

<b>Department:</b>	Health Department	<b>Program Contact:</b>	Kim Toevs
<b>Program Offer Type:</b>	Innovative/New Program	<b>Program Offer Stage:</b>	As Proposed
<b>Related Programs:</b>	40011A, 40011D		
<b>Program Characteristics:</b>	One-Time-Only Request		

### Executive Summary

Multnomah County will support creation of one or more community-based culturally-specific primary care clinics to serve subpopulations with greater burdens of disease in Multnomah County. In addition to the need for high level of cultural competency and culturally-inclusive primary care clinical services ("mainstream services"), some local populations will achieve best engagement and health outcomes from community-based, culturally specific primary care homes. Specialty populations these funds will serve may include specific racial and ethnic communities, as well as LGBTQ populations.

### Program Summary

Research has demonstrated the efficacy of culturally-tailored interventions in health promotion, clinical care, mental health/behavioral services, and substance abuse services. The current health care delivery system in Oregon is organized around the critical role of the primary care medical home as a nexus for engagement, health promotion, disease management and coordination. In order to effectively reduce population-level health inequities, local community leaders are making the case for culturally-specific primary care homes, in addition to continuing focus on cultural responsiveness and competence from mainstream care providers. This one time only program offer will support operational start up costs for one or more culturally-specific/specialty population primary care clinics. Monies will be distributed through competitive procurement process. Funds will not be used for capital expenditures. Specialty populations these funds will serve may include specific racial and ethnic communities, as well as LGBTQ populations. Culturally-specific primary care may include specific language capacities, providers form the population of focus, culturally tailored models of care provision, health education, and decision-making, as well as constellation of wrap-around services uniquely matched to the specific population.

### Performance Measures

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY15 Actual</b>	<b>FY16 Purchased</b>	<b>FY16 Estimate</b>	<b>FY17 Offer</b>
Output	Fiscal sustainability plan is implemented	-	-	-	-
Outcome	By June, 2017, new clinical services will open to patients.	-	-	-	-

### Performance Measures Descriptions

1) This performance measure ensures structure is in place for fiscal sustainability after initial assistance with start up costs. Billing, contracting, credentialing processes to generate third party payer revenue must have been established to have implemented sustainability plan.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2016	2016	2017	2017
Contractual Services	\$0	\$0	\$500,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$500,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: