Using Outreach to Increase Sustainability of Community Health Centers:
Introducing HOP's Outreach Business Value Project

Health outreach is an important, valuable strategy for reaching and providing services to underserved populations. Health Outreach Partners (HOP) has always believed that outreach can help health centers meet both their mission to provide high quality comprehensive care to underserved populations and their financial margin. It is easy to make the mission case for outreach: providing outreach and enabling services to underserved populations is a generally accepted way to increase access to care and improve health outcomes. For many health centers, showing the business case for providing outreach services has been more difficult. In fact, health outreach programs are sometimes seen as an extra cost rather than a revenue generating service. These services are often grant-funded or otherwise unstable from a financial point-of-view. In order to help health centers make a stronger business case for investing in and sustaining strong outreach programs, HOP started the Outreach Business Value Project in 2013.

Business Value of Health Outreach Programs Strategic Framework

To begin, HOP worked with John Snow, Inc., to develop a strategic framework and toolkit that health center decision-makers can use to make the business case for integrated health outreach programs. The framework combines findings from a landscape scan of peer-reviewed and gray literature, a stakeholder forum of California health center leaders, and key informant phone interviews with health center decision-makers across the nation.

The goal of the strategic framework is to enable health center leaders to consider different pathways to potential financial benefits in order to help health centers assess the business case for investing in an integrated health outreach program. While the framework is intended to apply to all health centers, each health center operates in a unique environment. Policy environments, payer arrangements, program structures, priorities, and community needs vary. As a result, not all parts of the framework will apply to every health center.

The framework is designed using a logic model approach, which draws connections between inputs and outcomes, in order to allow health center decision-makers to consider the financial benefits of outreach most applicable to their health center's unique situation.

The framework includes the following core parts:

- **Inputs/costs:** the potential resources needed to invest in an outreach program and their related costs.
- **Outreach activities:** the outreach activities associated with an outreach program.
- **Outputs:** potential results of the outreach activities.
- **Potential financial benefits:** ways the resources invested in an integrated health outreach program may produce financial benefits to the health center.
- **Key internal/external factors:** questions for health center decision makers to consider when determining the financial benefits of outreach activities for their health center.

Dimensions of Outreach Program Integration

In addition to the strategic framework, the Dimensions of Outreach Program Integration were created as a way to understand how outreach programs worked within an organization. In some health centers, outreach workers feel completely isolated from the overall health center functions. In others, they are acknowledged at the very highest levels as a critical part of the team. Their role is included in formal ways across the health center's systems. This type of high level "organizational integration" has a strong impact on outreach program effectiveness. It was found that fully integrated programs were more effective and better-utilized outreach workers. These more integrated programs were also more likely to see the financial benefits of outreach. For instance, health centers with a designated outreach director or champion tasked with how to best utilize outreach staff time in attracting new patients, creating community partnerships, impacting pay-for-performance outcomes, etcetera, were able to more easily articulate and measure the financial benefits of their outreach program. Integrated outreach programs were more likely to be included into the health center budget rather than a grant-funded, stand-alone program.
Business Value of Health Outreach Programs Calculators

The strategic framework and the dimensions of integration served as the basis for the development of a toolkit consisting of four calculators including The Outreach and Enrollment Calculator, The Clinical Efficiency Calculator, The Alternative Payment Methods Calculators, and the Avoided Costs Calculators. Each calculator in the toolkit allows decision-makers to look at a number of variables relevant for their health center in order to calculate one aspect of potential financial benefit achievable through outreach. These potential benefits include: increased patient revenue and grant funding, improved clinic efficiency, earned payment for triple aim outcomes, and avoided costs.

Conclusion

The Business Value of Health Outreach Programs strategic framework and toolkit provides decision-makers with the tools to create the business case for sustaining outreach programs and to increase the financial integration of outreach programs within the health center. It shows the value of an integrated outreach program as a set of specific activities having potential returns on investment. This is done to assist health centers in deciding whether or not to invest in outreach activities. However, it is important to recognize that many health centers do not view their outreach program as a set of distinct pieces, each with a specific financial value. Rather, some see outreach as an integral part of their clinical program, marketing, and mission to serve a community in a culturally competent, high-quality, patient-centered, and cost-efficient manner.

The strategic framework, dimensions of integration, and toolkit will be available via HOP's web-based client portal coming in summer 2014. Health Center Program Grantees and Primary Care Associations can access the toolkit via an opt-in, no-cost membership through December 31, 2014.

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