### 2012-13 Low Income Pool (LIP) Tier-One Milestone (STC 61) Application

### 1. Applicant:

Tampa Family Health Centers, Inc. (TFHC)

#### 2. Medicaid Provider Number:

029548500

### 3. Provider Type:

Federally Qualified Health Center (FQHC) – providing primary care medical and dental services, and pharmacy services.

### 4. Amount applying for:

\$590,000 (in combined Federal and Local funding).

### 5. Identify as a new or enhanced program:

Enhanced Program – Expansion of the Obstetric/Gynecological services to an indigent population.

# **6.** Description of the delivery system and affiliations with other health care service providers:

Tampa Family Health Centers, Inc. (TFHC) provides services to the inner city population of Tampa and Hillsborough County, Florida. The service area population consists of 84 census tracts with a population of 351,948. Of the total population, 47.78% (168,170) is at or below 200% of the Federal Poverty Level (FPL). This is the target population for the project. Almost all census tracts included in the scope of service for the project have MUP (Medically Underserved Population) designations.

TFHC is a Federally Qualified Health Center operating multiple healthcare sites. All service locations are geographically positioned throughout the Hillsborough County, in order to maximize the volume of services provided to the target population. As of June 2012, services are provided through thirteen stationary service sites, two Mobile Vans: Medical and Dental, and a recuperative care site for the homeless. Seven service sites have dental clinics (51 dental operatories total) and five operate onsite pharmacies. In calendar year 2011, TFHC serviced nearly 57,000 patients providing more than 165,000 medical and dental visits.

All sites are staffed with Board Certified Internal Medicine, Pediatrics and/or Family Practice providers as well as midlevel providers. The ancillary staff includes RNs, LPNs, medical assistants, patient support personnel, and financial councilors. All sites have bilingual staff and those sites with significant number of Hispanic patients are staffed with Hispanic providers and

support staff. Assessments and screenings are also provided on the mobile medical van which is staffed with a midlevel provider and support staff. The medical van is to provide mobile health care to our homeless population.

TFHC's service delivery model addresses the health disparities in the proposed Service Area by providing assistance that will eliminate or reduce underlying factors that foster inequities in accessing health care. The target population includes residents with income level below 200% and homeless. TFHC's service delivery model utilizes the Healthy People 2020 objectives and is being continually redesigned to focus on all the health needs of the target populations including: preventive services, early diagnosis and treatment, acute and chronic care, mental health, dental, and other in and outpatient hospital services. In addition to primary health care services, many of the residents are in need of the enabling services that we provide or refer them to such as food, shelter, specialty care, financial counseling, and assistance to access main stream local, state, and federal assistance programs.

TFHC emphasizes the Patient Centered Medical Home service delivery model. TFHC is scheduled to be accredited by the Accreditation Association for Ambulatory Health Care (AAAHC) as an ambulatory healthcare facility and the Level 3 (the highest one) Patient Centered Medical Home (PCMH) in November-December 2012.

TFHC maintains a wide network of referral relationships. As the largest primary care provider for the local indigent care plan (Hillsborough County Health Care Plan), five hospitals and more than 500 specialists have agreed to accept our non-plan patients. This provides an integrated network of hospitals and specialists throughout the county for referral of our patients. TFHC works in close collaboration with Tampa General Hospital, Town and Country Hospital and is working towards establishing a joint project with St. Joseph Hospital. TFHC providers maintain admitting privileges at Tampa General Hospital. In addition, TFHC signed the Memorandum of Agreement with two hospitalists groups that are admitting patients in all hospitals within TFHC's service area.

The continuum of care is assured through the close collaboration of local health care providers (TFHC, hospitals, specialists) and third party payors (Medicare and Medicaid HMOs, local indigent care plan). As a primary care provider, TFHC receives information regarding the services provided to the client from the managing plan (HMO) or directly from the hospital. TFHC's Clinical Care Coordination team conducts outreach to the patients to assure a follow up visit.

TFHC also has several partnership agreements with the University of South Florida. TFHC and Florida Agricultural and Mechanical University currently have a joint clinical pharmacy program. The training programs serve as an excellent recruitment tool for TFHC to recruit physicians, ARNPs, nurses, pharmacists, social workers and public health graduates. Currently, TFHC has representation on the GNAHEC Board of Directors. TFHC continues to search for innovative ways and community collaborations in order to improve the volume of mental health services provided to the target population. The partnerships TFHC has with Mental Health Care (MHC), Agency for the Community Treatment Services (ACTS) and Drug Abuse Coordinating Council Office (DACCO) are strong and reliable.

#### 7. Service Area:

The service area population consists of 84 census tracts including the City of Tampa as well as urbanized areas of Central, North and North West Hillsborough County. The total population of the service area is 351,948 residents.

8. Service Area characteristics (including demographics or population served and distribution of current population served by funding source, e.g., Medicaid, Medicare, Uninsured, Commercial insurance, etc.):

The organization's service area consists of 84 census tracts with a population of nearly 352,000. The target population of TFHC's services is 183,778 residents with income at or below 200% of the Federal Poverty Level (FPL) and over 17,000 homeless. All census tracts, served by TFHC, have a Medically Underserved Population (MUP) designation from the Health Resources and Services Administration (HRSA). MUP are populations designated by HRSA as having: too few primary care providers, high infant mortality, high poverty and/or high elderly population. High levels of poverty characterize the community, along with high levels of substance abuse, chronic diseases, teen pregnancies and single parent families.

Among the low-income residents of the area 24% are 18 (eighteen) years old or younger and 5% are older than 65 (sixty five). The proposed location will serve a diverse population that has different cultural and linguistic characteristics. <u>The majority of residents in the service area are minorities (64.4%) where 117,103 (31.98%) are of Hispanic/Latino ethnicity.</u> The number of minorities among the poor is double that of the general population.

The target population is characterized by high levels of poverty, poor economic status, and low levels of education. This group is the most exposed to loss of employment during turbulent economic times. The State of Florida statistical data reveals that 26.8% of the Hillsborough County adult residents are uninsured. However, the share of uninsured among the low income residents (with income below \$24,000/year) is reaching 49.9% (BRFSS Prevalence Data).

High unemployment rates for those that have little in the way of marketable skills and the cut back in entitlement programs have left this population vulnerable. On the other hand, unemployment is just part of the story. The high cost of health coverage forces many employers to raise the employee's share of the premium to a much higher level or simply stop providing benefits all together. Some residents of the proposed service area find part-time or day labor work, however, there are no health benefits.

There are significant gaps in service for the working poor, those that are working in jobs without health benefits, homeless that do not qualify for assistance programs, as well as the children of the working poor who will not qualify for Medicaid coverage. The ability to gain health coverage for adult males is extremely limited since most of the assistance programs and health coverage is designed to care for women and children. People in these categories are the most vulnerable and underserved and within the proposed target population.

TFHC provides care to the target population in the service area for over 28 (twenty eight) years and highly familiar with the population's medical needs. <u>Based on TFHC's first hand knowledge</u> 59% of the area's low-income residents are uninsured, 30% have Medicaid coverage, 3.4% are on Medicare, 2.2% participate in the Healthy Kids (CHIP) program, and only 5.4% have Private Insurance coverage.

The common diagnoses among these groups at the proposed service area are Diabetes, Hypertension, Cardiovascular Disease, Mental Illness, Cancer, Obesity, communicable diseases and the lack of dental care.

Access to the maternal health is one of the highest areas of need for the target population. The limited options available for the uninsured and underinsured area residents lead to the following negative trends:

### • Low Birth Weight

According to the Center for Disease Control (CDC), the birth weight has been found to be the primary predictor of infant survival.

The incidence of low birth weight (LBW), defined as less than 2,500 g (less than 5 lb, 8 oz), remains a major public health concern in the United States. The cases of LBW in the African-American population, that represents over 34% of the target population for the proposed service area, are disproportionately high.

In Hillsborough County, 9.1% delivered babies had a low birth weight of 2,500 gram or lower ("Florida CHARTS"). This is 52% higher than the national benchmark.

The Healthy People 2020 national health target is to reduce the proportion of infants born with low birth weight to 7.8%.

#### • Premature Births

While there have been many medical advances enabling premature infants to survive, there is still risk of infant death or long-term disability.

In Hillsborough County, 13.1% are delivered with less than 37 weeks of completed gestation ("Florida CHARTS"). This is 7% higher than the national benchmark of 12.3%.

The Healthy People 2020 national health target is to reduce the proportion of infants who are born preterm to 11.4%.

#### • *Infant Mortality*

Infant mortality rate continues to be one of the most widely used indicators of the overall health status of a community. The leading causes of death among infants are birth defects, pre-term delivery, low birth weight, Sudden Infant Death Syndrome (SIDS), and maternal complications during pregnancy.

In Hillsborough County, 7.4 death occurs per 1,000 of newborn infants within the first year of life ("Florida CHARTS"). This is <u>16% higher than the national benchmark of 6.4 death per 1,000 birth.</u>

The Healthy People 2020 national health target is to reduce the infant mortality rate to 6 deaths per 1,000 live births.

60% of the organization's patients are women. Over half of TFHC's female patients are between 13 and 45 years of age. This group is in need of Obstetric services

### 9. Organizational Chart and point of contact:

Point of Contact – Charles R. Bottoms, CEO

Organizational Chart – Attachment 1 (Organizational Chart)

### 10. Proposed budget for funding detailing the request:

**Project:** Expansion of the Obstetric/Gynecological services to an indigent population.

**Total Project Cost:** \$668,610

**Total LIP funding Request:** \$590,000 (including local match of \$249,393)

The proposed project is to expand Obstetric/Gynecological (OB/GYN) services provided by TFHC to the low income residents of the City of Tampa and Northern Hillsborough County.

The implementation of the project will create <u>six new full time positions</u> on TFHC's staff including: OB/GYN physician, Certified Nurse Midwife, Nurse, Medical Assistant, Patient Support Clerk and an Outreach Clerk.

The proposed budget for the project is \$668,710. The amount of LIP requested funds is \$590,000. The project balance of \$78,610 will be covered by TFHC's funds, as approved by the Board of Directors. None of TFHC's administrative costs will be charged to the project. In addition, TFHC will provide all facilities and utilities (with exception of data/phone) on in-kind basis.

Budget Categories	Description of the expenses	LIP Funding Requested	TFHC Funds
Salaries	\$510,238		
	These are salaries for six new positions including: OB/GYN physician, Certified Nurse Midwife, Nurse, Medical Assistant,		

Budget Categories	Description of the expe	enses	LIP Funding Requested	TFHC Funds
	Patient Support Clerk and an Outreach Cle	erk.		
Fringe Benefits	\$98,884			
	The cost of fringe benefits for additional pe TFHC's established benefit structure and in share of FICA, insurances (health, dental, li SUTA and retirement benefits.	cludes employer's		
Supplies	\$13,653  This budget section includes cost of medic pharmacy (\$893) and office (\$922) supplied expansion of OB services.			
Contractual	\$46,517  The contractual expanses directly associated with the project implementation include following: referral laboratory cost (\$23,698), waste disposal (\$900), shredding (\$600), EHR support and computer maintenance (\$8,900), CBO services (\$4,354).			
Other Expanses	\$7,382  This category includes the cost of utilities, payroll processing, duplication, printing an	*	\$0	\$656,784
TOTAL PROJECT COSTS		\$668,610		
	LIP FUNDING	\$7	8,610	

The Board of Directors reviewed and approved pro-forma operational budget for the new site.

### 11. Provide a brief summary of your proposed project:

The current economic situation places additional pressures on the area residents. This situation, in conjunction with the elimination of the employer sponsored benefits by many companies, leads to the growing number of medically uninsured residents that rely on the "safety net" providers for all their healthcare needs.

The Hillsborough County Department of Health (DOH) is historically a major source of primary healthcare for uninsured and underinsured residents of the community. However, the severe budget deficits required Florida State Legislature to reduce or eliminate funding for the number of programs. Continued budget cuts forced the Florida Department of Health to re-evaluate it's ability to further provide range of services throughout the State.

In September 2011, the DOH had to discontinue operations at four pediatric/women's health clinics in TFHC's service area. These locations were closed due to the Department's budget shortfall, leaving over 9,000 children and pregnant women in need of a new reliable and accessible medical home. TFHC and Hillsborough County DOH have been working in close collaborations for many years. This partnership allowed retention and expansion of the health care services for the County's neediest communities. In order to maintain the provision of essential health services for the vulnerable populations currently serviced by the Hillsborough County DOH, TFHC established four new satellite sites at the locations previously operated by DOH.

This change established TFHC as a major provider of the OB services for the target population. However, maintaining the volume of services on the level previously rendered by the DOH does not meet the community need. TFHC proposes to expand the services and open an OB clinic at one of TFHC's largest service sites in the central part of the City of Tampa. This addition will allow TFHC to provide over 3,500 additional OB visits to 1,100 patients.

In addition to the simple increase in volume of services provided, TFHC proposes to hire an on-staff OB specialist – an MD with OB certification. This will allow to further improve the services provided by offering a higher level of on-site OB care available. TFHC will establish an on-going rotation of the OB specialist not only at the new site but among all sites where OB is care rendered.

# 12. Describe plan for identification of participants for inclusion in the population to be served in the project:

TFHC collaborates with the local city, county and state government to plan for the health care needs of our community. TFHC provides testimony and health information continuously to political and non-political leaders of the community. TFHC meets at least quarterly with medical and dental schools, residency programs, Moffitt Cancer Center, County Health Care Advisory Board, Neighborhood Service Centers, etc. TFHC is a member of the West Central Florida Planning Council that conducts needs assessment and planning for health care within the five counties in District 6. Additionally, TFHC meets at least quarterly with the Department of Health to review needs and gaps in service within the community. The management team is a member of numerous Boards and committees that plan and provide the direction of healthcare in our population. TFHC works in close collaboration with Tampa General Hospital, Town and Country Hospital and St. Joseph Hospital.

TFHC also has several partnership agreements with the University of South Florida. TFHC and Florida Agricultural and Mechanical University currently have a joint clinical pharmacy program. The training programs serve as an excellent recruitment tool for TFHC to recruit physicians, ARNPs, nurses, pharmacists, social workers and public health graduates. Currently, TFHC has representation on the GNAHEC Board of Directors.

TFHC has an active ER diversion agreement with the one of area hospitals - Town and Country Hospital. The agreement is to work together with non-emergent patients in the hospital's ER to

direct such patients to receive non urgent care at a sustainable primary care outlet. TFHC placed a community care navigator in the hospitals ER. This person is a TFHC employee and has a direct access to the company's EHR.

In 2010, TFHC signed an agreement with the Department of Children and Families (DCF) to place agency Eligibility Specialists (ES) at three of TFHC's service locations. The positions are jointly (50/50) funded by DCF and TFHC. The agreement allows TFHC to offer patients access to immediate qualification for Medicaid, food stamps, and other types of assistance at the convenience of the neighborhood medical center.

Additionally, TFHC has an active collaboration with the Department of Health in order to review and address the Obstetric (OB) care needs for the low income population. The Hillsborough County Health Department is a strong supporter of TFHC.

### 13. How will access to primary care access system services be enhanced by this project?

The main goal of the proposed project is to improve access to the Obstetric services for the needy residents of the Hillsborough County. TFHC will expand OB services as an integral part of organization's primary care delivery system ensuring open access, early screening, early detection, tracking with follow-up monitoring, health education, collaboration with community resources, and a personalized plan of care to eliminate or reduce the core barriers that fuel inequities in health care. The delivery of service and the model of care designed in our strategic plan are inclusive of all patients regardless of their ability to pay.

TFHC's service delivery model utilizes the Healthy People 2020 Objectives and is proven to be able to address the health needs of the target population. TFHC is striving towards reducing infant mortality rates among these expectant mothers while providing educational and physical support during pregnancy and throughout the postpartum period.

The proposed project will offer following benefits to the community:

- another service delivery location for OB care with annual capacity to serve over 1,200 patients
- the addition of a full time OB physician dedicated to monitor the most difficult cases and oversee performance of all Nurse Midwifes practicing through TFHC's facilities
- increased number of OB and postpartum visits
- improve the health outcomes of mother and baby
- increase the number of patients that will be screened for postpartum depression
- greater access to the educational services including breast feeding, post natal care, mother and infant nutritional needs
- access for smoking cessation services for the mothers to be

In addition to providing OB services, TFHC is able immediately establish pediatric care for all newborns and connect all new mothers to Doula services.

# 14. Does the enhancement include hours of operation after 5:00 pm and/or on weekends at existing sites, or the establishment of a new clinic site?

The proposed project does not include hours of operation after 5:00 but rather establishes an OB service on a new site.

### 15. Describe your capability to serve minority and culturally diverse populations:

TFHC already serves a diverse population that has different cultural and linguistic characteristics. Religious and cultural backgrounds play a great role in how different people respond to health education and services. In an effort to show respect and appreciation for this diversity, TFHC provides annual onsite cultural diversity/sensitivity training for all employees. This training is part of staff orientation and will be a requirement for all new staff members recruited for the proposed expansion.

The dominant groups in need of OB services among the target population at the service area are Latino/Hispanic of all races (47.6%) and Black/African American (22.0%), with the total share of minorities reaching 83%.

A conscious effort will be put forth to hire staff of culturally diverse origins that fairly replicate the makeup target population. Our centers are staffed by bilingual Spanish providers and support staff in order to have direct communication with the high volume of Spanish speaking clients. The new location will re-utilize this approach. Referral specialists are made aware at the time of appointments of patients who don't speak English. This gives them time to have the appropriate staff present. Electronic Patient Records have the patients' primary language prominently displayed. Medical consent forms, advance directives and clinical instructions will be available in English and Spanish. Educational materials and posters have pictures that show racial and cultural diversity in an effort to promote a feeling of inclusion among the clients.

# 16. Describe how you will identify and address health care diversity issues as well as health care literacy barriers:

The target population of the proposed service area represent those that are poor, minorities and often with low literacy levels. They have been historically outside of the mainstream of health care because they live in medically underserved areas and lack the means to seek services outside of their neighborhood. While there are many health indicators that reflect disparities and disease entities within this population, County statistics have revealed the presence of major disparities between certain diseases and access to quality care. This population is not obtaining routine or preventive health care that they need and often utilize the ER when the condition becomes emergent rather than preventive.

TFHC endeavors to fulfill its mission "to provide quality, caring and accessible health care to a culturally diverse community." TFHC promotes community-based comprehensive primary health care services with emphasis on patient education and promotion of a healthy lifestyle.

The TFHC Health Care Plan will address the health disparities in the census tracts by providing services that will eliminate or reduce underlying factors that foster inequities in accessing health care. Patients that have transportation needs are assisted by bus passes, which are issued at our sites. All of our centers are accessible by public transportation (bus). Additionally, Hillsborough County and the Department of Children and Families social workers are present on three of TFHC's sites to assist patients with eligibility for the public assistance programs and life improvement skills such as: GED, parenting classes, job finding services, and classes for children who have been suspended from school. TFHC administrates the mobile medical van program that provides screening and health care outreach throughout the County at shelters, feeding sites, homeless camps, faith-based organizations, and community agencies serving the homeless.

The disease management program, implemented by TFHC, is one of the most proactive tools in addressing health care diversity issues as well as health care literacy. The program aims to improve the clinical outcomes for the patients with chronic conditions by combining medication treatment with health education and the encouragement of lifestyle changes. TFHC's disease management programs began as Health Resources and Services Administration's (HRSA) Health Disparities Collaboratives that were developed to enhance primary health care practices by improving the health care provided and eliminating health disparities.

TFHC places emphasis on patient education and participation in the treatment process. During the medical visit, various members of TFHC's clinical team (providers, nurses, medical assistants, and patient navigators) establish an effective communication with the patient and/or family member to provide appropriate information. The educational materials related to the patient's specific health care issues are printed from the organization's Electronic Health Records system and distributed to the patient. This information is clear, concise and written on the fifth grade comprehension level. TFHC's disease management programs require a high degree of the patient's collaboration. Self management behaviors are an integral part of health promotion and management of chronic illnesses. The "patient self-management" is an important measure crossing all conditions as well as prevention. The practice of self management relies heavily on patient education and family support.

#### Among TFHC's educational collaborations are:

- Area Health Educational Centers (AHEC) Tobacco Cessation Program that aims to strengthen the capacity of Florida's healthcare system to deliver effective evidence-based tobacco use treatment, cessation, and prevention services throughout the state.
- United Cerebral Palsy Doula Program that provides community based childbirth educational classes, labor and delivery support, post-partum mom/baby care, instruction focusing on mom/baby attachment, service at any time prior to delivery.
- University of South Florida and Moffitt Cancer Center and Research Institute are providing an active cancer education program via the Tampa Bay Community Cancer Network (TBCCN).
- Florida Agricultural and Mechanical University School of Pharmacy provides on-site Medication Therapy Management (MTM) service at TFHC's sites. Patients with multiple prescriptions are educated on drug interactions in order to optimize drug therapy and improve therapeutic outcomes for individual patients.

# 17. Describe measures and data sources that you will use to evaluate the effectiveness of each initiative comprising your project:

The goals and performance measures selected to monitor the progress of the proposed project are an extension of the established organization-wide goals. TFHC can utilize the established data collection and performance evaluation methods, including monitoring of the Clinical Performance Measures for Obstetric Care (OB) and increase in the volume of services rendered.

The effectiveness of expanded OB services provided for the target population in the service area will be evaluated through the following Clinical Performance Measures:

Identified	Selected Clinical	Target Goal Description
Need	Performance Measure	
Prenatal	Percentage of pregnant women	By 2013, 81.32% of pregnant women to begin
Health	beginning prenatal care in first	prenatal care in first trimester.
	trimester.	
Perinatal	Percentage of children with	By 2013, percentage of children with birth weight
Health	birth weight < 2,500 grams,	less than 2,500 grams, delivered by TFHC's
	delivered by TFHC's patients.	patients to be 1% lower than County's average.

The effectiveness of the proposed project in increasing the volume of health care services provided to the target population of the service area will be appraised as follows:

- The number of patients served by the project.
- The total number of OB visits provided.
- The percentage of target population receiving OB care at TFHC.

The organization's Electronic Health Records (EHR) system will be collecting all of the stated above data. The system is a certified EHR and will be a data source for the evaluation of the project outcomes.

The tracking and documenting of all service events, participant activities, interventions and outcomes are performed in Intergy EHR, an electronic health records system implemented in 2009. TFHC's EHR system is used to create patient records, documenting all clinical and non-clinical services, establish registries for chronic disease management, etc. The system has a direct connection for uploading of laboratory and X-ray results from major diagnostic centers in the County, allowing electronic Rx's, and performing many more documenting/tracking functions for both services performed and outcomes. Intergy has built-in clinical care guidelines and pop-up reminders that will provide an additional resource to ensure adherence to national quality of care standards with subsequent improvement of patient outcomes.

In 2010, TFHC combined its EHR with a new practice management module. The result of this development is greater flexibility in reporting, identifying potential needs for interventions and tracking clinical outcomes.

TFHC also utilizes third party electronic databases to monitor and analyze its patient data. An example is the State administered Florida SHOTS electronic database used by the Department of

Health of the State of Florida to track, audit and improve immunizations across the state. Additionally, periodic chart audits help track performance measures, documentation standards and other non-clinical compliance areas.

# 18. Describe data collection and reporting capabilities including systems and staffing resources, provide reporting template:

The methodology for the data collection and reporting on the project's results is already in place. TFHC operates Electronic Health Record (EHR)system fully integrated with the Practice Management System. The progress towards overall achievement of established project goals, including the number of patients served and number of encounters, is under the close control of the Management Team. The data on volume of services provided reviewed twice a week in a form of provider daily productivity report.

The data collection is conducted via utilization of the Electronic Health Record (EHR) system. This allows providing timely response to the developing trends. The Management Team is very experienced in the implementation of similar projects (three new sites opened with in the last two years) and capable of making rapid changes including: adding providers and support staff, increasing community outreach, restructuring patient flow, and adding new services if necessary.

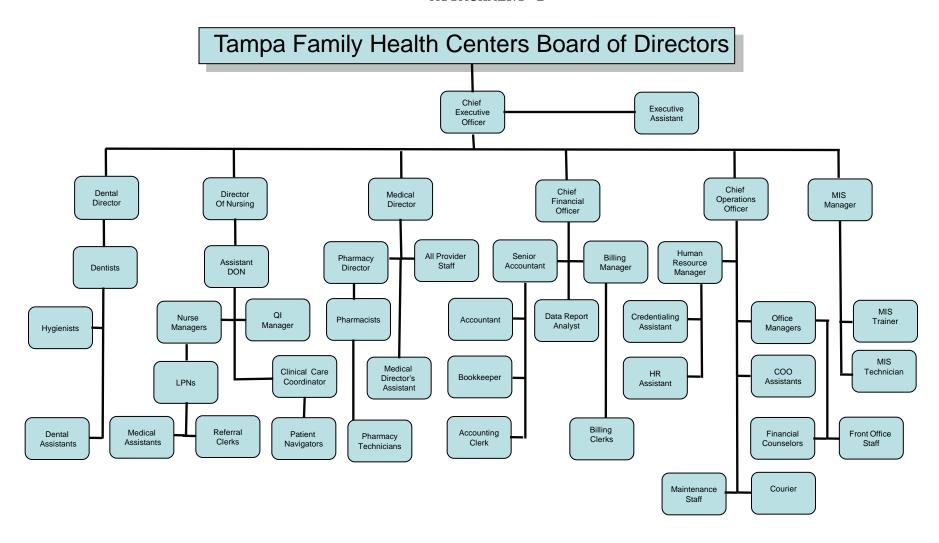
All data entered into the patient record is systematized and can be analyzed. TFHC employs full time data analyst within the internal MIS department. The "Practice Analytics" is a main data analysis and reporting tool that allows TFHC to create regular and ad-hoc reports, necessary to track and evaluate the organizations clinical and financial performance. The integrated IT support for MIS and finance system is provided by Health Choice Network (HCN). HCN is an Integrated Service network funded by the Bureau of Primary Health Care. The network is currently working with Microsoft and Vitera Inc. towards introduction of a new and even more powerful clinical performance analytical tool "Amalga".

The report on the number of patients (by poverty level, payor source, age, race and ethnicity) and visits rendered will be compiled on a monthly basis. The template of the report is provided in Attachment 3.

TFHC closely monitors the cost effectiveness of the project and benchmarks performance results against other community health centers and established industry standards. Among the indicators monitored by company's management throughout the year are: cost per total patient (including total patients, medical only, and dental only) and cost per encounter/visit (total, medical, dental). TFHC utilizes indicators of Uniform Data System (UDS) reporting tool for this purpose. The UDS report is prepared by every FQHC in the country and provides great performance benchmarks.

### 19. Provide a letter of commitment from the local match fund source on that entity's letterhead:

Letter of Commitment from the local match fund source – Attachment 2





BOARD OF COUNTY COMMISSIONERS
Kevin Beckner
Victor D. Crist
Ken Hagan
Al Higginbotham
Lesley "Les" Miller, Jr.
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Office of the County Administrator Michael S. Merrill CHIEF ADMINISTRATIVE OFFICER
Helene Marks

CHIEF FINANCIAL ADMINISTRATOR
Bonnie M. Wise

DEPUTY COUNTY ADMINISTRATORS Lucia E. Garsys Sharon D. Subadan

July 27, 2012

Charles Bottoms President & CEO Tampa Family Health Centers, Inc. 7814 North Dale Mabry Hwy. Tampa, Florida 33614

Dear Mr. Bottoms:

This letter confirms our support of the application submitted by Tampa Family Health Centers, Inc. (TFHC) for the expansion of the primary health care services under the 2012-13 Low Income Pool (LIP) Tier-One Milestone (STC 61) Application (Grant).

TFHC operates one of the four networks of the Hillsborough County Healthcare Plan (HCHCP). The TFHC network serves HCHCP members who are indigent and primarily live in the City of Tampa. TFHC provides, through its primary care clinics and contracted medical specialist and hospitals, a wide array of essential and critical medical services to indigent, uninsured members of its HCHCP Network.

TFHC has a long distinguished history of providing health care to thousands of residents of Tampa and Hillsborough County who fall below the Federal Poverty Levels and who have little or no insurance coverage. Although over 165,000 visits are provided by TFHC's program annually, you have advised us that TFHC's efforts will be greatly enhanced by the Grant support it is requesting.

The award of this Grant to TFHC will allow it to expand delivery of high quality, cost effective Obstetric/Gynecological Services to an indigent population consisting of uninsured, underinsured and homeless individuals and families in Hillsborough County.

TFHC enjoys the support of the Hillsborough County Health Care Services Division, Department of Family and Aging Services, which is pleased to work along with TFHC in providing such needed services to our underserved residents.

If this Grant is awarded to TFHC, Hillsborough County will commit an amount not to exceed \$249,393 as local cash match for the Grant, upon execution of a Letter of Agreement between the County and the Agency for Health Care Administration (AHCA) with respect to this matter. We strongly support the award of this Grant to Tampa Family Health Centers, Inc., which has demonstrated a long-standing commitment to serving the medically underserved in Hillsborough County.

Sincerely,

Gene Earley

Division Director, Health Care Services Division

Department of Family and Aging Services

## ATTACHMENT 3 PATIENTS AND VISITS REPORT

	Current Period	Cumulative Year to Date
CLIENTS		
ENCOUNTERS		
		NUMBER OF CLIENTS
	Percent of Poverty Leve	el
100% and Below		
101 - 150%		
151 - 200%		
Over 200%		
Unknown		
Total		
	Principal Payment Source	ce
None/Uninsured		
Total Medicaid		
Medicare		
Private Insurance		
Other		
Total		
	Age	
Pediatric (Age 0-12)		
Adolescent (Age 13-19)		
Geriatric (Age 65 and above)		
All other		
Total		
	Race/Ethnicity/Languag	<u>je</u>
Asian/Pacific Islander		
Black/African American (not Hispan	nic or Latino)	
American Indian/Alaska Native		
White (not Hispanic or Latino)		
Hispanic or Latino (all races)		
Unknown		
Total		

### TAMPA FAMILY HEALTH CENTERS, INC.

Expansion of the Obstetric/Gynecological services to an indigent population.

### ITEMIZED BUDGET

REVENUE:  LIP Requested Project Funding  TFHC Project Funding  TOTAL: REVENUE  EXPENSES:  PERSONNEL  FRINGE BENEFITS @ 19.55%  FICA  Retirement  Insurances(health, dental, disability,life)  SUTA, Worker's Comp.	\$590,000 78,610 \$668,610 \$510,238 \$39,033 15,308 38,931 5,613 \$98,884
TFHC Project Funding  TOTAL: REVENUE  EXPENSES:  PERSONNEL  FRINGE BENEFITS @ 19.55%  FICA Retirement Insurances(health, dental, disability, life)	\$668,610 \$668,610 \$510,238 \$39,033 15,308 38,931 5,613
TOTAL: REVENUE  EXPENSES:  PERSONNEL  FRINGE BENEFITS @ 19.55%  FICA  Retirement Insurances(health, dental, disability, life)	\$668,610 \$510,238 \$39,033 15,308 38,931 5,613
EXPENSES:  PERSONNEL  FRINGE BENEFITS @ 19.55%  FICA  Retirement Insurances(health, dental, disability, life)	\$510,238 \$39,033 15,308 38,931 5,613
PERSONNEL  FRINGE BENEFITS @ 19.55%  FICA Retirement Insurances(health, dental, disability,life)	\$39,033 15,308 38,931 5,613
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Retirement Insurances(health, dental, disability,life)	15,308 38,931 5,613
Retirement Insurances(health, dental, disability,life)	15,308 38,931 5,613
Insurances(health, dental, disability,life)	38,931 5,613
	5,613
SUTA, Worker's Comp.	
	\$98,884
TOTAL FRINGE BENEFITS	
SUPPLIES:	
Medical & Laboratory Supplies & Low Cost equipment	\$11,838
Pharmacy Supplies	893
Office & Computer Supplies & Low Cost Equipment	922
TOTAL: SUPPLIES	\$13,653
CONTRACTUAL	
Referal Lab	\$23,698
Waste Disposal	900
Shredding of Confidential Documents	600
EHR Computer Maintenance/Support (HCN/Vitera)	8,900
Central Billing Office Services (HCN)	4,354
TOTAL CONTRACTUAL	\$38,452
ОТНЕВ	
OTHER Data Processing & Payroll	\$2.422
Data Processing & Payroll Telephone/Cable	\$2,422
Postage	1,200 1,560
Printing & Duplicating	500
Subscription & Dues	500
Utilities  Utilities	1,200
TOTAL OTHER	\$7,382
TOTAL: ALL BUDGET	\$668,610