Health Center Networks

Critical Tools for Health Centers

By Regina Tosca

The National Association of Community Health Centers' (NACHC) *ACCESS for ALL America* plan seeks expansion of the Health Centers Program to address the unmet health care needs of Americans without access to primary care services. NACHC's data shows that 56 million Americans, many with insurance, have no regular, continuous and patient-centered source of primary care. In light of these realities, the goal of *ACCESS* is to increase the number of patients served by health centers from the 16 million that are served today to 30 million by 2015.

The plan outlines several strategies for fostering the growth of health centers and strengthening their capacity to deliver high quality care. Among these are the use and maintenance of the latest technology to improve information sharing, efficiency, and quality of care. Also important to NACHC's growth plan for health centers is the increased development and operation of health center-controlled networks.

"Networks support expansion efforts because they help health centers operate more efficiently and effectively, in part through use of the latest technologies and applications," says John Sawyer, NACHC Assistant Director, Federal Affairs. "This in turn means that health centers can see more patients and provide more care with less resources."

Sawyer adds that networks "help health centers use federal dollars effectively for purposes of expanding health care access to the underserved." Along these lines, he underscores the importance of federal funding for networks because it supports administrative operations and allows health centers to dedicate greater resources to direct services.

Benefits of Networks

"Networks are the right way to go," says Kevin Kearns, President and CEO of Miami-based Health Choice Network, Inc., which started ten years ago with four health centers in South Florida and has grown to encompass more than 30 health centers in six states. Kearns cites the myriad benefits of health center networks as including infrastructure development, operational and clinical capacity, and the power to negotiate more forcefully with health plans — all of which enable health centers to expand service delivery.

In the case of Health Choice Network, explains Kearns, the four founding health centers combined their resources to share much-needed financial management services that each alone would not have been able to afford. This in turn enabled the health centers to gain a level of expertise typical of larger health systems, while at the same time remaining independent.

Speranza Avram, Executive Direc-

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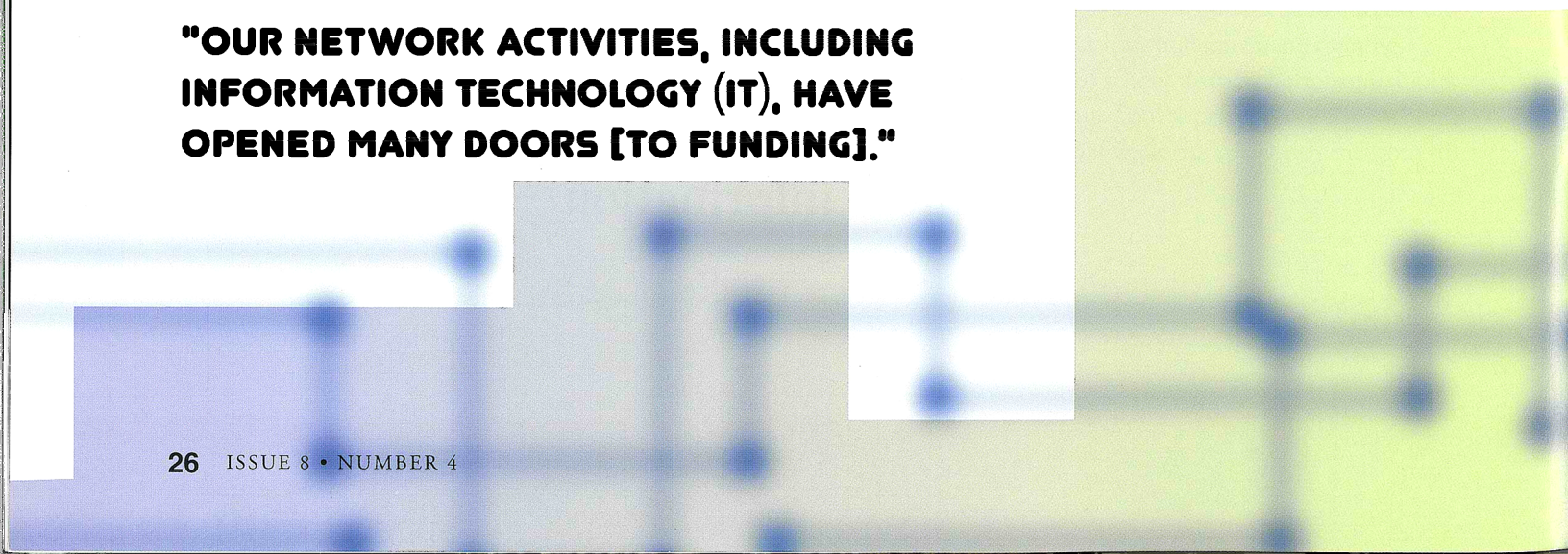

tor of the Northern Sierra Rural Health Network (NSRHN), says that the type of collaboration networks promote is essential for serving patients in rural communities, such as those that characterize NSRHN's 30,000 square-mile service area in Northern California. In Avram's region, the network model has supported the development of a telemedicine infrastructure that increases patient access to medical specialty care services not available locally.

Through videoconferencing stations located at 40 sites across the network, patients and their primary care providers are able to consult with dermatologists, neurologists, psychiatrists, and others located in major urban health systems often hundreds of miles away. Without the network, explains Avram, patients would have to drive many hours to get the care they need.

A Model that Attracts Funding

Both Kearns and Avram have also found that networks can provide health centers with access to funding opportunities that might not be available to them on an individual basis. Kearns explains that a current strategy at Health Choice Network has been to target foundations, in part because they seem attracted to the network infrastructure and the possibilities it provides. "Foundations seem to feel confident investing in networks because of the 'economies of scale,'" says Kearns. "They feel they have a bigger impact and get more timely results when they work with a group of health centers who are working together." He adds that the expertise and capacity networks offer helps provide funders with a feeling that the "job will get done efficiently and timely." As a result, Kearns believes the network model can aid health centers in diversifying their funding, which in turn helps promote longevity and growth.

NSRHN's Avram agrees. She explains that while federal funding from the Health Resources and Services Administration's (HRSA) Office of Rural Health Policy (ORHP) served as the basis for her network's development, increasingly private entities and foundation sources are being tapped to supply networks with operating capital. Recently, NSRHN received a three-year grant from the Blue Cross Foundation of California to spearhead the development of a regional health information exchange. The initiative will feature an e-prescribing component, a disease management registry, and web portals and related tools to speed clinic and provider access to electronic patient information.

Kearns points to IT capacity and expertise, which networks provide, as a major driver of funding opportunities in today's health care market. "Foundations in particular are really viewing IT, and health information technology (HIT) in particular, as a key initiative," says Kearns, emphasizing that integrated information systems are also essential for doing business within managed care systems. "We have found that our network activities, including IT, have opened many doors [to funding]," says Kearns, including most recently a contract to develop 72 school-based health centers in Miami-Dade County.

Kearns refers to the current federal funding shift away from operational support for health centers as an opportunity to reinforce the importance of networks to the sustainability and future expansion of health centers. "This will be especially important for new start health centers that need to build infrastructures in order to compete in today's financing market and be effective on behalf of their patients," says Kearns.

In California, Avram's network is capitalizing on its power as a network to seek new funding made available through health plan mergers and transitions. As much as she sees the benefits of collaboration in the realm of financing, she thinks benefits flow in the reverse direction as well.

"I believe funding that targets networks offers health centers and others with the opportunity to overcome any barriers to cooperation," she says.

Kearns echoes a similar sentiment about the benefits of working together. "An investment in networks is an investment in the future of health centers."

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