National Shortage Designation Project: Auto-HPSAs

April 20, 2018

Webinar Objectives

After this webinar, PCAs will:

- Understand the scoring criteria used for Auto-HPSAs;

- Know that the scoring criteria is not changing;

- Be able to identify the data sources that will be used for the Auto-HPSA impact analyses; and

- Identify resources available to them throughout this project.

Shortage Designations* Help Target Resources**

Shortage Designation Option	National Health Service Corps (NHSC)	NURSE Corps	Health Center Program	CMS HPSA Bonus Payment Program	CMS Rural Health Clinic Program	J-1 Visa Waiver
Primary Care						
Geographic HPSA	X	X		X	X	X
Population HPSA	X	X			X	X
Facility HPSA	X	X				X
Dental Care						
Geographic HPSA	X					
Population HPSA	X					
Facility HPSA	X					
Mental Health						
Geographic HPSA	X	X		X		X
Population HPSA	X	X				X
Facility HPSA	X	X				X
Medically Underserved Area (MUA)			X		X	X
Medically Underserved Population (MUP)			X			X
Exceptional MUP			X			X
State Governor's Certified Shortage Area					X	

*42 USC §254e(d)(1): "The Secretary shall determine health professional shortage areas in the States, publish a descriptive list of the areas, population groups, medical facilities, and other public facilities so designated, and at least annually review and, as necessary, revise such designations."
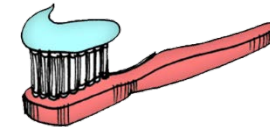**List of programs is not exhaustive.
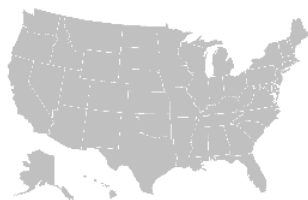
Types of HPSAs

Primary
Care

Mental
Health

Dental
Health

providers in a:

Geographic Area

Population
Group

Facility

HPSA Designation Criteria

While the general components of designation analysis are similar across designation types, the specific eligibility criteria vary depending on designation type…

Geographic Area

Population

Facility

Automatically Designated Facility HPSAs

Using the statute and regulations, HRSA has deemed the following facility types as eligible for automatic HPSA designation:

- **Health Centers (funded under Sec. 330)**
- **Health Center Look-Alikes**
- **Tribally-Run Clinics**
- **Urban Indian Organizations**
- **Dual-Funded Tribal Health Centers**
- **Federally-Run Indian Health Service Clinics**
- **Rural Health Clinics meeting NHSC site requirements**

Auto-HPSAs compared to other HPSAs
Similar but not the same

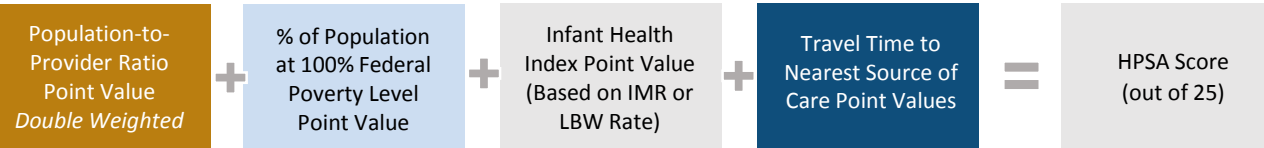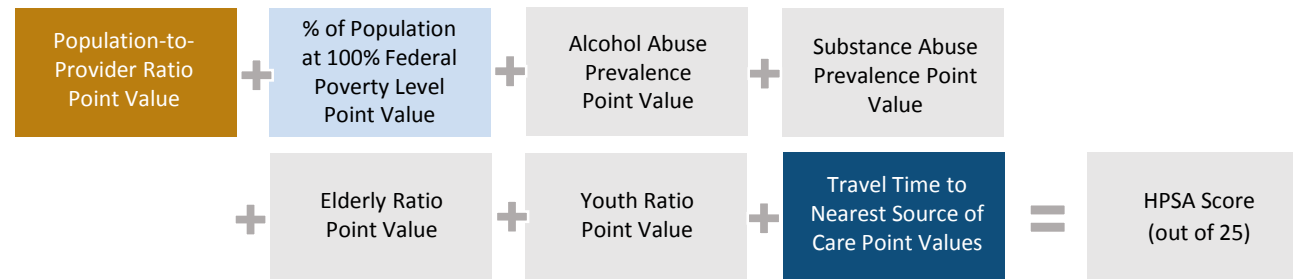| Other HPSAs	Automatic Facility HPSAs
• Designation & scoring done online • Criteria used to first designate as HPSA • Criteria used to determine HPSA score • Scores range from 0-25 (26 for dental) • Designations are required to be reviewed and updated as necessary annually • Score of "0" is rare	• Designation & scoring currently done **manually** • **No application** process necessary • Same criteria used to determine HPSA score as other HPSAs • Same scoring range used • HRSA has not historically required Auto-HPSA scores to be reviewed regularly; updates are requested by facility • Score of "0" **more frequent** and means low shortage or no data was available for scoring

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HPSA Scoring Criteria

HPSA scores are based on a variety of criteria and range from 0 to 25 in the case of Primary Care and Mental Health, and 0 to 26 in the case of Dental Health.
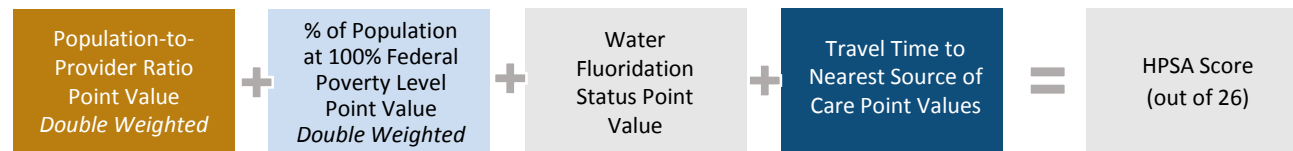
Primary Care
0-25

| Population-to-Provider Ratio Point Value *Double Weighted* | + | % of Population at 100% Federal Poverty Level Point Value | + | Infant Health Index Point Value (Based on IMR or LBW Rate) | + | Travel Time to Nearest Source of Care Point Values | = | HPSA Score (out of 25) |

Mental Health
0-25

| Population-to-Provider Ratio Point Value | + | % of Population at 100% Federal Poverty Level Point Value | + | Alcohol Abuse Prevalence Point Value | + | Substance Abuse Prevalence Point Value |

| + | Elderly Ratio Point Value | + | Youth Ratio Point Value | + | Travel Time to Nearest Source of Care Point Values | = | HPSA Score (out of 25) |

Dental Health
0-26

| Population-to-Provider Ratio Point Value *Double Weighted* | + | % of Population at 100% Federal Poverty Level Point Value *Double Weighted* | + | Water Fluoridation Status Point Value | + | Travel Time to Nearest Source of Care Point Values | = | HPSA Score (out of 26) |

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HPSA
Scoring Calculations

Criteria	Primary Care			Dental Health			Mental Health
	Max Pts Awarded	**Multiplier**	**Total Points Possible**	**Max Pts Awarded**	**Multiplier**	**Total Points Possible**	**Max Pts Awarded**
Population:Provider Ratio	5	x 2	= 10	5	x 2	= 10	7
% of Population below FPL	5	x 1	= 5	5	x 2	= 10	5
Travel distance/time to NSC	5	x 1	= 5	5	x 1	= 5	5
Infant Mortality Rate or Low Birth Weight	5	X 1	= 5				
Water Fluoridation				1	x1	= 1	
Ratio of children under 18 to adults 18-64							3
Ratio of adults 65 and older to adults 18-64							3
Substance abuse prevalence							1
Alcohol abuse prevalence							1
Max Score:			= 25			= 26	= 25

How HPSA Scores are Used

HRSA National Health SERVICE CORPS

1. Priority in Awards

2. Award Levels
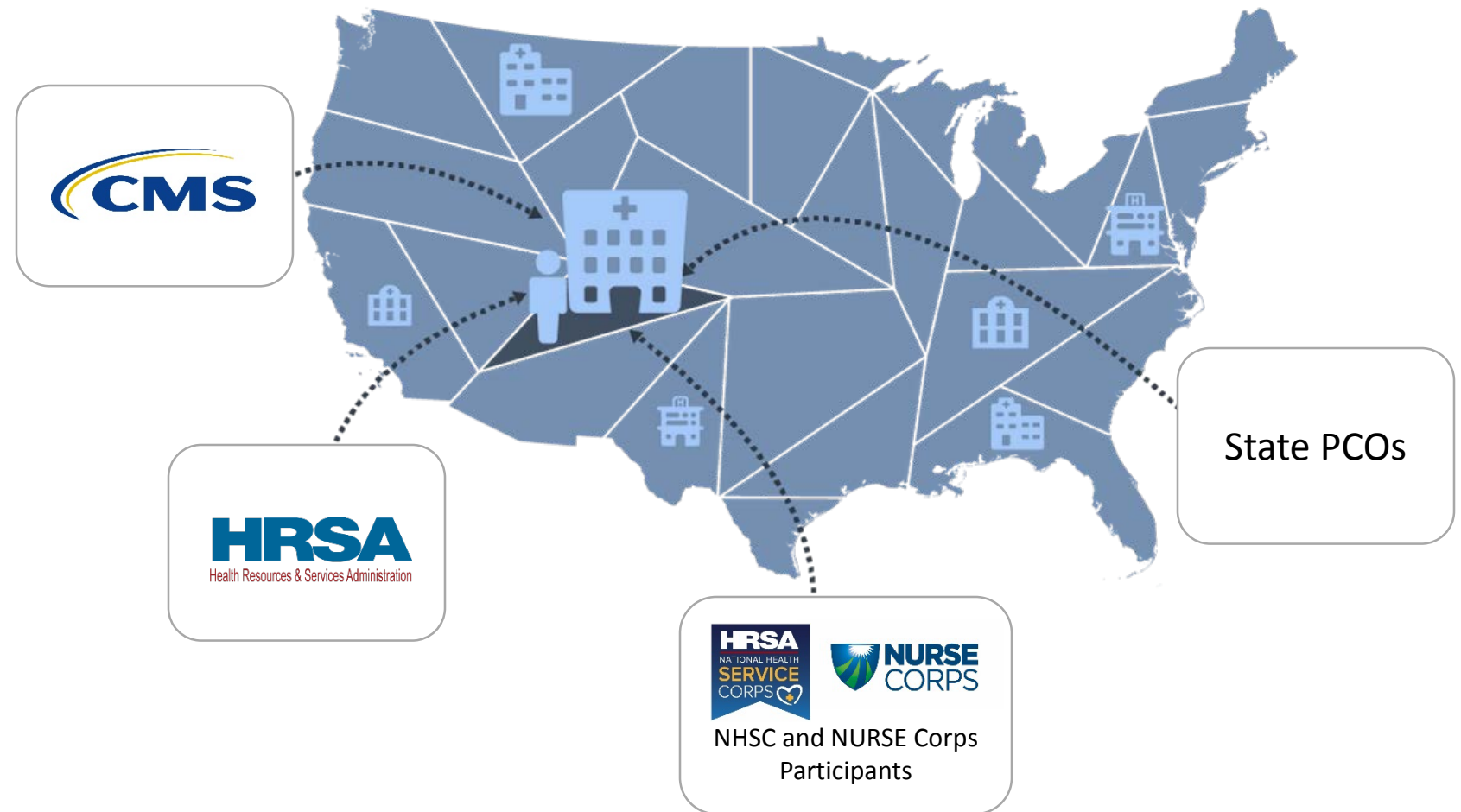
3. Scholar Placement

NURSE CORPS

1. Funding Preference
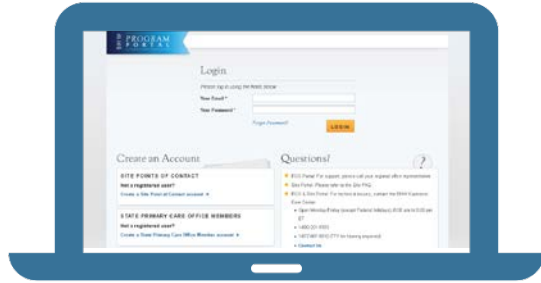
2. Scholar Placement
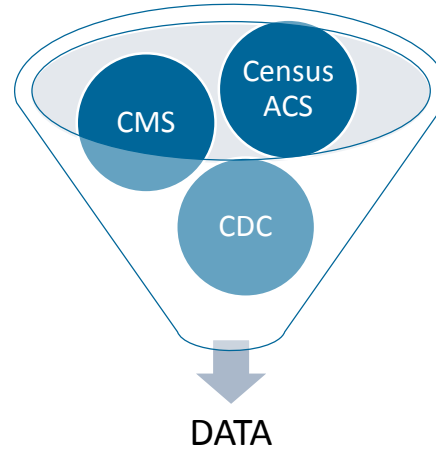
Shortage Designation Modernization Project

- Shortage designation is authorized by Congress and is supported by HRSA and State Primary Care Offices (PCOs) through a shared responsibility to better serve underserved and rural areas in need of health care access.

- Initiated in 2013, the Project makes this shared goal more efficient, modern, and consistent for all states and territories.

State PCOs

NHSC and NURSE Corps Participants

Shortage Designation Management System (SDMS)

... is an online **tool** used by State PCOs and HRSA to manage designations
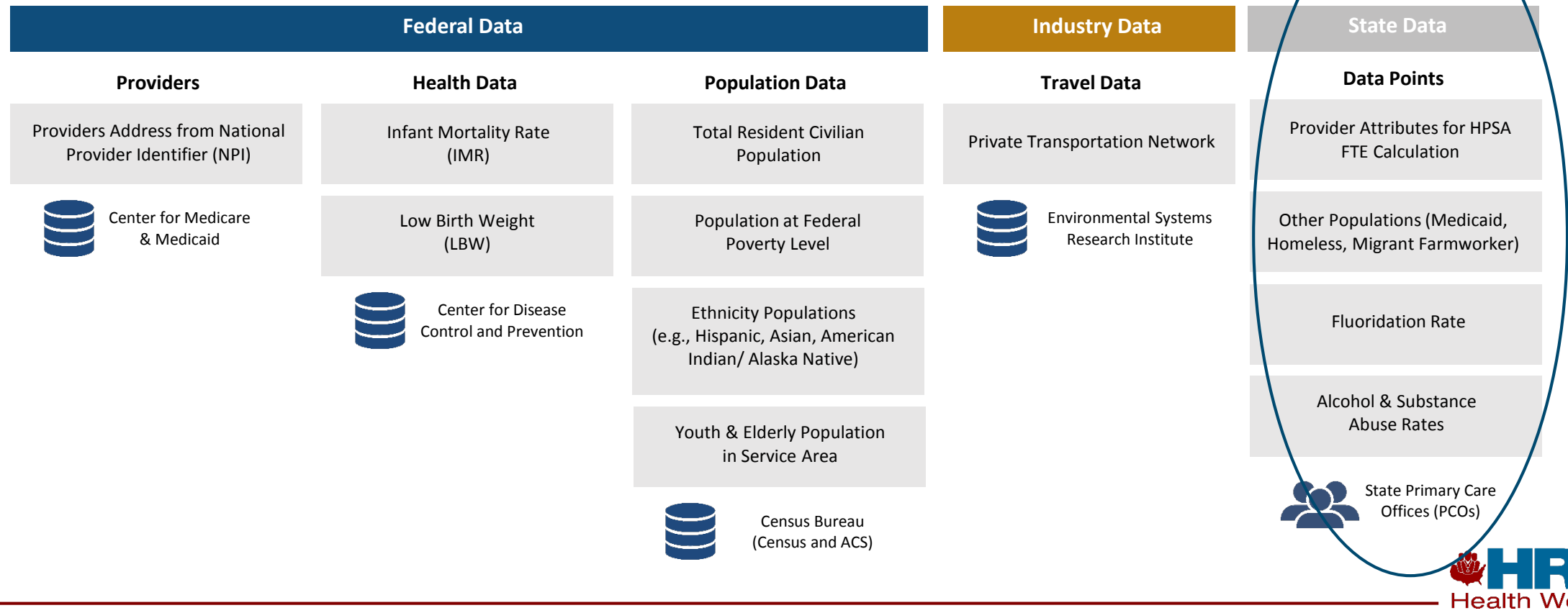

DATA

... uses **standard data sets** to calculate designations

... is based on **regulations**

Shortage Designation Management System (SDMS) Data Sources

- Standardized data are sourced from:
  - The Centers for Medicare & Medicaid Services (CMS) for provider data
  - The Centers for Disease Control and Prevention (CDC) for infant health data
  - The Census Bureau for population data
  - The Environmental Systems Research Institute (ESRI) for travel and spatial mapping data
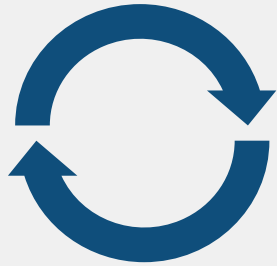
Federal Data			Industry Data	State Data
Providers	**Health Data**	**Population Data**	**Travel Data**	**Data Points**
Providers Address from National Provider Identifier (NPI)	Infant Mortality Rate (IMR)	Total Resident Civilian Population	Private Transportation Network	Provider Attributes for HPSA FTE Calculation
Center for Medicare & Medicaid	Low Birth Weight (LBW)	Population at Federal Poverty Level	Environmental Systems Research Institute	Other Populations (Medicaid, Homeless, Migrant Farmworker)
	Center for Disease Control and Prevention	Ethnicity Populations (e.g., Hispanic, Asian, American Indian/ Alaska Native)		Fluoridation Rate
		Youth & Elderly Population in Service Area		Alcohol & Substance Abuse Rates
		Census Bureau (Census and ACS)		State Primary Care Offices (PCOs)

Shortage Designation Modernization Project

TRANSPARENCY

ACCOUNTABILITY

PARITY

Why modernize Auto-HPSAs?
HRSA and stakeholders agree that...

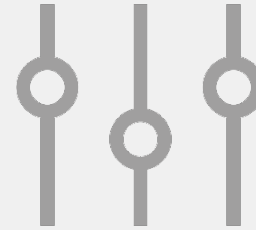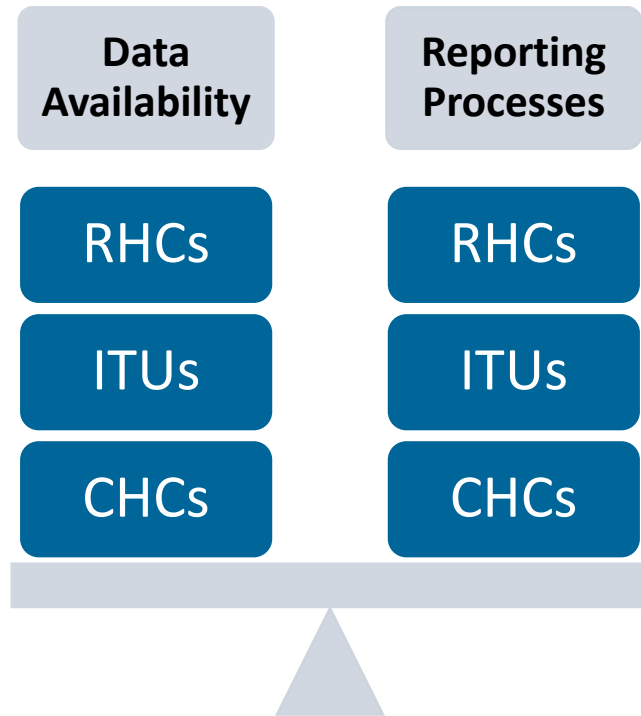|		
Auto-HPSA scores must be updated	Auto-HPSA scores should reflect current data	Auto-HPSA scores should be based on data that reflects current levels of need

Auto-HPSA Working Group: Data Proposals

Data Availability

RHCs

ITUs

CHCs

Reporting Processes

RHCs

ITUs

CHCs

Thank you to the PCA and CHC representatives
on the Auto-HPSA Working Group:

- Aleksandr Kladnitsky (Wisconsin Primary Health Care Association)
- Colleen Meiman (National Association of Community Health Centers)
- Greg Nycz (Family Health Center of Marshfield)
- Shelly Phillips (Association for Utah Community Health)
- Vanessa Santarellli (Maine Primary Care Association)

Auto-HPSA 2018 Milestones*

2018

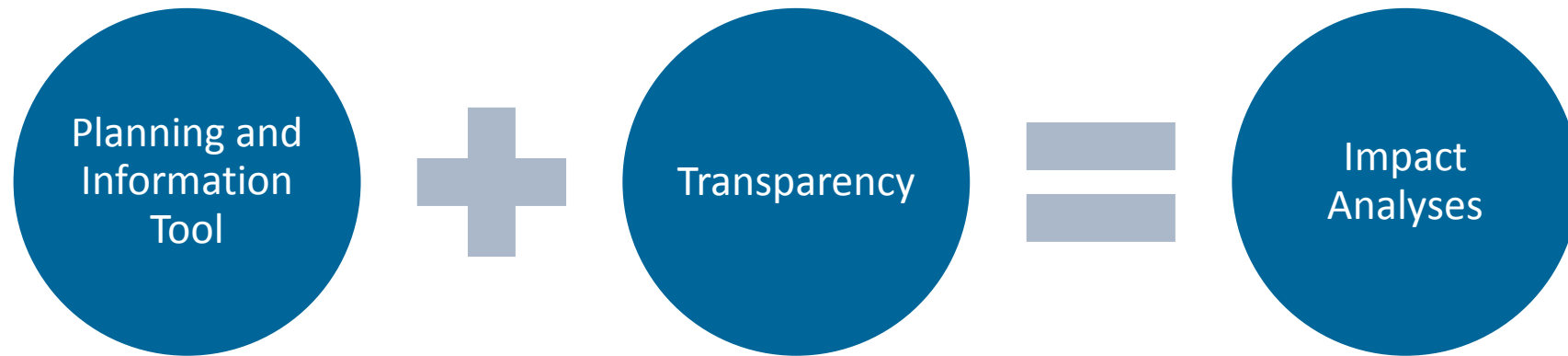| Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Primary Care Offices continue to review and revise provider data												
Stakeholder review of timeline and approach												
Ad Hoc Auto-HPSA Communications Working Group												
Auto-HPSA impact analysis technical development												
Initial impact analysis results available								☀				
Communication of impact analysis results												
Additional impact analyses released (and continued in 2019)												

*National Shortage Designation Update of Auto-HPSAs tentatively planned for April 2019.

PCO provider data collection efforts, impact analyses and stakeholder engagement to continue in 2019.

Current processes for Auto-HPSAs remain in place.
To request a score or rescore, email SDB@hrsa.gov.

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Purpose of Impact Analyses

Planning and Information Tool **+** Transparency **=** Impact Analyses

Population: Provider Ratio	Primary Care			Dental Health			Mental Health
HPSA Scoring Criteria	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded
Population: Provider Ratio	5	x 2	= 10	5	x 2	= 10	7

Community Health Centers*

SERVICE AREA

- Defined by zip codes in which **_75% of a Auto-HPSA facility's patients reside_** to create a Zip Code Tabulation Area (ZCTA)-based service area. (*Source: UDS*)

DEFINITION

- Population defined **_as low income population at or below 200% FPL_** in the service area. (*Source: Census*)

- Providers defined as the count of eligible **_FTEs that serves Medicaid patients OR provides services on a sliding fee scale_** in the service area. (*Source: SDMS*)

Rural Health Clinics**

SERVICE AREA

- Defined by census tracts intersecting with a **_30 or 40 minute travel polygon_** to create service area. (*Source: SDMS*)

DEFINITION

- Population defined as **_total population_** in the service area. (Source: *Census*)

- Providers defined as the count of eligible **_FTEs_** in the service area. (Source: *SDMS*)

I/T/Us**

SERVICE AREA

- Defined by census tracts intersecting with a **_30 or 40 minute travel polygon_** to create service area. (*Source: SDMS*)

DEFINITION

- Population defined as **_total population of American Indians/Alaska Natives_** in the service area. (Source: *Census*)

- Providers defined as the count of eligible **_FTEs that serve the American Indian/Alaska Native_** populations within the service area. (Source: *SDMS*)

***Scoring will be at the organizational level.**
****Following the National Update, RHCs and ITUs may provide facility-level data to their State Primary Care Offices to be rescored.**

ZCTA-Based Service Area Example

75% of a Auto-HPSA facility's patients reside to create a Zip Code Tabulation Area (ZCTA)-based service area

# of Patients	% of Patients	Aggregate % of Patients	ZCTA
2,000	20%	**20%**	1
1,800	18%	**38%**	2
1,500	15%	**53%**	3
1,000	10%	**63%**	4
800	8%	**71%**	5
900	9%	**80%**	6
700	7%	87%	7
500	5%	92%	8
500	5%	97%	9
300	3%	100%	10
10,000	100%		

ZCTAs 1-6 will be used to create the service area (75% threshold)

ZCTAs 7-10 will not be used to create the service area (above 75% threshold)

% of Population Below FPL	Primary Care			Dental Health			Mental Health
HPSA Scoring Criteria	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded
% of Population below FPL	5	x 1	= 5	5	x 2	= 10	5

Community Health Centers

SERVICE AREA

- Not used

DEFINITION

- Out of an ***Auto-HPSA facility's total patient population***, the count of individuals at or below 100% FPL ***divided by the total unduplicated patient population***. (*Source: UDS*)

Rural Health Clinics*

SERVICE AREA

- Defined by census tracts intersecting with a 30 or 40 minute travel polygon to create service area. (*Source: SDMS*)

DEFINITION

- Out of the ***population in the service area***, the count of individuals at or below 100% FPL ***divided by the total population for whom poverty is determined***. (*Source: Census*)

I/T/Us*

SERVICE AREA

- Defined by census tracts intersecting with a 30 or 40 minute travel polygon to create service area. (*Source: SDMS*)

DEFINITION

- Out of the ***American Indian/Alaska Native population in the service area***, the percentage of individuals at or below 100% FPL. (*Source: Census*)

*Following the National Update, RHCs and ITUs may provide facility-level data to their State Primary Care Offices to be rescored.

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Travel Distance/Time to Nearest Source of Care (NSC)	Primary Care			Dental Health			Mental Health
HPSA Scoring Criteria	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded
Travel distance/time to nearest source of care (NSC)	5	x 1	= 5	5	x 1	= 5	5

Community Health Centers

DEFINITION

- The nearest *provider that serves Medicaid patients AND provides services on a sliding fee scale* who is not in an over utilized* area. *(Source: SDMS)*

Rural Health Clinics

DEFINITION

- The nearest *provider that serves Medicaid patients AND provides services on a sliding fee scale* who is not in an over utilized* area. *(Source: SDMS)*

I/T/Us

DEFINITION

- The nearest *provider that serves American Indian/Alaska Native* populations who is not in an over utilized* area. *(Source: SDMS)*

- **Note:** HRSA is assessing the feasibility of using distance and time from I to I, T to T, U to U

*To determine overutilization: a 30-40 minute travel polygon will be drawn around each provider based on private transportation to create an area from which the population and provider data will be pulled. (Source: *SDMS*)

A provider will be considered over-utilized if the population to provider ratio is greater than:
- **Primary Care:** 2,000:1
- **Dental Health:** 3,000:1
- **Mental Health**
  o Providers will be considered over-utilized if the population-to-provider ratio for psychiatrists > 10,000:1 and the population-to-provider ratio for Core Mental Health providers is > 3,000:1;
  o If there is no data on Core Mental Health providers other than psychiatrists or the Core Mental Health other than psychiatrists FTE = 0, providers will be considered over utilized if the population-to-provider ratio for psychiatrists is > 20,000:1.x

Infant Mortality Rate or Low Birth Rate	Primary Care			Dental Health			Mental Health
HPSA Scoring Criteria	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded
Infant Mortality Rate or Low Birth Weight	5	x 1	= 5				

Community Health Centers

DEFINITION

- **IMR:** Out of the total population, the count of infant deaths divided by the total number of infant births for the county in which the Auto-HPSA service areas are located. Scaled by 1,000. *(Source: CDC)*

- **LBW:** Out of the total population, the count of low birth weight births divided by the total number of infant births for the county in which the Auto-HPSA sites are located. Scaled by 100. *(Source: CDC)*

Rural Health Clinics

DEFINITION

- **IMR:** Out of the total population, the count of infant deaths divided by the total number of infant births for the county in which the Auto-HPSA service area are located. Scaled by 1,000. *(Source: CDC)*

- **LBW:** Out of the total population, the count of low birth weight births divided by the total number of infant births for the county in which the Auto-HPSA sites are located. Scaled by 100. *(Source: CDC)*

I/T/Us

DEFINITION

- **IMR:** Out of the total population, the count of infant deaths divided by the total number of infant births for the county in which the Auto-HPSA service area are located. Scaled by 1,000. *(Source: CDC)*

- **LBW:** Out of the total population, the count of low birth weight births divided by the total number of infant births for the county in which the Auto-HPSA sites are located. Scaled by 100. *(Source: CDC)*

Water Fluoridation	Primary Care			Dental Health			Mental Health
HPSA Scoring Criteria	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded
Water Fluoridation				1	x 1	= 1	

Community Health Centers

DEFINITION

- Score default to "0".

Rural Health Clinics

DEFINITION

- Score default to "0".

I/T/Us

DEFINITION

- Score default to "0".

After the National Update tentatively scheduled for April 2019, all Auto-HPSA facilities may provide supplemental information to their State Primary Care Offices for point to be awarded.

Ratio of Children & Ratio of Adults	Primary Care			Dental Health			Mental Health
HPSA Scoring Criteria	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded
Ratio of children under 18 to adults 18-64							3
Ratio of adults 65 and older to adults 18-64							3

Community Health Centers

DEFINITION

- Out of the total patient population, the count of individuals younger than 18, or 65 and older, divided by the count of adults age 18-64. *(Source: UDS)*

Rural Health Clinics*

DEFINITION

- The count of individuals younger than 18, or 65 and older, divided by the count of adults age 18-64. *(Source: Census)*

I/T/Us*

DEFINITION

- The count of individuals younger than 18, or 65 and older, divided by the count of adults age 18-64. *(Source: Census)*

Following the National Update, RHCs and ITUs may provide facility-level data to their State Primary Care Offices to be rescored.

Substance Abuse Prevalence & Alcohol Abuse Prevalence	Primary Care			Dental Health			Mental Health
HPSA Scoring Criteria	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded	Multiplier	Total Points Possible	Max Pts Awarded
Substance abuse prevalence							1
Alcohol abuse prevalence							1

Community Health Centers

DEFINITION

- Score default to "0".

Rural Health Clinics

DEFINITION

- Score default to "0".
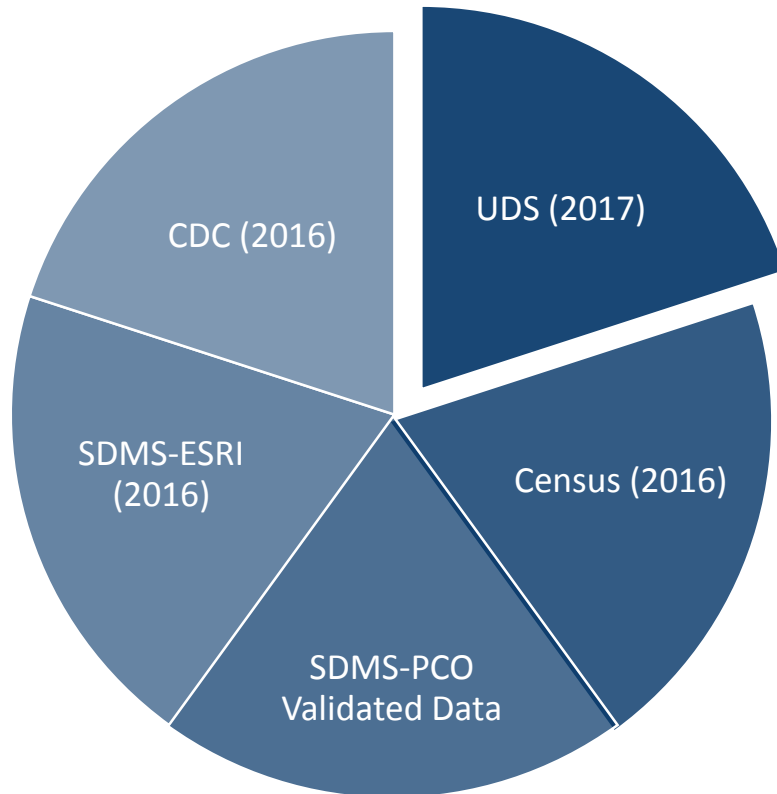
I/T/Us

DEFINITION

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After the National Update tentatively scheduled for April 2019, all Auto-HPSA facilities may provide supplemental information to their State Primary Care Offices for point to be awarded.

*Following the National Update, RHCs and ITUs may provide facility-level data to their State Primary Care Offices to be rescored.
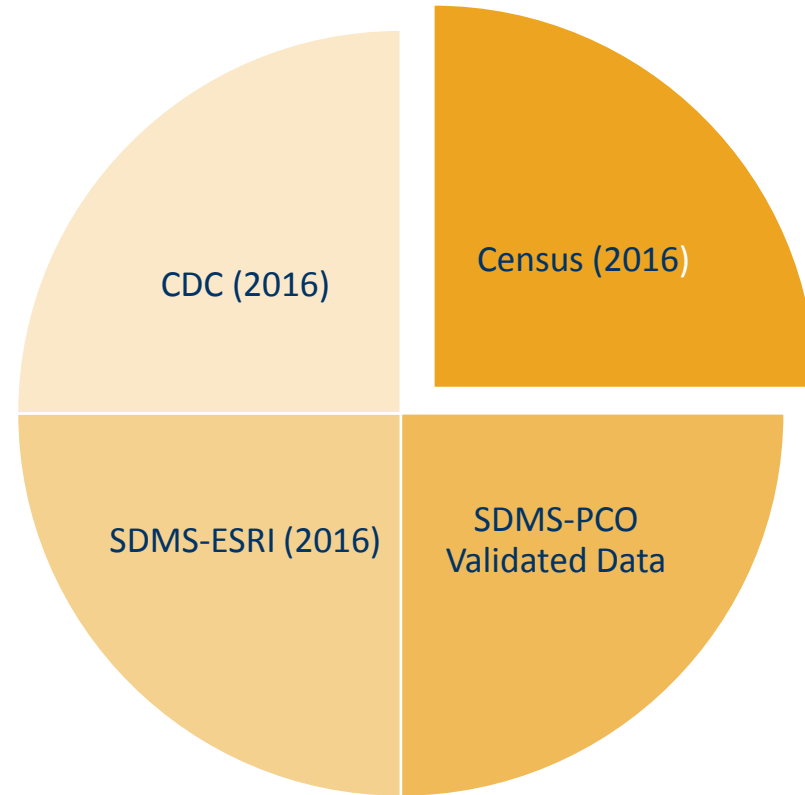
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Impact Analyses* Data Sources Summary

Community Health Centers
(scored at the organizational level)

- UDS (2017)
- Census (2016)
- SDMS-PCO Validated Data
- SDMS-ESRI (2016)
- CDC (2016)

RHCs, I/T/Us
(scored at the organizational or site level)

- Census (2016)
- SDMS-PCO Validated Data
- SDMS-ESRI (2016)
- CDC (2016)

* After the National Update tentatively scheduled for April 2019, Auto-HPSA facilities may provide information (facility-level data and/or supplemental data) to their State Primary Care Offices to be rescored.

Auto-HPSA FAQs

Q1: How will the organizational level scoring work?

A1:

- When scoring organizations with multiple sites, all sites will receive the same organizational score. A NSC will be calculated for each site.

- The NSC scores will be averaged. That average NSC score will be added to the other subscores to create an organizational score.

Note:

- UDS data are available only at the organization level.

- Each site will have the same subscores in the impact analysis with the exception of the NSC.

- Only health care delivery or health care delivery/administrative sites will receive a score.

Auto-HPSA FAQs (continued)

Q2: May facilities keep their existing scores?

A2:

- Every Auto-HPSA will be included in the Update tentatively planned for April 2019. (Even in rescored in advance of the Update.)

- Facilities may not keep their existing scores when the Update takes place.

Q3: How often will Auto-HPSAs be updated?

A3: At present, we are focused on the national Update tentatively planned for April 2019.

Next Steps

- Communicate, communicate, communicate

  Auto-HPSA Communications Working Group--PCA and CHC representatives:
  - **Aleksander Kladnitsky** (Wisconsin Primary Health Care Association)
  - **Barry Lacy** (Illinois Primary Health Care Association)
  - **Jessica Lungman** (Bear Lake Community Health Center, Inc.)
  - **Colleen Meiman** (National Association of Community Health Centers)
  - **Shelly Phillips** (Association for Utah Community Health)

- Distribute the results of the first impact analysis (anticipated August 2018)

Resources and Contact Information

SDB@HRSA.GOV	SDMP@HRSA.GOV
To request a score or rescore. *(Current process.)*	For questions about the Shortage Designation Modernization Project including: • Impact analyses • HPSA designation update

Additional Resources:
- https://bhw.hrsa.gov/shortage-designation/hpsa/primary-care-offices
- https://bhw.hrsa.gov/shortage-designation/application-scoring-process/modernization-project
- Sign up to get email updates about the project

HRSA Health Workforce

Summary

- *The Shortage Designation Modernization Project utilizes the existing HPSA scoring criteria. No changes to the criteria have been made.*

- *The national Update of Auto-HPSAs is tentatively planned for April 2019.*

- *A series of impact analyses will be provided in advance of the Update for informational and planning purposes.*

- *HRSA is actively engaging stakeholders in the project—please share your feedback.*

- *The current process to request a score or rescore remains in place.*

Resources and Contact Information

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Additional Resources:
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