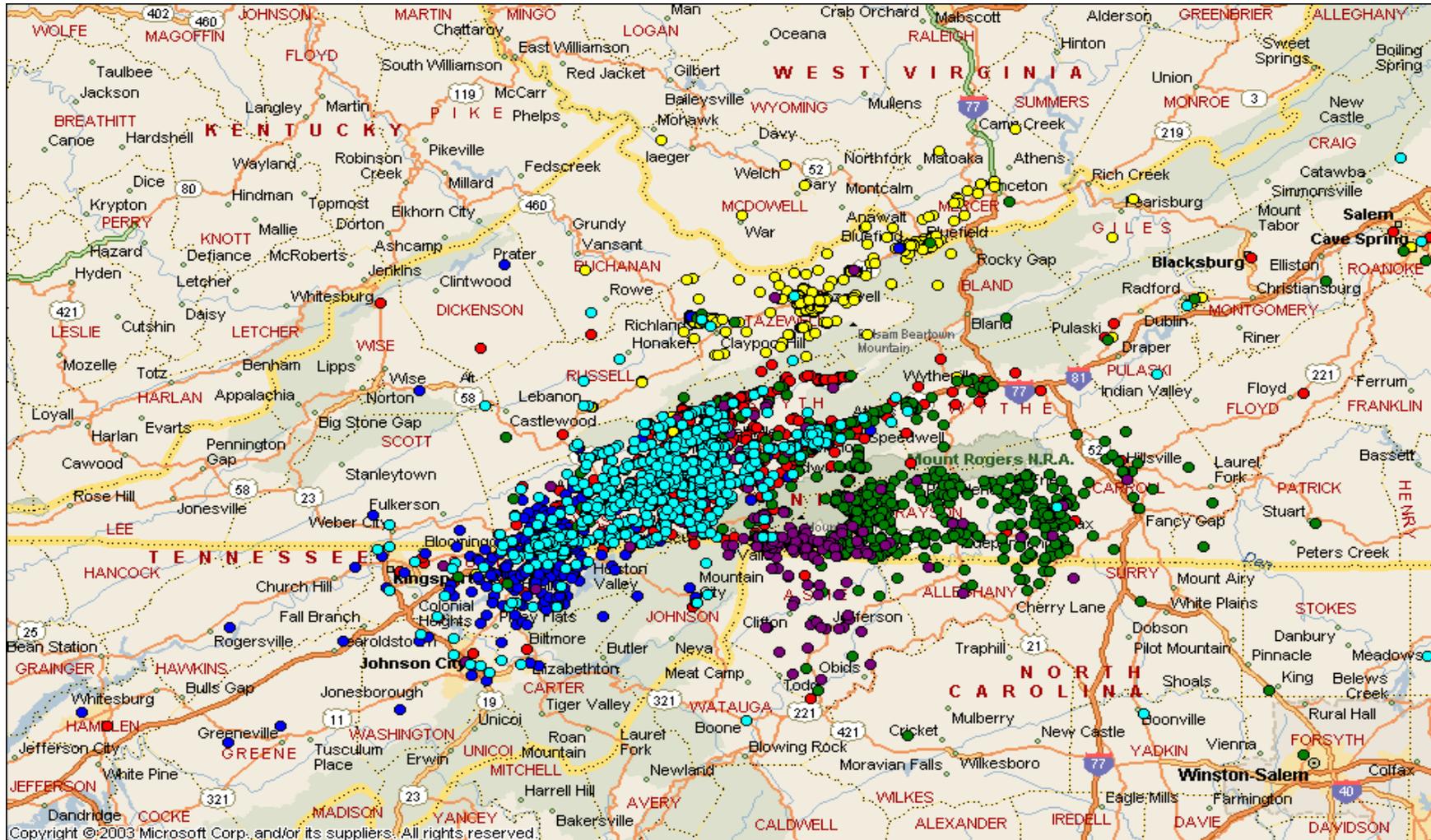
SVCHS Service Area Map



SVCHS Site Map



SVCHS Patient Origin Map



Southwest Virginia Community Health Systems, Inc.

- JCAHO Accredited as an Ambulatory Health Care Facility
- Provide Comprehensive Services that include Primary Care and Preventative Services
- Participate in the Health Disparities Collaborative sponsored by the National Institute of Health, CDC, Public Health Service for Chronic Disease Management
- Provide Direct Dental Services through the Southwest Virginia Regional Dental Center
- Provide Mental Health Care Counseling on-site
- Provide Medication Assistance through 340B Federal Drug Pricing or Mt. Rogers MAP
- Network with private providers, health departments, hospitals, free clinics, and others to care for indigent patients



Southwest Virginia Community Health Systems, Inc

Current Practice Data (2009 UDS Report)

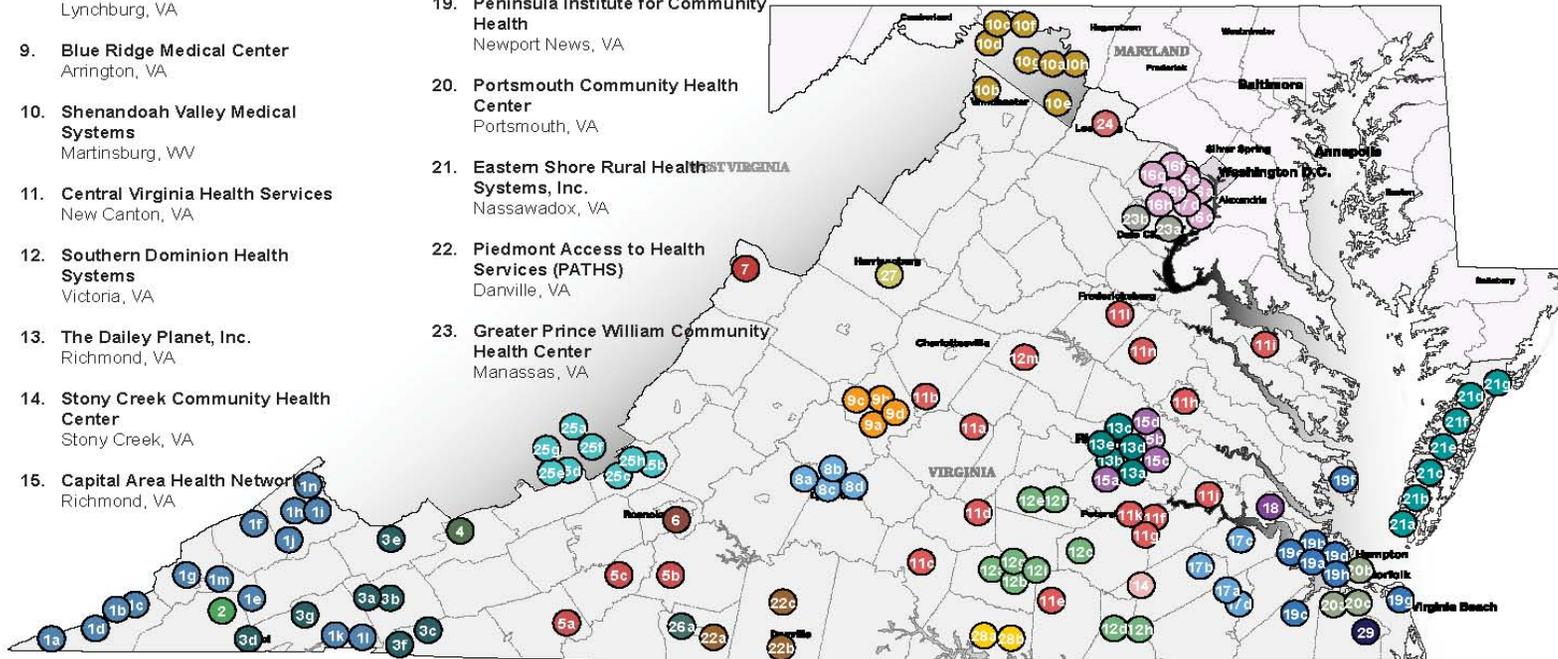
- ❑ Total Users – 15,894**
- ❑ Total Encounters – 57,142**
- ❑ Uninsured Percentage – 32%**
- ❑ Medicaid Percentage – 23%**
- ❑ Medicare Percentage – 19%**
- ❑ Private Insurance Percentage – 26%**



1. **Stone Mountain Health Services**
Pennington Gap, VA
2. **Clinch River Health Services**
Dungannon, VA
3. **Southwest Virginia Community Health System, Inc.**
Saltville, VA
4. **Bland County Medical Clinic**
Bastian, VA
5. **Tri-Area Community Health**
Laurel Fork, VA
6. **New Horizons Healthcare**
Roanoke, VA
7. **Highland Medical Center**
Monterey, VA
8. **Johnson Health Center**
Lynchburg, VA
9. **Blue Ridge Medical Center**
Arrington, VA
10. **Shenandoah Valley Medical Systems**
Martinsburg, WV
11. **Central Virginia Health Services**
New Canton, VA
12. **Southern Dominion Health Systems**
Victoria, VA
13. **The Dailey Planet, Inc.**
Richmond, VA
14. **Stony Creek Community Health Center**
Stony Creek, VA
15. **Capital Area Health Network**
Richmond, VA



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| 16. Alexandria Neighborhood Health Services, Inc.
Alexandria, VA | 24. Loudoun Community Health Center
Leesburg, VA | 27. Harrisonburg Community Health Center
Harrisonburg, VA |
| 17. Horizon Health Services
Ivor, VA | 25. Monroe Health Center
Union, WV | 28. Boydton Community Health Facility
Boydton, VA |
| 18. Olde Towne Medical Center
Williamsburg, VA | 26. Martinsville-Henry County Coalition for Health and Wellness
Martinsville, VA | 29. Chesapeake Regional Health Center
Chesapeake, VA |



Community Health Centers across the Commonwealth – 40 years
Over 250,000 “users” / patients at 112 sites

Our Role in Providing Healthcare to Southwest Virginia

- Community Health Centers focus on the individual health care needs of the community
- This is done through annual community needs assessments and strategic planning by our Board of Directors
- SVCHS maintains Advisory Boards in all the communities we serve
 - This maintains local *community* input
- The local Advisory Boards elect representatives to the SVCHS Board
- SVCHS strives to meet the needs of the community through extended hours, transportation assistance, or whatever the need might be
- SVCHS is currently participating in a PD-3 Substance Abuse Coalition and a local HOPE Coalition for Substance Abuse in Saltville
- **An integrated care model**
 - Our expansion into mental health, substance abuse, medication assistance, and dental care was driven by the needs of our patients.
- **Telehealth**
 - The UVA Telemedicine link and access to specialty care is to meet the needs of our patients
 - SVCHS is one of the most highly utilized in the UVA Telemedicine Network

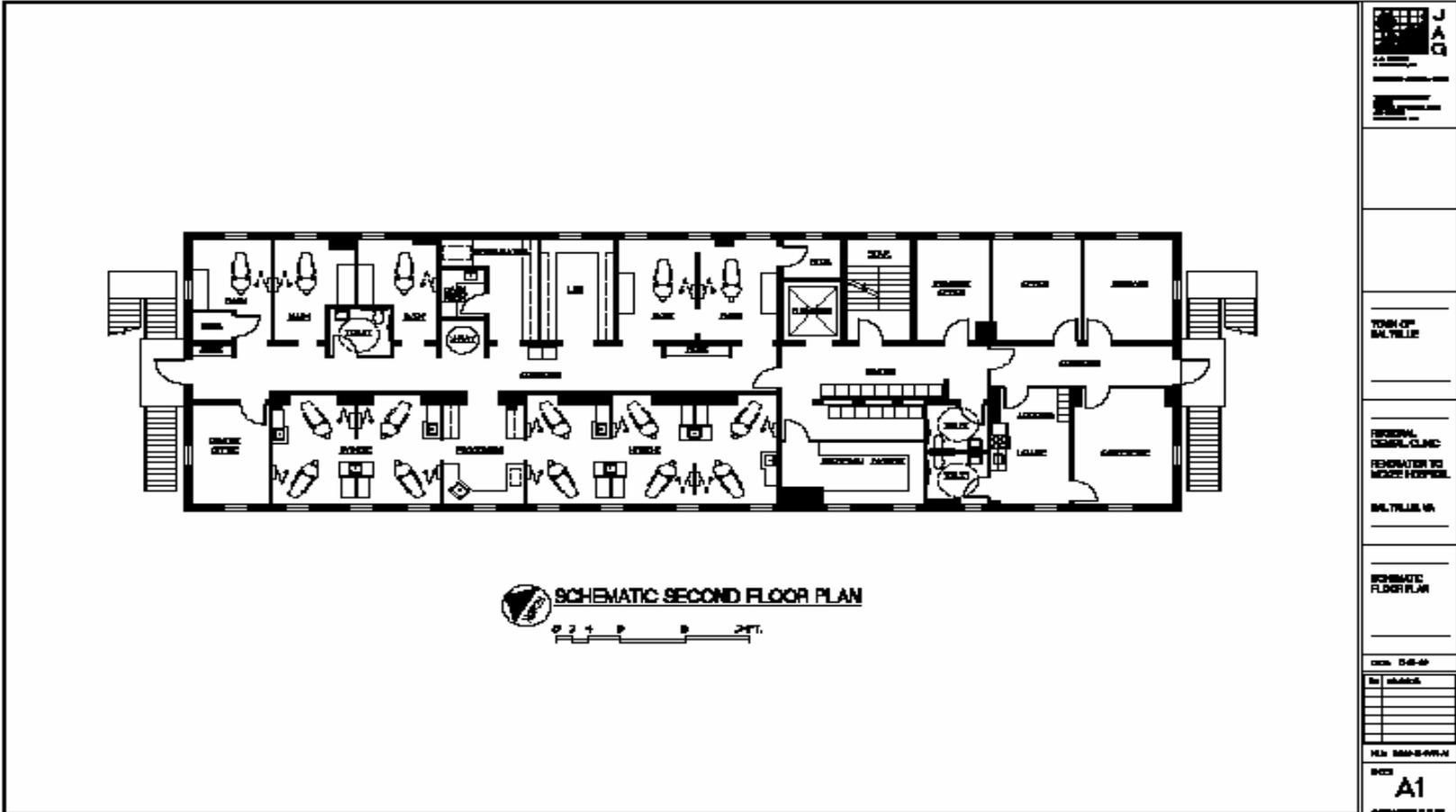


Medical Home Model

- **Community Health Centers are often considered as Medical Homes because of the comprehensive services they provide**
- SVCHS is currently in a Pilot Project with Virginia Medicaid working toward a Medical Home Model
- The concept is to meet the health care needs of the patient, either directly or through formal agreements or contracts
- Case Management and Continuity of Care are important in patient care and the Medical Home Model
- There are 9 Standards in Recognition or Accreditation for a Medical Home
 - > Standard 1: Access and Communication
 - > Standard 2: Patient Tracking and Registry Functions
 - > Standard 3: Care Management
 - > Standard 4: Patient Self-Management Support
 - > Standard 5: Electronic Prescribing
 - > Standard 6: Test Tracking
 - > Standard 7: Referral Tracking
 - > Standard 8: Performance Reporting and Improvement
 - > Standard 9: Advanced Electronic Communications



Southwest Virginia Regional Dental Center



Health Care Reform

Nationally for Community Health Centers

- Address the 47 million uninsured in the U.S.
- Expansion of Community Health Centers
- \$11 billion over the next 5 years / \$9.5 billion in new sites, expansion, and expanded services
- The number of CHCs were doubled under President Bush and this funding will allow the same under Health Care Reform (20 million patients served in CHCs to 40 million served by 2015)
- George Washington University Study on the return on investment in Community Health Centers
 - \$122 billion in Total Savings in U.S. Health Care Cost
 - \$55 billion in Medicaid savings by 2015



Health Care Reform in Virginia

- DMAS projects an additional 230,000 – 250,000 people will be enrolled
- The Department of Social Services estimates an additional 464,000 individuals will be eligible for Medicaid coverage by 2015
- Community Health Centers will need to be considered and involved in many areas of reform in Virginia
 - capacity, access, technology,
 - services, funding, quality, etc....



Health Workforce

- One of the biggest challenges under Health Care Reform is recruiting providers
- Community Health Centers use integrated team approach to provide care
 - Physicians, NPs, PAs, Dentists, Dental Hygienists, Psychologists, LCSWs, LPCs
- Even with that - the crisis is here – and has been for several years
- Even with a team approach, there has been already a shortage and maldistribution of physicians and dentists across the Commonwealth of Virginia, especially in primary care
- Many of the existing physicians are approaching retirement age
- The number of graduating physicians that go into primary care continues to decline
- We need more investment in work force development and training programs
- Need to increase the number of physicians and dentists that practice in underserved areas
- Schools - maybe recruit more potential students from rural and inner city areas that are willing to return / serve in those areas?
- We need funding in the state for loan repayment for physicians and dentists to locate in some of the state's shortage areas



Technology

- Virginia FQHCs are all on an Electronic Medical Record system (EMR) (except two organizations)
- We have our own statewide network with our own programmer, trainers, support staff, data analysis, and CIO
- We are networking with two operational Health Information Exchanges (Med-Virginia and CareSpark) that will allow the coordination of patient care among area providers
- Participation in the Regional Extension Center and Meaningful Use with CMS
- Participate in the Virginia Telehealth Network
- UVA Telemedicine Provider
- Tele-Radiology services with UVA through a Virginia Community Healthcare Association Agreement
- Technology advances in dental care



Emerging Issues

- OB Care
 - 12 Rural Virginia Hospitals have stopped providing OB services
 - High Malpractice Rates, Low Utilization, and Low Medicaid Reimbursement are leading factors
 - In some areas, FQHCs could be part of the possible solution to this problem
 - Cost-based Medicaid reimbursement
 - Federal Tort Claims Act (FTCA) protection



On behalf of more than 250,000 Virginians

THANK YOU!



Questions?



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