



Health Centers in Underserved Communities

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Talk Outline

- Introduction
- Overview of FQHCs
- Benefits of FQHCs
- How to start one in your own community
- Hurdles we have faced and possible solutions

Introduction

- In 2012 our US Senator Harry Reid learned about the efforts Pakistani physicians in Southern Nevada had made to try to help provide healthcare to members of our community who could not afford basic care.
- He recommended that we apply for federal funds to assist, and specifically stated that our country had a need for more physicians to utilize the \$100's of millions available. The grant he suggested we apply for was to establish a federally qualified health center (FQHC).

FQHC Basics

- Federally Qualified Health Centers are entities that receive federal funds to provide primary care services to medically underserved areas in urban centers and rural areas.
- The centers are overseen by the Bureau of Primary Health Care, which is a division of HRSA, which is a section of the department of Health and Human Services. Congress authorizes HRSA \$10 billion in funding every year.
- The legislation enabling these centers was originally developed in 1996, but it has been in

FQHC Structure

- A FQHC is a non-profit clinic in an underserved area, guided by a board of directors (51% of whom are patients of the clinic)
- It employs a CEO, CMO, CFO, COO, up to 4 doctors, and support staff and/or a social worker and outreach coordinator.
- They can accept patients with any insurance, but for patients whose family income falls below the poverty line, charges are limited according to a sliding fee schedule to accommodate for their economic hardship.
- These centers are expected to help guide

FQHC Responsibilities

- Goals

- Deliver healthcare to underserved populations
- Report to the government how the money is spent, how many patients are seen, and what services were provided
- Demonstrate the ability to track certain disease processes, the interventions taken in them, and how this impacted the prevalence of the disease in the community served

FQHC Funding

- Grants are for \$700,000 per year. The first grant is for 2 years, and subsequent grants are for 3 years.
- Grants receive enhanced payments from Medicaid (2-3x normal) and are allowed to install pharmacies that can purchase medications at the bulk government purchase prices (very low) and sell them at retail prices to many patients.
- About \$70,000 are provided to pay for an outreach coordinator, whose job is to recruit patients to the clinic by establishing

Government Benefits

- Public in Need gets access to care
- Reporting requirements ensure the money is well spent and patients are helped
- Government gets a network of providers able to implement national healthcare objectives
 - For example, under this administration Planned Parenthood has come under attack, and the president would like to divert that funding to FQHC's and have them provide women's healthcare services with possibly a more pro-life stance.

Physician Benefits

- Salaries up to \$220,000 + benefits/vacation for primary care with \$50,000 student loan pay-off.
- Salary for work as CMO up to \$70,000 annually
- Infrastructure and overhead paid for by the government
- Workload only expected to see up to 2000 patients per year.
- Immunity from malpractice lawsuits
- Ability to get a tax write-off for time donated
 - Work as employee when have time to, and then donate the salary back to the clinic
- Participate in healthcare delivery conversations at the state government level.

Pakistani-American Benefits

- Serve your country in a way it desperately needs and in a way that you are uniquely qualified to handle
- Provide a positive model of a Pakistani American for your local community, to help lessen current racial/religious tensions
- Provide an employment opportunity for any new doctors you know or any doctors looking for a new location
- In rural areas, become a major employer, economic and political force.

How Do I Start?

- Contact your local Primary Care Association for guidance.
- Check the grants.gov website for the next grant opportunity available in your area.
- Search for Medically Underserved Areas in your region and chose one to serve.
- Establish and operate a clinic in that area for one year, or partner with an existing clinic in that area.
- Obtain 501c3 nonprofit status, write your bylaws and recruit patients to your board.
- Hire a consultant to help write your grant application and help with initial operations.

No Grant, Now What?

- FQHC Look-alike
 - Still get increased Medicaid reimbursement rate
 - Still get access to discounted pharmacy prices
- Consider joining the board of existing FQHCs in your region
 - Provides market intelligence and operations experience
- Ask local politicians to support your application next time

Potential Pitfalls

- Established Local Competitors interfering with operations/personnel
- Deceptive consultants with limited experience/ability
- Side-dealing CEO's limiting information sharing with the Board
- Poor supervising grant officers
- Poor Fiscal Oversight / Failure to keep federal grant funds separate from other funds

Positives

- Help the community get healthcare
- Create jobs
- Raise the profile of Muslims in America
- Make the practice of medicine easier and more profitable while doing all of the above

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