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HRSA - Bureau of Primary Health Care

Consultant eNews

Busy! Busy! Busy! The air conditioners aren't the only things running full speed...this season is running full speed on delivering technical assistance where needed! We appreciate all the work that you do!!

OSV Guidance from BPHC Senior Clinical Advisors

- 1) Laboratory/ Radiology/Referral Tracking:** We have found a few OSV reports that reference issues related to the tracking of lab, radiology, and referral services being listed under PR #6: Hospital Admitting and Continuity of Care. Findings related to these services should be mentioned under PR#2: Required and Additional Services. The only time these finding should be included in PR #6 is if they are related to the tracking of these services directly related to a hospitalization (ex: following up on test done as an inpatient after discharge).
- 2) Documentation of Provider Licensure in PR#3:** Note that there are two aspects to assess under PR#3 related to credentialing and privileging (C&P): 1) whether the health center has policies and procedures for conducting C&P and 2) whether the health center has documentation of current licensure for all of its providers. Consultants should be clear in their findings within the report as to whether or not all licensed and/or certified staff have documented licensure and/or certification. For example, if the OSV report reads "there is no process for credentialing and privileging OLCs (other licensed and/or certified providers)" it is unclear if OLCs do not have evidence of licensure or if the C&P documents are just incomplete. Clarity in this area would help BPHC project officers clearly address the relevant aspect of non-compliance with the health center and clearly communicate our expectations to the health center.
- 3) Assessing compliance with After Hours Coverage:** Some consultants may elect to assess the after-hours call procedures by attempting to contact the provider on call. Consultants should identify themselves to the answering service as a member of the consultant team and explain the purpose of the call. We also ask that the consultant double check the call back number and be available (in a reasonable amount of time) to answer the returned call.
- 4) Column III Service and Sliding Fee Scale:** Just a reminder that while agreements for column III service should include Sliding Fee Discount Schedule (SFDS) language, any non-compliance related to this should be placed in PR#7 and not in PR#2.

Site Visit Report Timelines

Along with a busy site visit season comes many consultant reports. As a reminder, site visit reports should be submitted to the Report Online System for review and/or editing within 9 calendar days after the site visit end date. In addition, all site visit reports should be submitted to TATS within 20 calendar days of the site visit end date. It is the responsibility of the consultant Team Lead to ensure that these deadlines are met. Chronic offenders will be relieved of future Team Lead activities.

Should your consultant report require additional information and/or documentation from the

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Health Center or Project Officer please include that information in TATS once the documentation becomes available. Please do not delay the report submission process. Contact MSCG for further assistance if you are experiencing challenges and delays with submitting reports.

Updated MSCG Consultant Report Timelines for the Online System

1. Team Member completes report and submits to TL - within 7 calendar days after site visit end date.
 2. Team Lead submits consolidated report to online system - within 9 calendar days after site visit end date.
 3. Reviewer returns report to TL with changes (if appropriate) - within 4 calendar days.
 4. TL revises report and submits to Editor - within 3 calendar days.
 5. Editor makes edits and sends clean version to TL - within 2 calendar days.
 6. TL submits clean version to TATS - within 2 calendar days.
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Consultant Trainings

In the next couple of weeks MSCG will be updating the Consulting Training and Resource Page. Please look forward to additional resources and updates to assist you with providing technical assistance to health centers. Stay tuned...

Consultant Referrals Welcomed!

If you know of a colleague with a health center background in the 19 Program Requirements and an interest in consulting please have them visit the MSCG Online Rostering page at: <http://www.mscginc.com/consultant> for more information.

As always please update your current online profile and resume with any recent activity that would be helpful to BPHC Health Centers.

Consultant Reminder

A consultant who has participated in a site visit or provided TA to a grantee may not enter into a paid relationship with that grantee for a period of one year from the date of assignment without first obtaining expressed written approval from BPHC prior to accepting assignment.

Also, any paid relationship with a grantee or PCA should not reference BPHC and/or MSCG as a supplemental form of payment for services. Any agreement made outside of the MSCG Site Visit Technical Assistance Contract may not be honored.

Please feel free to contact MSCG with any questions or concerns.

Consultant Schedules and Availability

We are still scheduling assignments through the end of September. Please reach out to the Logistics Coordinators/Technical Assistance Coordinators with your continued interest and availability.

Carolina Callahan - ccallahan@mscginc.com

Linda Martin - lmartin@mscginc.com

Marsha Twyman - mtwyman@imstrategists.com

Please note that your participation on an assignment is not confirmed until you receive the Logistics Confirmation email. Arrangements made outside of this process may not be honored.

Submit TA Report into TATS

The following instructions are for use when submitting TA Reports using TATS.

1. Log into TATS at <https://tats.hrsa.gov/webTATSEPSConsultant/login.aspx>.
2. Click on Assigned Tasks, locate the appropriate task, and then click Edit/Start TA Report under Options.
3. Locate the Draft TA Report section, click on the Attach File under the Draft TA Report section,

browse for the TA report on your computer, and click the Upload button.

4. Only if you have additional supporting documents, locate the Supporting Documents section, click on the Attach File under the Supporting Documents section, browse for the supporting documents on your computer, and click the Upload button. Consultant can upload a maximum of 10 supporting documents.
5. Once the TA Report and any supporting documents are uploaded, select Submit from the Choose Action drop down and click Go. The system will display the notification page.
6. TA Report - Submit page opens. The TO field will list all of the MSCG TARs. The CC list will include the default assignees for this entity and all of the individuals who worked on the TA report task. Verify the individuals listed on the CC field. You can add/update email addresses. Verify the information in the email body. If you want to go back to update the TA report details, click Cancel. Provide additional comments, if needed.
7. Click on Confirm & Notify.

Travel Support

GSA Policy on Travel Rewards

May I select travel service providers for which my agency is not a mandatory user in order to maximize my frequent traveler benefits?

No, you may not select a traveler service provider based on whether it provides frequent traveler benefits. You must use the travel service provider for which your agency is a mandatory user. This includes contract passenger transportation services and travel management services. You may not choose a travel service provider to gain frequent traveler benefits for personal use.

REMINDER ... please review travel itineraries immediately for changes that may be needed. Also please contact your designated Logistics Coordinator (Technical Assistance Coordinator) should you require additional assistance when scheduling travel for upcoming assignments.

Corporate Travel Management

Phone: 703-318-9400 (M-F 8AM - 6PM EST)

Email: res_mscg@travelctm.com

Emergency After Hours Service: 1-855-928-7323

Kudos Kudos Kudos!

Just some of the great work being done by YOU!!

Grantee Comments

Hilda Bogue - Hilda was the best clinical reviewer that we have ever had. She cared about our mission and was interested in how we serve our patients. She could relate on some of the operational issues that we face daily in meeting our patient's needs and offered several great recommendations on how she has approached meeting certain requirements during her time at health centers. Since she is a nurse, she also provided good input into our quality programs and initiatives. She was able to discuss the real work at our health center with our physician. Our last reviewer was a physician and argued with our medical director about how things were done in their health center and did not even try to understand our setting or our patients--Hilda was engaging and offered useful advice.

Donald Dunn - Very experienced reviewer. Offered very practical advice and recommendations on how different wording could be interpreted different ways in policies--gave us guidance on how to clear up some of our vague language in policies. Very personable and pointed us to resources and tools on the HRSA website. So nice to have a reviewer that knew and has been in our shoes and understands what it takes to run a health center. Completely understood when we asked questions and offered real world examples of how to document program requirements.

LaVonne Linneman - Ms. Linneman had perhaps the toughest and most sensitive tasks in identifying weaknesses in our systems and financial personnel and conveying that information to the management

team. She was very knowledgeable, extremely precise and very professional in her approach to this challenging task.

Project Officer Comments

Kathy Grant Davis - Ms. Davis was very knowledgeable of the subject matter. Her experience with health centers as well as Board membership/presentation was very appropriate and beneficial to the success of this TA request. After meeting and discussing the TA with the PCA once the visit had been completed the PCA was very much satisfied of the products shared and the overall technical assistance provided. Look forward to future opportunities in which to work with Ms. Davis.

Theresa Butler - Theresa was very skilled in providing leadership and serving as the governance consultant. I truly enjoyed working with her, and if given the opportunity I'd like to work with her again in the future. She was great in asking the right questions to gain insight on how well the grantee is performing and maintaining compliance with the program requirements. It was a pleasure working with her.

We want to cover the topics that are of real interest to you. Please submit your suggestions at <https://www.msccinc.com/feedback.cfm>

[MSCG LLC](#) | 301-577-3100
4601 President's Drive, Suite 200
Lanham, MD 20706