HRSA Compliance 101
Federal Grantor: Health Resources and Services Administration (HRSA)

Health centers receive grant funding from HRSA’s Bureau of Primary Health Care (BPHC), under the Health Center Program, as authorized by Section 330 of the Public Health Service (PHS) Act

- Community Health Centers (CHCs) serve as the primary medical home for more than 27,000,000 people in over 10,400 communities across America
- Most grants provide support to contribute to serving an entire underserved community (or service area)
- Others (such as HCHN) receive funding from a special populations pot of grant dollars reserved for persons experiencing or at risk for homelessness, agricultural workers, and residents of public housing
Key Health Center Program Requirements

There are 19 Key Health Center Program Requirements. See: http://www.bphc.hrsa.gov/about/requirements/index.html

Divided into four categories:
- Need
- Services
- Management & Finance
- Governance
Need

1) **Needs Assessment**: Reviews the needs of people experiencing homelessness
   - [HCHN Community Needs Assessment 2016-17](#)
**Services**

2) **Health Care Services**: Provides all required health services (primary, preventative, enabling) and additional services, such as substance abuse.

3) **Staffing**: Enough fully licensed staff to carry out required health services.

4) **Hours/Locations**: Services at times/locations that meet needs of people experiencing homelessness.

5) **After Hours**: Emergency, after hours medical care available.

6) **Admitting Privileges**: Ability for HCHN providers to ensure continuity of care.

7) **Sliding Fee Discounts**: Policies in place to adjust health care costs depending on patient ability to pay.

8) **Quality Improvement/Assurance**: Program to ensure access to high quality care.
Management & Finance

9) Management: Fully staffed administrative team to manage program.

10) Contractual Agreements: HCHN admin team manages contracts with external agencies to ensure they are effective in achieving program goals and meet HRSA program requirements.

11) Collaborative Relationships: Partnerships with other health centers as well as hospitals, behavioral health providers, housing, shelter, and homeless services providers in the area.

12) Financial Management: Internal team to maintain financial stability and respond to annual independent audits.

13) Billing & Collections: System in place for collecting payments.

14) Budget: Reflects the costs of operations, expenses, and revenues in operating services.

15) Reporting Data: Accurately collects and reports data.

16) Scope of Project: Maintains services and sites to most effectively reach people experiencing homelessness. Provide HRSA with proposed updates to its “Scope of Project” document listing HCHN’s HRSA-approved sites and services.
Governance

17) **Governance Council**: Responsible for overseeing operations of HCHN

18) **Membership**: Represents population served and others who have experience with social service agencies, local government, etc.

19) **Conflict of Interest**: Policies to prohibit conflict of interest.
Next Steps

• Briefings for GC on HCHN administrative activities and processes related to the various requirements

• Collaboration between GC and HCHN Admin Team to structure our work together
  • Admin Team work with the GC Executive Committee on developing an annual calendar for key oversight activities