



For a number of years, the Community-Based Primary Care program awarded level funding to grantees. Over the past few years, we have reviewed the Indigent Care program legislation and aligned the CBPCC program criteria. Based on the legislation, we implemented a set of participation criteria and new funding formula. With the purpose of the funding to facilitate the most vulnerable populations into services, the program has revised the formula based on factors that reflect those efforts.

Community Based Primary Care Clinic Criteria:

Criteria 1: The clinic is a not-for-profit or publicly-funded primary care clinic that offers comprehensive primary care health services, or dental health services.

Criteria 2: The clinic serves any person regardless of the ability to pay. Review your policies and make sure that your staff are facilitating patients into care regardless of the ability to pay.

Criteria 3: The clinic offers a sliding fee discount based upon household income and family size. For more information on Sliding Fee Scale Policies consult the [HRSA National Health Service Corps website](#) or the [Community Health Center website](#). Sliding Fee Schedule Policy must be documented and available upon request. Clinic has publicly posted signage and supports to communicate the availability of the sliding fee scale to eligible patients.

Criteria 4: Ten percent of the clinic's total unduplicated patients at or below 200% of federal poverty guidelines receive a sliding fee scale discount.

Criteria 5: The total unduplicated patients of an eligible clinics must, at a minimum, mirror the disparities present in the county being served. The proportion of unduplicated patients served per year at or below 200% FPL is equal to or greater than the proportion of county residents at or below 200% FPL. For example, 31.8% of Shawnee County residents are at or below 200% of FPL in the most recent census data. In order to meet this criterion, a clinic with the main location in Shawnee County must serve at least 31.8% of their unique patients at or below 200% FPL. Clinics must provide a summary of actual patient FPL counts based on documented individual income and family size. Please do not include estimates or samples.

Criteria 6: Submission of accurate and complete QRS data for the previous calendar year. Grantees must also sign a data release with Community Care Network of Kansas so that KDHE can access and utilize the QRS data in the funding formula. Clinics receiving funding for the CBPCC program must apply annually during the Aid-to-Local application cycle, open during the first quarter of each calendar year.

Applications are completed electronically through KDHE web-based system, Kansas Grant Management System.

New applicants should submit a written request indicating their intent to apply to the Office at kdhe.primarycare@ks.gov no later than February 15, 2022. Upon receipt of letter and required information, the Office will review to ensure the new applicant meets qualifications to apply for the CBPCC Grant Program and will provide a response back in 3-4 business days.