

HRSA - Bureau of Primary Health Care

Consultant eNews

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Don't limit your challenges; challenge your limits. Each day we must strive for constant and never-ending improvement." - Tony Robbins

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Message to Our Consultants

We extend our heartfelt gratitude to the MSCG family for yet another remarkable year under the Program Management Technical Assistance and Training: Operational Site Visits contract with the Bureau of Primary Health Care (BPHC). This year, we successfully completed nearly 530 operational site visits, and we anticipate a similar volume for the upcoming year. It brings us immense pleasure to announce that all these site visits will be conducted in-person.

In Fiscal Year (FY) 2023, MSCG reached significant milestones in our relentless pursuit of compliance excellence within Health Centers. The successful implementation of the HCCESV (CE) model marked a pivotal achievement, and we are committed to continuing site visits under this model in the coming year. Additionally, MSCG provided BPHC with comprehensive analyses of OSV compliance data and emerging trends, alongside evaluations of consultant performance through Federal Staff and Health Center assessments. Furthermore, we hosted numerous listening sessions and meticulously crafted a range of tools and resources that will prove invaluable to all stakeholders, aiding our site visits for HCCESV, OSV, FTCA, HCCN, PCA, and NTTAP.

In Fiscal Year (FY) 2024, we are poised to persistently invest in consultant training and recruitment efforts, introduce an innovative virtual platform, sustain our HCCESV Technical Assistance initiatives and naturally, continue our site visits. As we embark on this new contract year, please stay vigilant for updated site visit communications, the annual Conflict of Interest form, IT Assessments, and reminders to help us prepare for this year's visits.

We are eternally grateful for your unwavering support and your choice to partner with us for yet another year. Here's to an outstanding year ahead, filled with achievements and successes! Cheers!

Consultant Resources



2023 Standard Operating Procedure for OSVs

The updated 2023 Standard Operating Procedures (SOP) Manual for Operational Site Visits (OSVs) is now accessible through the MSCG Consultant Portal. This second edition encompasses comprehensive instructions, guidance, protocols, and the standards set by Management Solutions Consulting Group, Inc.'s (MSCG) for both virtual and onsite visits. Notably, the 2023 SOP introduces the most current terminology used to describe visits, offering clear definitions and clarification of the roles performed by federal partners at the Bureau of Primary Health Care (BPHC).

For active consultants engaged in site visits, the MSCG Consultant Portal offers complementary training and a mandatory assessment, furnishing critical insights and details to prepare for and conduct an OSV. These resources, in conjunction with the BPHC Site Visit Protocol (SVP) and Health Center Program Compliance Manual (CM), must be thoroughly reviewed before embarking on a virtual or onsite visit.

A salient feature of the 2023 SOP Manual is its heightened focus on Consultant Professionalism. This chapter has been expanded to address a broader spectrum of adverse evaluations and on-site incidents that have occasionally posed challenges for MSCG to address. Consequently, it underscores the need to eliminate inappropriate behaviors among consultants-both within MSCG and BPHC's desired outcomes for the consultant pool over time. Recognizing that professional growth is an ongoing journey, the SOP Manual serves as a valuable resource for both new and seasoned consultants, acknowledging that no consultant is infallible, and everyone can benefit from its insights.

Provided below is a preview of advice from the SOP Manual, serving as a reminder regarding certain actions by consultants that have surfaced more frequently among the current roster. One pressing concern has been the discussion of site visits by consultants who were not part of the visit under discussion. Some consultants have shared information with colleagues regarding potential work opportunities arising from findings in visits they did not attend. It is crucial to emphasize that discussing the results of a visit not attended by a consultant or sharing information related to potential employment opportunities with a consultant is strictly prohibited.

Lastly, it is imperative that consultants diligently utilize the HRSA Compliance Manual and the HRSA OSV Protocol. These documents, supplied by BPHC, convey a consistent message of compliance to Federally Qualified Health Center (FQHCs) and play a pivotal role in sustaining the compliance process's integrity. Oversight and compliance are paramount, given that numerous FQHCs still need to meet HRSA compliance requirements, necessitating vigilant compliance monitoring. Both MSCG and BPHC emphasize the importance of MSCG consultants maintaining objectivity in their reviews, refraining from imposing personal preferences on compliance methods, and adhering to the minimal compliance benchmarks outlined in HRSA manuals and protocols.

It's worth noting that the distinction between compliance activities during a site visit and performance improvements (often seen as optional but beneficial) remains a source of confusion. To address this, we urge all consultants to thoroughly review and utilize the HRSA Compliance Manual and Site Visit Protocol to ensure a clear understanding of the difference. Should you have any inquiries, please don't hesitate to reach out to: jbervovich@imstrategists.com

Your commitment to professionalism and adherence to these guidelines are vital to our collective success. Thank you for your unwavering dedication.

FTCA Guidance on Re-Credentialing and Re-Privileging

Please find below FTCA Guidance on Re-Credentialing and Re-Privileging. Should you have any follow up questions or concerns, please use the BPHC Policy Form located in your MSCG consultant portal: www.msccginc.com/consultant

Q. How often must *FTCA deemed health centers* conduct re-credentialing and re-privileging for all clinical staff members?

A. At least every two years. In applying for FTCA deeming, health centers attest that they will review the credentials of all clinical staff members “at least every two years”. [PAL-2023-01, Calendar Year 2024 Requirements for Federal Tort Claims Act \(FTCA\) Coverage for Health Centers and Their Covered Individuals](#) (see page 16 of 22). It is essential to note that while [Chapter 5 of the Health Center Compliance Manual](#) offers a two-year interval as an illustrative example rather than a strict mandate, *FTCA-deemed health centers* are obligated to fulfill **both** the general requirements for health centers (as mentioned in the compliance manual) and any additional FTCA deeming stipulations (like those in the deeming application). Consequently, *FTCA-deemed health centers* should establish and enforce operating procedures mandating at least an every two year review of credentials for all clinical staff members. During Operational Site Visits (OSV), if a *FTCA-deemed health center's* procedures and records indicate that credentialing and privileging occur every three years or even less frequently, it might not lead to an adverse finding or a grant award condition for the Health Center Program. However, such a finding can affect FTCA compliance and potentially result in an unfavorable deeming determination.

Q. Are there statements or advice consultants should avoid when interacting with FTCA deemed health centers as it relates to the required frequency of re-credentialing and re-privileging?

A. Yes, during Operational Site Visits (OSVs), consultants are strictly prohibited from indicating or suggesting that *FTCA deemed health centers may* review credentials and privileges on a timeframe that is greater than every two years (for example every 3, 4 or 5 years). Consultants are also strictly prohibited from suggesting or implying that *FTCA deemed health centers* are allowed to revise their procedures to reflect a timeframe for review that is greater than every two years (for example every 3, 4 or 5 years).

Health Center Compliance and Engagement Operational Site Visits (HCCESV)

Attention HCCESV Consultants: Please be sure to only utilize the revised documents in the Consultant Portal. The documents that were provided during the pilot are obsolete and should not be employed.

The freshly revised documents encompass:

- HCCESV model FAQ's
- Team Lead introduction email
- Supplemental narrative questions
- Pre-site planning call agenda
- One day agenda for interviews and conclusion of HCCESV
- Optional cultivation scheduling tools for each area of expertise
- Supplement to the OSV Standard Operating Procedure Manual (*Pending*)

If you have any questions, please email us at logistics@mscginc.com.

Consultant Reminder

Submission of Reports and Vouchers



Option Year 2 of the contract begins September 29, 2023. Any outstanding consultant report and/or vouchers for Option Year 1 should be submitted today.

Kudos! Kudos! Kudos!



Team: David Gorchoff, Teresa Dotson, Cecelia Creighton

David's thorough review of our documents and his insightful recommendations have been immensely valuable to our organization. His expertise in clinical, risk management, and quality control has undoubtedly enhanced our processes and procedures. We are grateful for his dedication and commitment to helping us improve. David's suggestions have provided us with a clear roadmap for implementing positive changes, and we are eager to work hard to put them into action. We sincerely appreciate his contribution and look forward to the positive impact it will have on our clinical practices and overall quality control.

Teresa's meticulous attention to detail and thoroughness in her work were truly commendable. Her fiscal expertise was evident in the valuable feedback and recommendations she provided. We are grateful for her contributions and the knowledge we gained from her. Moving forward, we will implement the insights she shared, confident that they will bring positive changes to our processes.

Cecelia's assistance and support were truly invaluable. Not only did she provide us with excellent recommendations, but she also took the time to thoroughly review all of our workflows and policies. This level of dedication and attention to detail was truly remarkable and greatly appreciated. Cecelia's contributions have undoubtedly had a positive impact.

Team: Michelle Layton, Tracey Perkins, and Jared Pollick

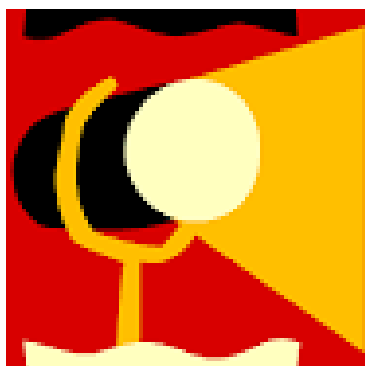
This is our health center's fourth OSV experience and our first utilizing the one-day, virtual OSV model. The unanimous opinion of our staff is that this model was the most beneficial (of all previous OSV models) to our health center.

The cultivation calls prior to the OSV allowed great opportunity for education, question and answer sessions, and overall technical assistance from the reviewers. Due to the relaxed nature of the cultivation calls (as they were prior to the actual compliance assessment), our staff were able to ask honest questions and receive comprehensive, thoughtful responses from the reviewers. Furthermore, we were able to make policy and procedure revisions prior to the OSV assessment day. We feel that this model allowed for the most thorough review of our health center's operations. Submitting all documents electronically and in advance of the OSV - while a substantial amount of work - was made easier by the guidance offered in the cultivation calls, and the one-day assessment allowed for an exceptional OSV experience.

Team: Thomas Maynor, Teresa Dotson, Jeannie Olsen

We wanted to simply reinforce our comments from the Exit Conference. While it may sound funny to say, we had an outstanding experience with the OSV. Your team was engaged, knowledgeable and came in prepared. We spent a lot of time and energy in preparing and uploading material and it was rewarding to know that you all had done your homework ahead of time and actually reviewed what we had submitted. This has not always felt like it was the case in past OSVs. We also appreciated the clear reality that you all were committed to the ideals of the Community Health Center model. The focus was clearly on ensuring compliance, but we also greatly appreciated the conversations and the TA that was provided. We believe we are and will be a better health center as a result of the OSV process.

MSCG Employee Spotlight



The Spotlight is on Kathie Baldwin!

Kathie Baldwin, has over 25 years' experience in health care and community-based organizations, including 12+ years in providing oversight, protocol and policy development, and training for HIPAA compliance. Kathie began her career working with mental health providers in an underserved community in Baltimore City. The work was rewarding, and she enjoyed seeing the impact that the community programs had on the individuals served.

Kathie is Certified in Professional Healthcare Quality and has served as a faculty advisor for the Institute for Healthcare Improvement (IHI). She currently serves as the Project Director for the HRSA HIV Bureau. She has previously served as the Project Director for the HRSA Office of Rural Health and Policy and the HRSA Office of Quality & Data, where she led a team of clinicians in the development of the "Quality Toolbox". This toolbox was developed to support health providers in improving outcomes in specific health indicators.

Kathie has never shied away from a challenge. She prides herself on her ability to rationally assess a situation, mitigate challenges, and develop a plan to overcome obstacles or challenges she encountered.

In her spare time, Kathie enjoys spending time with her twelve grandchildren at the beach.

MSCG ACU CONFERENCE BOOTH

July 23-26, 2023



MSCG, a leading provider of healthcare consulting services, attended the ACU 2023 Annual Conference from July 23-26 at the Marriott Marquis in Washington, D.C. MSCG had a dedicated booth to meet with potential clinicians to discuss consulting opportunities. The booth was staffed by MSCG Logistics Coordinator, Marsha Bailey and by IMS Logistics Coordinator, Beth Stuckey, who played essential roles in showcasing MSCG's mission and values. Above are photos of Beth (r) and Marsha (l). Their active involvement at the conference underscores MSCG's commitment to connecting with healthcare professionals who are passionate about serving the underserved.

Should you have any other questions or concerns, please contact us at:

contact_us@mscginc.com

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