

<b>Department:</b>	Health Department	<b>Program Contact:</b>	DJ Rhodes
<b>Program Offer Type:</b>	Operating	<b>Program Offer Stage:</b>	Adopted
<b>Related Programs:</b>			
<b>Program Characteristics:</b>			

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Administration and Operations Program provides pivotal administrative, operational, and financial oversight of the Health Center program by developing and implementing fiscal accountability programs and access to health care. This includes teams and staff who help implement workflows, quality evaluations, financial reporting, patient engagement strategies, and workforce support.

### Program Description

This program supports services within the project scope of the Bureau of Primary Health Care (BPHC) grant. BPHC funding requires strict adherence to federal laws mandating which services must be provided by FQHCs, which results in additional Medicaid revenue.

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Activities supported in this program include developing and implementing fiscal accountability and monitoring infrastructure, management of revenue cycle activities, implementation of strategic projects, support for operational workflows to increase patient access to care, and projects designed to improve health outcomes. Examples of this type of work include support for transitioning and training clinical teams to expand virtual care, designing patient communication campaigns for managing chronic diseases, and designing reporting materials to reflect operational needs in fiscal and value based pay systems.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Medical Coding Accuracy: % of claims accepted by insurance partners	95%	95%	90%	95%
Outcome	% of patient communication materials are developed in the top five patient languages	100%	100%	90%	100%
Outcome	Completion of annual strategic planning activities and three year plan in alignment with CHC Board's vision.	100%	100%	100%	100%

### Performance Measures Descriptions

## Legal / Contractual Obligation

Quality services are a requirement of the Bureau of Primary Health Care's 330 Grant. Services in the scope of the grant and health center program must follow the HRSA Community Health Center Program's operational, fiscal, and governance requirements. The program is also accredited under The Joint Commission and follows TJC accreditation guidelines. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$0	\$9,243,423	\$0	\$10,682,579
Contractual Services	\$0	\$263,000	\$0	\$506,472
Materials & Supplies	\$0	\$247,868	\$0	\$378,762
Internal Services	\$0	\$2,290,660	\$0	\$2,933,682
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$12,044,951</b>	<b>\$0</b>	<b>\$14,501,495</b>
<b>Program Total:</b>	<b>\$12,044,951</b>		<b>\$14,501,495</b>	
<b>Program FTE</b>	0.00	43.80	0.00	55.40

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,225,755	\$0	\$1,225,755
Other / Miscellaneous	\$0	\$5,196,500	\$0	\$5,370,041
Beginning Working Capital	\$0	\$650,000	\$0	\$1,714,592
Service Charges	\$0	\$4,972,696	\$0	\$6,191,107
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,044,951</b>	<b>\$0</b>	<b>\$14,501,495</b>

## Explanation of Revenues

This program generates \$1,806,422 in indirect revenues.

Administration and Operations activities are funded with HRSA grant revenue, Medicaid fees, and quality incentive payments. Program leadership are working with CCO's to develop sustainable funding for quality assurance, data reporting work.

- \$ 6,383,507 - FQHC Medicaid Wraparound
- \$ 1,225,755 - Federal Primary Care (330) grant
- Federal: \$ 5,216,592 - Medicaid Quality and Incentives
- \$ 1,675,641 - CareOregon grant award for Quality & Patient Engagement

## Significant Program Changes

**Last Year this program was:** FY 2024: 40034A FQHC-Administration and Operations