

Health Care Reform Checklist for ASOs

Communities Advocating Emergency AIDS Relief



Organization Operations

- √Explore ways to receive designation as a health facility or FQHC. HRSA has HC planning grants.
- √Explore ways to formally contract with an FQHC and other health organizations on wrap-around and support services.
- √Research how different funding streams will be changing. Conduct strategic planning with your BOD.
- √Review what the HIV landscape would look like without major funding from RW. e.g., if 90% of your consumers either transitioned to Medicaid or other insurance.
- √Review what the HIV service gaps will be with Medicaid reform/changes being proposed by the state. Will eligibility be maintained or cut through cost containment? Will the essential benefits package be restricted?

Organization Operations

- √ Review overlap in your care services with prevention programs to ID economies of scale and administration through strategic alliances or mergers.
- √ Educate consumers about how HIV/AIDS programs are currently funded and set up a mechanism to keep them informed.

Funding Opportunities

- √ If applicable, apply for a HRSA HC Planning Grant.
- √ Sign up with [111.grants.gov](https://www.111.grants.gov) to get notifications.
- √ Seek out federal workforce development grants to strengthen existing staff and bring in new staff.
- √ Seek out CDC prevention grants.

Federal Implementation

- √ Track the ADA implementation of Medical Homes and Medicaid Expansion
- √ Monitor timeline for the rollout.
www.healthcare.gov/law/timeline
- √ Monitor comparative effectiveness efforts at federal agencies, non-profit advisory groups (IOM), and new organizations, Patient-Centered Outcomes Research Institute.

State Level Implementation

- √ Follow state developments.
- √ Understand the system/process by which ADAP will be covering TROOP expenses through the Medicare Part D donut hole. Educate staff and clients.
- √ Explore option of state Medicaid Waivers to bill for MCM or other RW services; get involved in state committees to re-design the care model.
- √ Reach out to the person/office responsible for implementation.

Federal Advocacy

- √ Advocate for a RW “bridge” from 2013 to full implementation in 2014.
- √ Educate our legislators on HIV/AIDS and how the RW program currently works.
- √ Educate our legislators on how the RW program works with other funding streams to create the HIV continuum of care.
- √ Advocate for maintaining and increasing the current RW program to ensure for continuity of care for ALL un- and under-insure people with HIV/AIDS.
- √ Advocate for continued enhancements and refinements to ACA to improve health care access for people living with HIV/AIDS.

Resources

HRSA Health Centers Program <http://bphc.hrsa.gov/>

HRSA HIV/AIDS Bureau (HAB) Webcast “FQHC Requirements”

<http://careacttarget.org/library/media/habconferences/FWHCDecember10.htm>

HRSA Health Center Planning Grants

<http://hrsa.gov/grants/apply/assistance/planning/>

CAEAR <http://www.caear.org/>