## Transforming Oral Health for Families Policy Assessment Matrix for Community Health Centers

Conduct an interview with each CHC:

## What are your goals?

- An articulation of their goals that may be more than what is written on the page. Elicit their underlying thoughts and rationale for what they decided.
- What are the financial, legal and regulatory barriers?
- What are there barriers at the community level? Provider level?
- Did they want to do more but didn't feel they could? Did they feel constrained by existing policies?

## What would you like to do but in order to achieve those goals but don't think you can?

• To understand at a high level what they would like to accomplish but maybe are feeling frustrated by their options.

## What specific policies do you think are standing in your way?

• To try to get to some understanding of their operations and how they interpret barriers.

# Do you think you know why you can't do something you would like to do? (Example: deploy a practitioner with new duties)

• To see if they can start the process of understanding if the barrier is internal, state or federal. It might also tease out problems with interpretation of regulations.

## For each of the barriers identified by the CHCs:

#### **ASSESSMENT**

First there needs to be an assessment of what is causing the barriers. Sometimes it is an organizational interpretation of state or federal regulations that can be changed once new information is presented. But it might also be that a state or federal law(s) or regulation(s) is presenting a barrier. If this is the case, there are probably other CHCs with the same concerns/issues. Teasing out the underlying issue is critical to proceeding.

- 1. Is the barrier because of an internal CHC policy some way your organization is interpreting state or federal policies? (Example: your CHC has a policy on how that practitioner can be deployed and reimbursed.)
  - a. Who is responsible for that policy?
  - b. On what state/federal law or regulations is it based? Is there documentation to show that is the correct interpretation?
  - c. Can that decision be challenged and changed internally if it can be shown to be a faulty interpretation or that other CHCs are responding differently? How would you do that?

- 2. Is the barrier because of a STATE law or regulation? (Example: NYS Education Law governs Scope of Practice for health professionals and the State Education promulgates the regulations).
  - a. Is this a LAW or is this REGULATION?
  - b. If the current policy actually stems from a law what does the law say? Is there any background on the law that can show how and when it became law?
  - c. If the current policy actually stems from the regulations promulgated to implement a law what is that interpretation? Is there any background on that?
  - d. How specifically would that law or regulation need to change to allow you to do what you want to do?
- 3. Is the barrier because of a FEDERAL law or regulation (Example: A federal Medicaid rule around what providers can be covered)
  - a. What is the specific Medicaid rule?
  - b. How specifically would that need to change for you to allow you to do what you want to do?
  - c. Are there any options for NY to make a different interpretation or apply for a waiver to allow for you to do what you want to do?
  - d. Are other states doing anything differently that might be examples for NY?

### **ACTION**

Once the underlying cause(s) are determined, an action plan can be established. There are multiple strategy frameworks but some of the elements are below:

- 1. If the barrier is because of an internal policy:
  - a. Research the law and regulation(s)
  - b. See how other CHCs are handling the problem and get copies of their policy.
  - c. Follow the channels for getting internal policies changed.
  - d. Present a case for change including how it will benefit patients/productivity.
  - e. If there are many different interpretations among CHCs, request a meeting with state regulators to inform them of the problems and work toward a solution. State regulators don't always know when these discrepancies arise so don't assume they know what is going on. Use the PCA or other trusted group to set up a meeting if necessary.
- 2. If the barrier is because of a STATE policy or regulation:
  - a. Seek others who would like to see change, probably through a trusted organization with advocacy experience. Prepare research as needed including data, actions in other states, need.
  - b. Develop a specific "ask" what change are you seeking and why would that change improve patient care and/or efficiency? Would it save money in Medicaid? Would it reduce paperwork? Would it improve metrics for CMS, HRSA or other regulatory bodies?
  - c. Is this a LAW? Is this something the Executive can change through the budget process? Is the law required as part of a federal law or regulation? Which committee(s) of the legislature is responsible? Who are the players? (there are a lot of steps at this phase)

- d. Develop a map for the process that included seeking partners, talking with the Executive and the Legislature.
- e. Is this a REGULATION? Determine which State agency is responsible and who is responsible. Seek partners and develop a plan to approach the agency with information (there are a lot of steps at this phase)
- 3. If the barrier is because of a FEDERAL law or regulation:
  - a. Seek others who would like to see change, probably through a trusted organization with advocacy experience. Prepare research as needed including data, actions in other states, need.
  - b. Determine what flexibility the state has to interpret the federal law or regulation.
  - c. Develop a specific "ask" what change are you seeking and why would that change improve patient care and/or efficiency? Would it save money in Medicaid? Would it reduce paperwork? Would it improve metrics for CMS, HRSA or other regulatory bodies?
  - d. Approach state agency with oversight to determine their willingness to seek changes by taking advantage of different options available in the regulations or through a waiver if that is possible. (there are a lot of steps at this phase)

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