



NATIONAL ASSOCIATION OF
Community Health Centers®

Eyes on Access: We've Decided to Offer Vision Services in Our Health Center, Now What?

Wednesday November 2, 2022



THE NACHC MISSION

America's Voice for Community Health Care

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.



NATIONAL ASSOCIATION OF
Community Health Centers®

THANK YOU TO ALL COMMUNITY HEALTH CENTERS

#ThankYouCHCs

This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$6,625,000 with 0 percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).

Tailored Technical Assistance and Training Resources: Free and Tailored for Health Centers

ARE YOU LOOKING FOR RESOURCES?

Please visit our website www.healthcenterinfo.org



HEALTH CENTER
RESOURCE
CLEARINGHOUSE

HRSA-Funded National Training & Technical Assistance Partners (NTTAPs)

- Association of Asian Pacific Community Health Organizations (AAPCHO)
- **Association of Clinicians for the Underserved - STAR2 Center (ACU)**
- Capital Link
- Community Health Center, Inc.
- Corporation for Supportive Housing
- Farmworker Justice
- Futures Without Violence
- Health Outreach Partners
- Health Information Technology Training and Technical Assistance Center (HITEQ)
- MHP Salud
- Migrant Clinicians Network
- **National Association of Community Health Centers**
- National Center for Equitable Care for Elders (Harvard University)
- National Center for Farmworker Health
- National Center for Health in Public Housing
- National Center for Medical-Legal Partnership
- National Health Care for the Homeless Council
- National LGBTQIA+ Health Education Center
- National Network for Oral Health Access
- National Nurse-Led Care Consortium
- School-Based Health Alliance

Eyes on Access: Comprehensive Vision Services in Health Centers - Webinar Series

Workshop #1: Intro to Vision Services

April 28, 2022, 3:00 – 4:30 PM ET

Explore the interconnection of vision, chronic disease and quality of life. Review the data substantiating community needs, disparities and barriers.

The webinar recording, handouts, and patient testimonials can be found on the Health Center Resource Clearinghouse.

Visit www.healthcenterinfo.org & search “Eyes on Access”

Workshop #2: Steps for Integrating Eye Health & Vision Services

June 9, 2022, 3:00 – 4:30 PM ET

Review the operational activities necessary to implement or enhance vision services in a health centers. Review planning factors such as provider configuration, cost, volume and supervision.

Overview

- Introductions & Review of the Problem
- Review of the Opportunity
- Health Center Staff Panel Discussion
- Q&A
- Summary & Closing Remarks
- Resources & References

Today's Webinar: Setting the Context

Who Do Health Centers Serve?

health centers now serve more than

28 million patients

including:

2.9 million
patients 65 years
and older

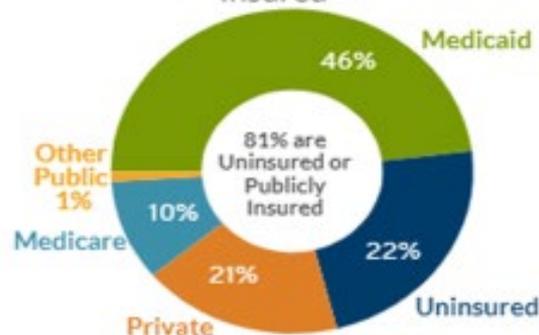
Almost 8 million
children

1.3 million
homeless patients

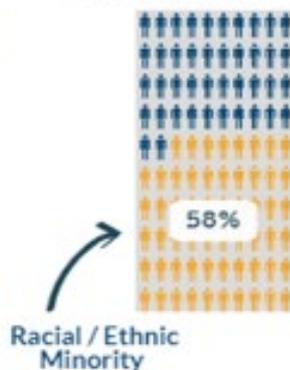
Almost 400,000
veterans

182,000
patients receiving
MAT for opioid use
disorder

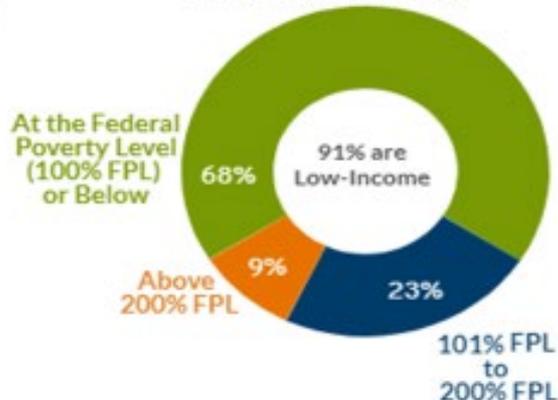
Most Health Center Patients
Are Uninsured or Publicly
Insured



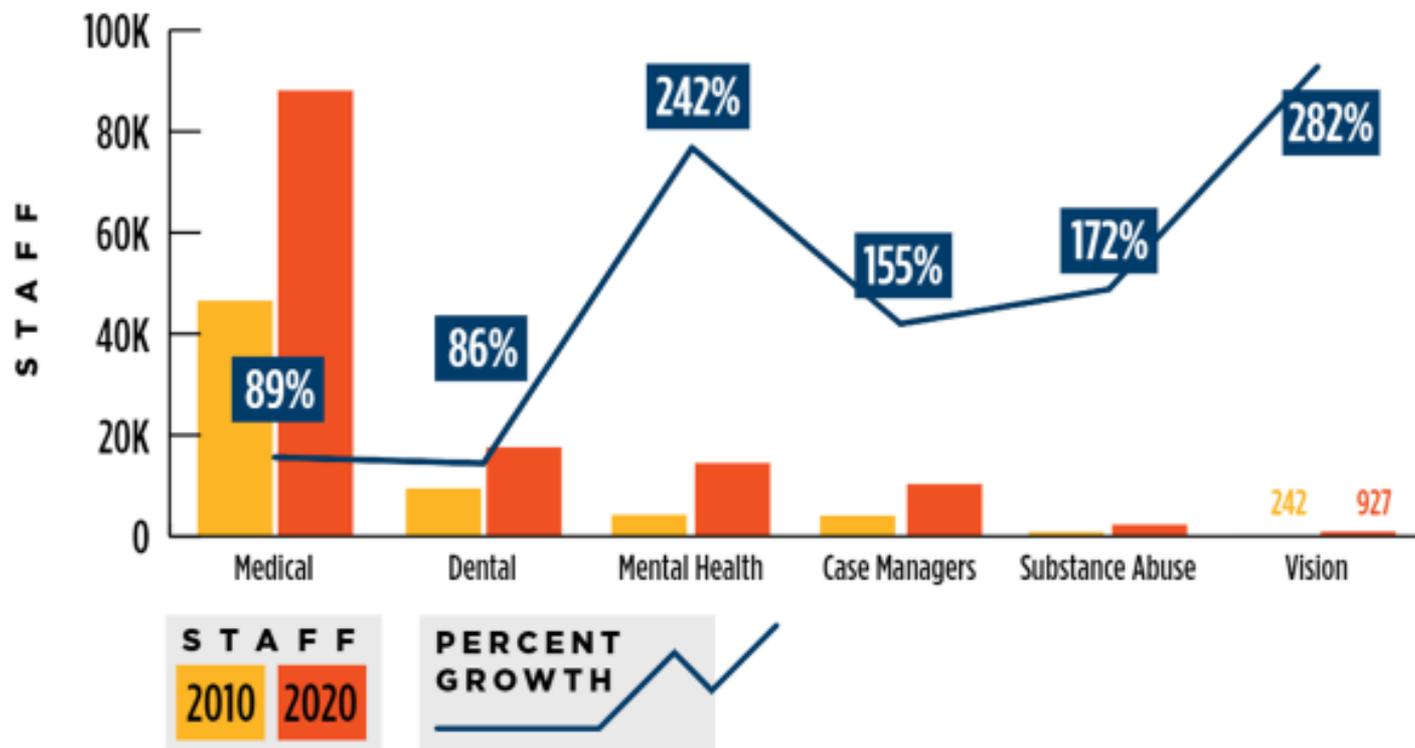
Most Health Center Patients
Are Members of Racial &
Ethnic Minority Groups

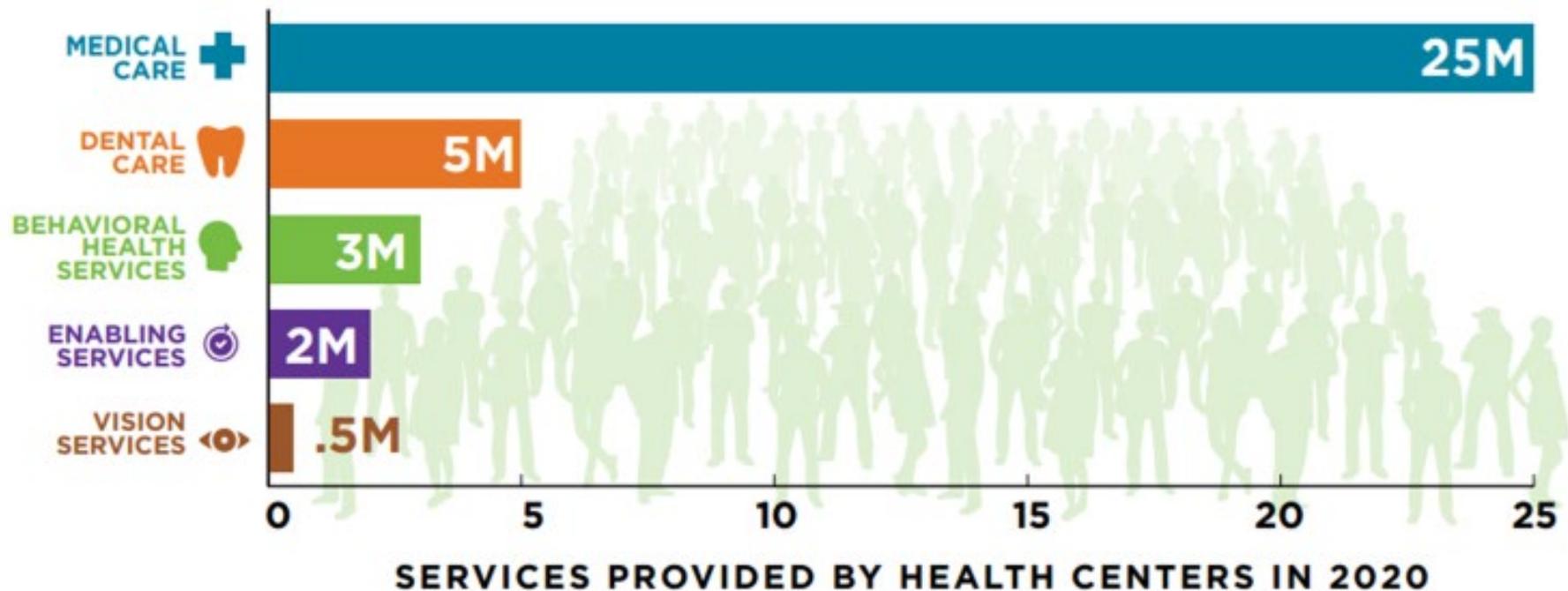


Most Health Center Patients
Have Low-Incomes



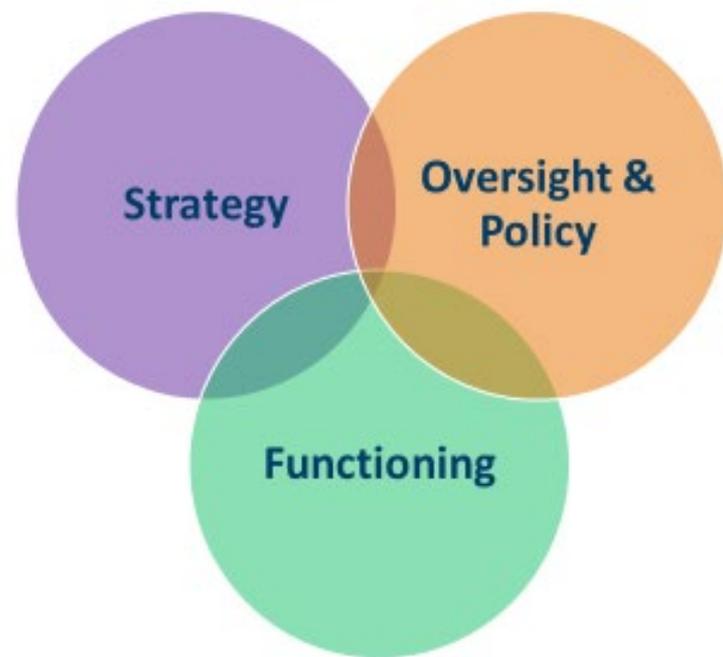
GROWTH IN HEALTH CENTER STAFF, 2010-2020





Health Centers are governed by a patient-majority community-based board of directors

Board Roles



Strategy

- Strategic Board Composition
- Strategic Planning & Thinking

Functioning

- Board Meetings
- Board Committees
- Board Culture

Oversight & Policy

- Approve Policy
- Provide Oversight
 - CEO Oversight & Partnership
 - Financial
 - Quality
 - Corporate Compliance
 - Risk Management
 - Health Center Program Compliance

Health Center Boards and Service Expansion

- A Health center board must:
 - approve new service before request is submitted to HRSA and review any Change in Scope requests
 - review items such as the fee schedule, alignment of service with the sliding fee discount program, etc.
 - **ask** important strategic, oversight, and policy-focused questions
- **Key questions to consider:**
 - Has the health center assessed unmet need for the proposed new service?
 - If the service is a “specialty,” has the center identified how it will support the provision of primary care services?
 - How will the service be provided?
 - Does the service align with the strategic plan?
 - What are the anticipated expenses and revenues? What are the financial risks?
 - What policies might need to be updated (e.g., financial, QI/QA)?
 - Will the expansion change patient demographics and, if so, how does that impact the board’s composition?

Resources for Health Center Boards

NACHC has over 50 resources (including many in Spanish) to support health center boards addressing:

- Governance Fundamentals, including board roles, board recruitment and orientation, board meetings, CEO succession planning
- Overall Health Care Environment & Governance, including many resources on COVID-19 Response and Recovery
- Strategic Planning and Thinking
- Justice, Diversity, Equity, and Inclusion
- And much more!



Short Videos and E-learning Modules are available to support new board member orientation and ongoing board education.

Learn more at <https://www.nachc.org/trainings-and-conferences/governance>



Association of Clinicians for the Underserved

- **Mobile Vision Clinics**
- **Start-up and Expansion Grants**
 - **Five \$25,000 grants available. Applications are due December 31, 2022.**
- **Technical Assistance to Health Centers**
 - **Vision Services Committee**
- **Job Board**
 - **FQHCs and Look-alikes can post optometry jobs for free.**
- **Resources**
 - **Vision Services Readiness Assessment Tool & Best Practices for Integrating Vision Care into Primary Care Settings**

Email Luke Ertle, Program Director @ lertle@clinicians.org

Find more @ www.clinicians.org

Learning Objectives

- Raise awareness of the feasibility of opening an optometry department within CHCs; creation of an optical; and hiring/staffing need
- Build skills in operationalizing the integration of vision services into health centers; and
- Learn from peers how to overcome challenges in the process of integrating vision services into health centers.

Mission and Vision

Mission

To prevent blindness and preserve sight

Vision

Envisioning a world where preventable blindness is no longer a public health issue

Our Vision IS Vision

- A vision that all children are afforded the benefits of sight as they grow and learn.
- A vision that all adults are educated about proper eye health care and have access to that same care.
- A vision that necessary attention is provided to issues surrounding the aging eye.
- A vision that no one needlessly loses their sights due to unsafe practices.



**National Center
for Children's Vision
and Eye Health**

Prevent Blindness



**Center for Vision and
Population Health**

Prevent Blindness



**Prevent
Blindness**

Focus on Eye Health
National Summit

Creating and Supporting Systems of Care



Decisions, Decisions: Navigating the Integration of Vision Services into Community Health Centers

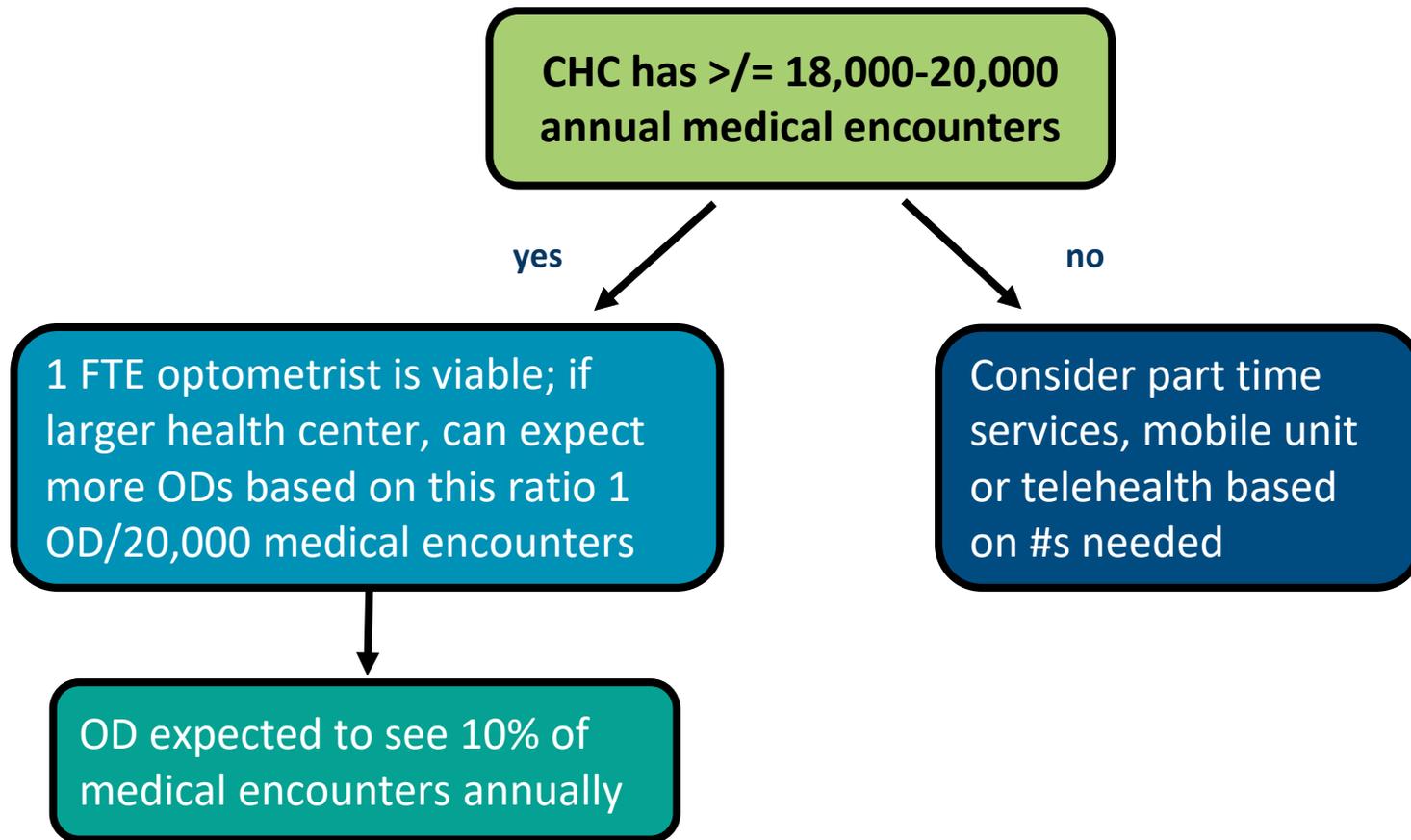


- Dr. Kristin White, OD
- Director of Optometry, MACT Health Board, Inc.
- Started Optometry Department with MACT Health Board, 2017
- ACU Vision Services Committee
- Community Health Residency, DotHouse Health, Boston, MA 2014
- Graduated New England College of Optometry 2013

Decisions, decisions...

- What degree of vision services can our health center support?
- Space
- Optical
- Staffing
- Advanced Diagnostic Equipment-OCT

Can our Health Center Support On-Site Eye Care Services?

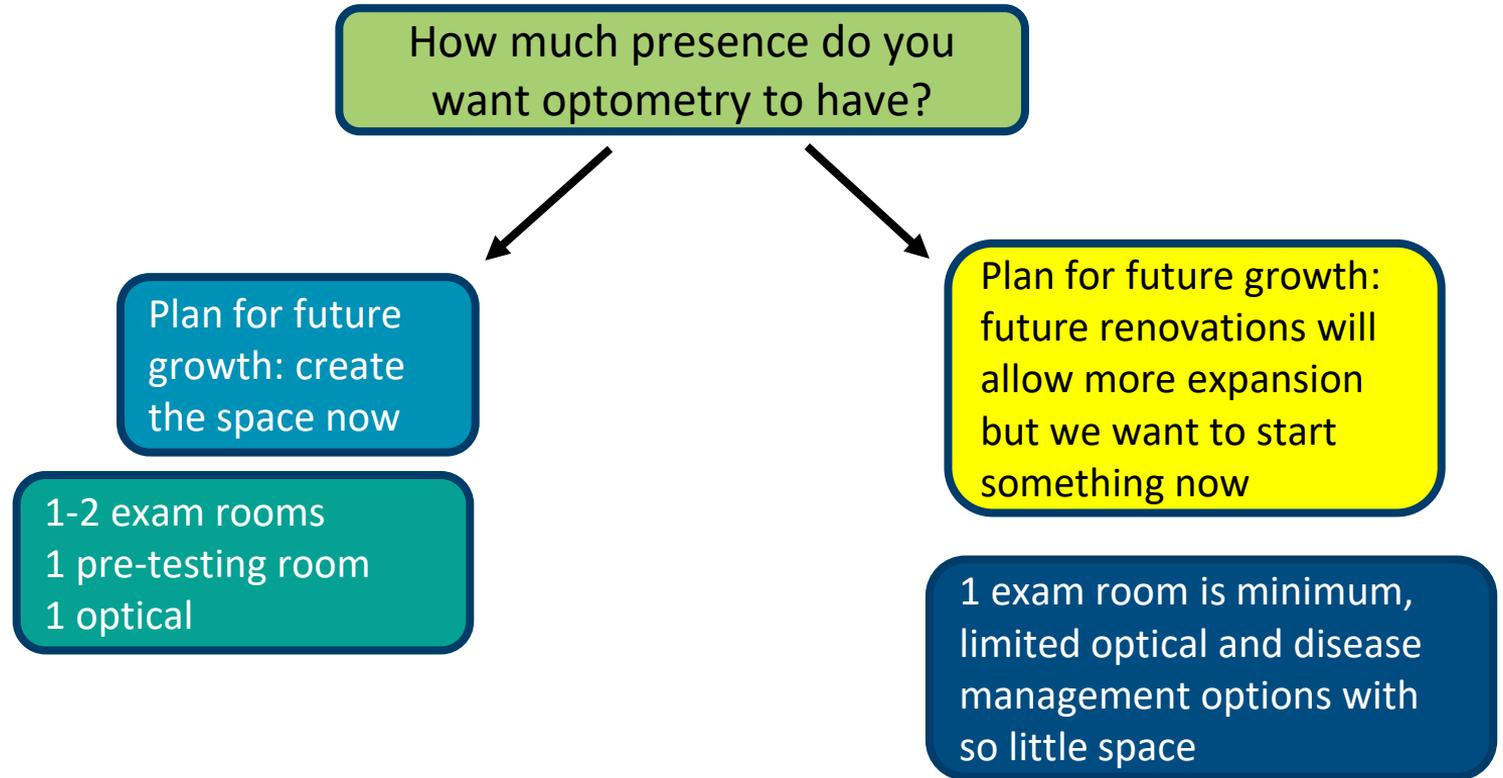


Up Front Costs

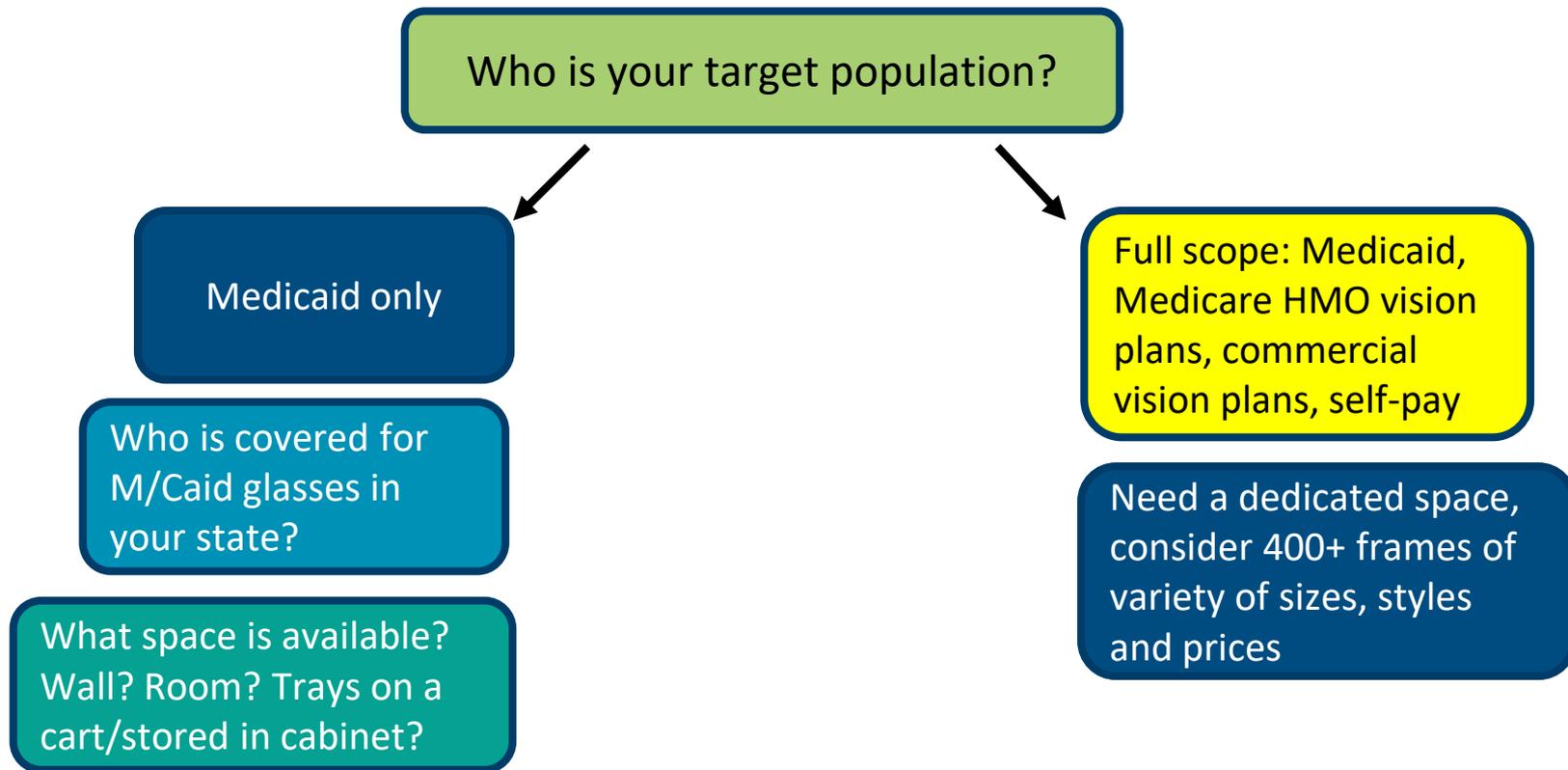
*= necessary items

Basic Exam Room + pre-testing equipment *	\$50,000
Advanced diagnostic imaging	\$20,000 - \$70,000 (optional day 1)
Optical Dispensary	\$500 - \$25,000
Optometrist Salary with benefits (FTE)*	\$160,000
TOTAL START-UP COST (w Dr salary)	\$210,000-\$305,000

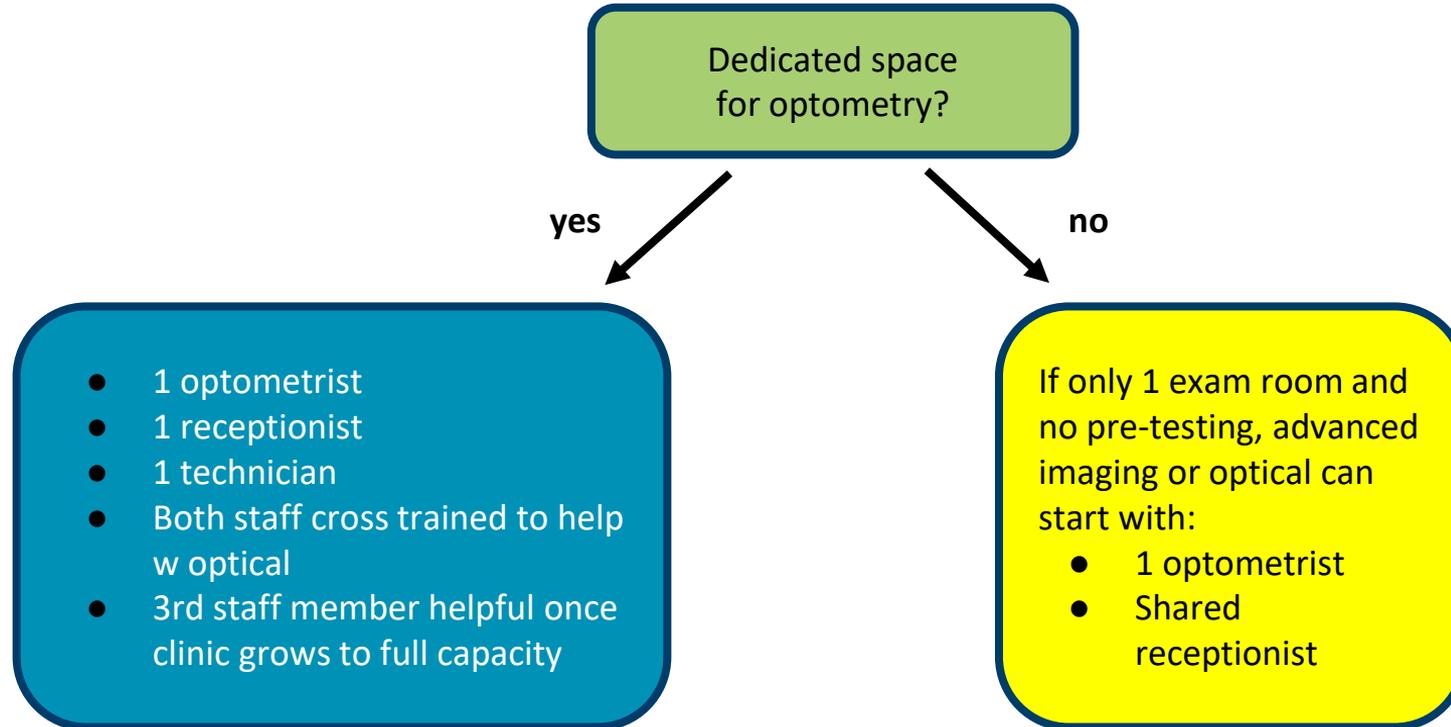
What amount of space is needed?



How to create an optical dispensary



What staff do we need?

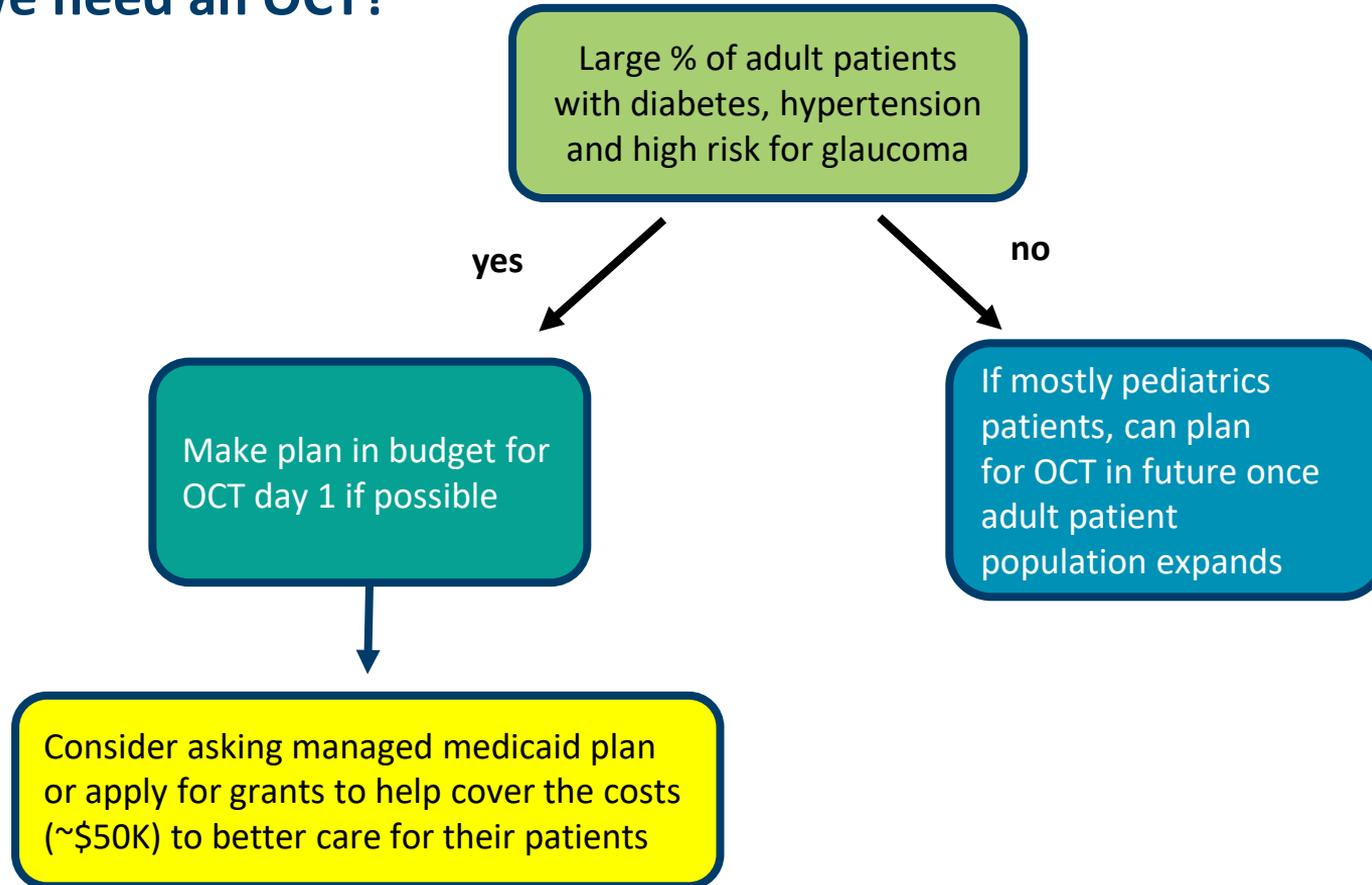


When to hire an optometrist?

- As soon as possible!
- Optometrist should help with determining necessary equipment, setting schedule, hiring staff and establishing clinic protocols
- Remember insurance credentialing can take 3+ months

** Recruitment: Loan repayment program + partnering with optometry schools

Do we need an OCT?



AOA Business Model

Business Plan for Community Health Center Eye Care Service	
START UP/FIRST YEAR EXPENSES EYE CARE SERVICE	Estimated unit cost (linked to optometry)
STARTING CAPITAL AND IMPROVEMENTS (ONE TIME)	
Ophthalmic Equipment	
Other handheld equipment	
Optical (cabinets, inventory, etc)	
Buildout/Lease Hold Improvements (estimated)	
SUB-TOTAL ONE TIME START UP COSTS	
OPERATIONAL EXPENSES	
Optometrist (with benefits)	
Certified Ophthalmic Assistant (with benefits)	
Optical Assistant/Receptionist (with benefits)	
Billing Clerk	
Clinic Supplies	
TOTAL EXPENSES Year 1 with Start Up Costs	
Note: Assumptions and Business Operations Tabs Need Additional Information from individual CHC to complete plan.	

Q&A

- Ask your questions in the Q&A chat

Dr. Debi Sarma



Public Health Optometrist and Community Outreach Specialist - Boston, MA

Optometrist, Fenway Health Community Health Center and Manet Community Health Center

Adjunct Clinical Professor at New England College of Optometry and Massachusetts College of Pharmacy and Health Sciences

New England College of Optometry, 2014

Community Health Optometry Residency, 2015

LOWELL COMMUNITY HEALTH CENTER SCHOOL-BASED HEALTH CENTER EXPANSION OF SERVICES-EYE CARE



Julie Le, OD, MBA
Chief of Specialty Services (Eye Care)
Lowell Community Health Center
Lowell, MA
November 2, 2022



Comprehensive healthcare for all, with a tradition of service spanning more than 50 years.



OUR IMPACT

2021/22: Continuing to build a just, healthy
community



Patient Focused



Culturally Rooted



Community Centered



Patient Focused. Culturally Rooted. Community Centered.

OVERVIEW

2021/2022 IMPACT REPORT

At-A-Glance: Who We Serve

31,243

Patients from **Lowell** and **8** Surrounding Towns

Provided 253,769 Patient Visits

“ Everyone at the Health Center receives you with open arms. ”

66%

At or below 100% of the Federal Poverty Level (\$26,300 for family of 4)*

45%

are best served in a language other than English

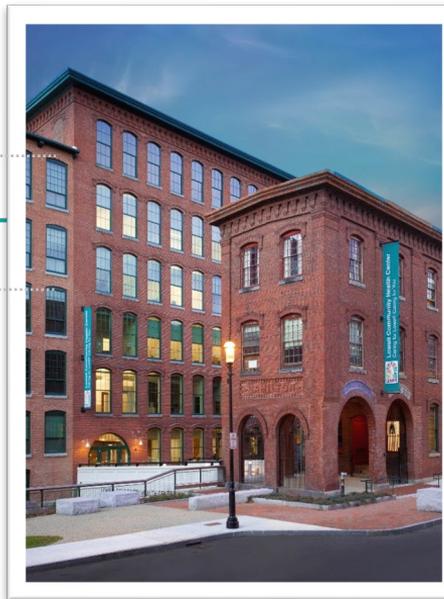
Covered by Medicaid

71%

96% of patients surveyed would recommend Lowell CHC & 93% were satisfied with the quality of care.**

Person-Centered Care

- Our restored historic mill in Downtown Lowell features **165,000 SF** of space for **patient care** and **community partners**, including an on-site **pharmacy, lab, and imaging services**.
- We offer both Eastern and Western healing practices through our **Metta Health Center**.
- We provide additional, full-service clinics at **Lowell High** and **Stoklosa Middle Schools**.



Lowell Community Health Center began in 1970 to assure that everyone in Greater Lowell has access to quality, compassionate, and culturally rooted health care, regardless of ability to pay.

* Percentage based on patients who reported income.

** Satisfaction data obtained through an independent survey.

Niki Tsongas' Eye Care Center at Lowell CHC - opened March 5, 2018

Optical Shop

- Full-service optical shop
- Stylish frames fit for every budget (package pricing)
- In-house lab: Eyeglasses can be made right in the office
- High quality products and excellent service
- 2 Full-time opticians, 2 optician apprentices (Optician apprenticeship program started 2019)
- Special fund: Glasses for Families set aside for non-covered services and eye wear
- 2 Care Coordinators, 3 Ophthalmic Assistants

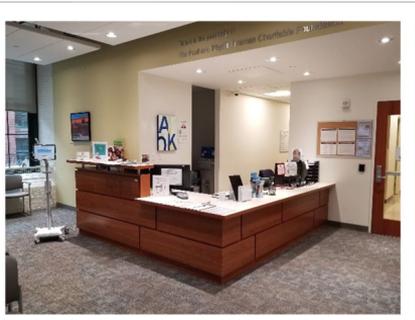
Eye Care

Seven exam lanes are utilized to provide eye examinations, contact lens fittings and problem-focused eye care services

- 5 fully-automated Exam Lanes
- 2 traditional exam lanes to better service pediatric and wheel-chair bound patients

2 separate rooms contain pretesting and specialized equipment: Maestro OCT, portable retina cameras, corneal analyzer, Octopus Visual Field, NCT, auto-refractor

3 Full-time Optometrist (4th starting Jan 2023), 1 FT Chief, 4th year optometry students from (SCCO, ICO, NECO), consultative ophthalmology once a month from Boston Medical Center's Chief of Ophthalmology



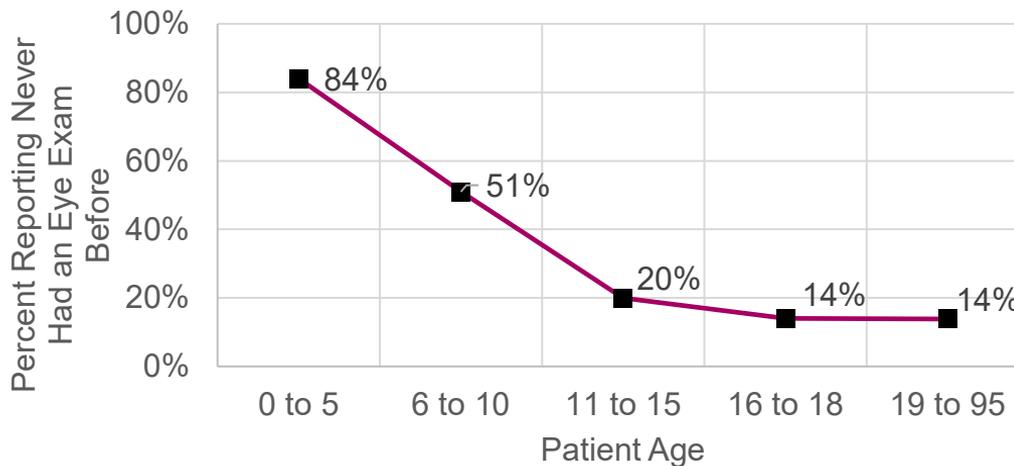
First Year Research at Lowell CHC's Eye Care Center:

Top 5 Diagnoses:

1. Cataracts
2. Dry Eye
3. Pinguecula/Pterygium
4. Glaucoma
5. Amblyopia

H.A. Hamer, J. Le, V. San. Impact of a New Optometry Clinic within an Established Community Health Center: A Retrospective Study of the First Year. *Optom Vis Sci* 2019;96:E-abstract 195235.

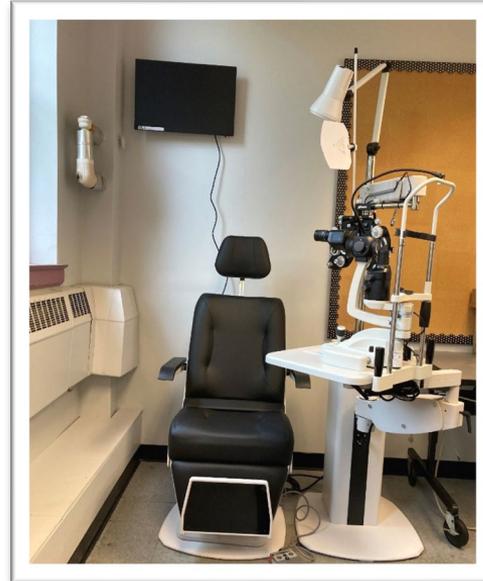
- **One in five** (20.1%) of all patients reported that they had **never had an eye exam** before coming to Lowell CHC.



- 10.8% of diabetic patients had never had an eye exam before (despite annual referrals on file from PCPs!)
- **Pediatric patients were under-represented (21.0% versus 33% of Lowell CHC)**
- Top languages spoken: 47% English, 37% Spanish, 26% Portuguese, 23% Khmer (similar to organization)

Expansion of Services-Eye Care and Optical

- Expansion of eye care and optical services at Lowell High School's (LHS) existing School-Based Health Center (SBHC) was possible from a **\$25,000 grant from the Association of Clinicians for the Underserved (ACU)**
- Additional equipment that was needed was purchased with the Lowell CHC's Eye Care Center's budget (approximately \$10,000)
- Open for comprehensive eye care and optical services once a month for one morning session (4 hours) on October 20, 2022
- 1 optometrist and 1 optical staff from 101 Jackson Street location travels to the clinic to provide comprehensive eye exams
- Students are booked by the staff at Lowell CHC and at Lowell HS's SBHC
- Students do not have to be current Lowell CHC patients
- Shared EMR (eCW current, EPIC 12/1/2022)
- Future plans:
 - Expansion of hours
 - Weekly optical deliveries of eye glasses to students
 - Marketing campaigns to the community



Q&A

- Ask your questions in the Q&A chat

PeachTree Health



INTEGRATING EYE CARE SERVICES

- Add eye care to your diabetes, hypertension, high cholesterol care plans
- OD should provide lunch & learn lectures to providers and case managers
- Offer free eye exams to providers and staff to normalize the examination experience.
- Make the optical dispensary visible to the waiting room.
- Track and share eye care metrics on your quality dashboards



FINDING OPTOMETRISTS AND OPTICIANS



- Advertise in optometry school job boards
- Offer better pay and benefits than Lens Crafters, WalMart and Stanton Optical
- Promote loan repayment and consider a repayment match



- Buy a local OD private practice and convert to an FQHC
- Contract with multiple local ODs looking for 1-2 days a week at FQHC
- Contract with local optician to expand service into your clinics



- Offer a referral bonus to your staff and local ODs if they bring in a candidate
- Use your social media channels to spread the word

THE BUSINESS CASE FOR EYE CARE

- Is this a covered Medicaid benefit?
- Coverage varies for medical eye exams, refractions, and frames & lenses.
- CPT 99214 -99215 medical office visits.
- Eye care will bring in many new patients.
- Convert patients to establish with your PCPs to create more value.
- High-volume/low-margin service line.
- Adding optometry to your scope may trigger a PPS rate change.





INSIGHTS & LESSONS LEARNED

- Most patients don't value eye care if they feel they can see just fine. Make it part of their care plan to prevent vision loss.
- Patients with chronic diseases such as diabetes and hypertension are the heart of your eye care program.
- Eye care involves many potentially intimidating analyzers and equipment. Help your patients overcome their fear of an eye exam.
- 6,000 to 8,000 adult family medicine patients are needed to sustain a full-time (5 days/week) eye care program.
- A comprehensive eye care clinic requires more floor space than a traditional medical program. Invest in developing the space needed to make it flow.

Q&A

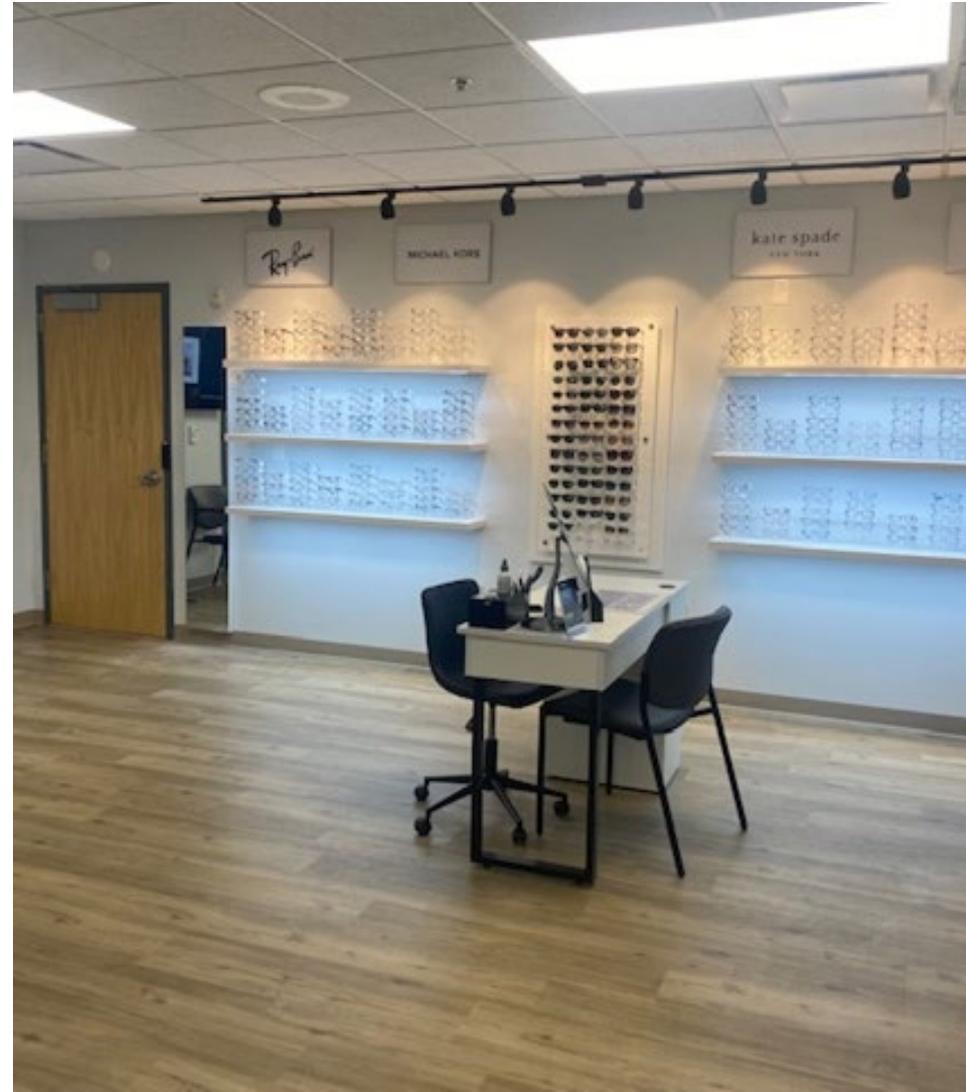
- Ask your questions in the Q&A chat



- Dr. April Walgenbach, OD
- Peninsula Community Health Services of Alaska inc.
- Located in Soldotna, Alaska
- Rural community that serves the greater Kenai Peninsula
 - Population: 58,909

Clinic Layout

- 1 Exam room – recently just expanded to 2 exam rooms
- 1 pretesting room
- Optical Dispensary
- Tech/optician work- space
- Office





Exam Room

- ▶ ADA Exam Chair
- ▶ Phoropter
- ▶ Slit Lamp
- ▶ Chart System
- ▶ Plumbing – Sink
- ▶ Cabinetry

Pretesting Room

- ▶ Autorefractor/Keratometer
- ▶ Fundus Camera
- ▶ iCare - Tonometer
- ▶ Visual Field Analyzer
 - ▶ Peripheral vision
- ▶ Optical Coherence Tomography
 - ▶ Uses light waves to take cross-section pictures of your retina



Biggest Challenges

- Marketing/Getting the word out
- Billing
- Integrating with the current flow/processes of the health center
- Experienced staff members (Optician, Optometric Technicians)
- Space



- Google

- Facebook

- Internal Marketing

- Do you come up in a google search?

- Radio

- Post Cards/ Flyers in the mail

Q&A

- If your question hasn't yet been answered, an FAQ document will be created with answers to all of the questions that have come in during the webinar and will be emailed to all participants

Poll

- Please let us know your interest in topics for 2023 webinar as we dive deeper into the creation of on-site vision services within CHCs

Next Steps:

- Make sure to fill out the webinar evaluation! This helps inform our future events and we value your feedback.
- Keep an eye out! The recording, handouts, and slides will be available on the Health Center Resource Clearinghouse within 2 weeks. We will send an email when available.

Looking for CMEs?

- Complete the evaluation you will be directed to after the event ends.
- You will receive a CME certificate within 2-3 weeks.

This session is approved for for 1.5 online AAFP elective credits. If you have questions about receiving the CMEs, please contact Luke Ertle, Program Director, Association of Clinicians for the Underserved, at lertle@clinicians.org.



NATIONAL ASSOCIATION OF
Community Health Centers®

THANK YOU TO ALL COMMUNITY HEALTH CENTERS

#ThankYouCHCs

This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$6,625,000 with 0 percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).



[Twitter.com/NACHC](https://twitter.com/NACHC)



[Facebook.com/nachc](https://facebook.com/nachc)



[Instagram.com/nachc](https://instagram.com/nachc)



[Linkedin.com/company/nachc](https://linkedin.com/company/nachc)



^c
[YouTube.com/user/nachcmedia](https://youtube.com/user/nachcmedia)

