

Name: Casey KirkHart, DO

Professional Title, Organization: Chief Medical Officer, Santa Cruz Community Health

CHIP Title: A Medical Group to Serve California's Federally Qualified Health Centers (FQHCs)

Project Description:

The two largest patient groups in California are Kaiser members (9 million) and patients served by California's FQHCs (7 million), but you could not find two more dissimilar health systems. Kaiser and nearly all other health systems organize their providers in medical groups; FQHCs are private non-profits that employ and support their providers independently. The separation between individual FQHCs results in inconsistent access and quality, an inability to retain talent and resources, and diminished voice in the broader health care system.

An FQHC Medical Group combines the best of the medical group model - shared quality standards, multi-site, primary care, and specialty provider network, clinician leadership and ownership, career stability, and high retention - with the best of FQHCs - integrated medical and mental health care, mission-driven with a focus on access and equity, nimble and responsive to the communities they serve. An FQHC Medical Group ensures consistent **access** to diverse providers, and high-quality care across all FQHCs, and fosters a **joyful, sustainable career** in community health.

An FQHC Medical Group fundamentally changes individual FQHCs' relationships with providers. The Medical Group directly employs medical and mental health providers and deploys them, under contract, to FQHCs thereby ensuring consistent staffing, provider diversity, and clinical scope where needed. Best practices are applied, and quality standards are monitored across the entire Medical Group. Providers are supported by clinical leadership on all levels and are connected to a provider community that spans many FQHCs. Staff and resources duplicated across several FQHCs would be unified under the Medical Group, reducing costs and improving outcomes for individual FQHCs.

Key Findings and Lessons Learned:

- Pilot with three FQHCs in Santa Cruz County, and other local Medi-Cal direct service providers.
- Resounding support from clinicians and clinician-leaders; concern from FQHC leadership on disruption of FQHC-provider relationship, contracting, and integration with 3 FQHCs.
- Scale back the breadth of the project and limit project scope to the "Clinical Core" of medical group structure: **clinician leadership, clinical excellence, and community building.**

Next Steps:

- Create Santa Cruz County *Clinical Excellence Committee* to adopt and share best practices & guidelines, clinical policies & procedures across 3 local FQHCs (July 2022, ongoing).
- Collaborate between local FQHCs, specialty medical groups, and Medi-Cal plan to address inaccessible specialty care, through co-created referral guidelines for all FQHCs, broadening primary care scope in clinics, and increased use of eConsult services (July 2022, ongoing).
- Create an online "Clinical Library" for clinical policy sharing between local FQHCs (by January 2023).
- Consolidate FQHCs' preparation for the new Santa Cruz County Family Medicine Residency Program under the Clinical Excellence Committee (in January 2023).
- Research other provider organizing models and propose further consolidation across local FQHCs, including credentialing, privileging, and recruitment (July 2023).