FELDESMAN

Exploring Affiliation Opportunities, From Practice Transfers to Merger

Carrie B. Riley

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TODAY'S PRESENTER

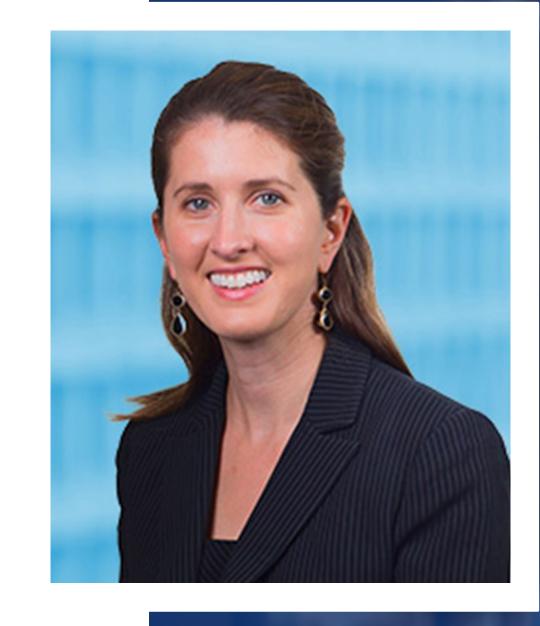


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AGENDA

- Defining Consolidation Models
- Steps to Implementation
- Board Input and Direction
- HRSA Approval Process
- Final Tips and Common Pitfalls





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CONSOLIDATION MODELS

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CONSOLIDATION STRATEGIES

Merger

 "Surviving" organization assumes all assets and liabilities of the other organization

Asset Acquisition

 Purchasing organization assumes certain assets and (as applicable) certain liabilities of the other organization

Parent-Subsidiary Relationship

 One organization becomes the sole member (or parent) of the other organization



WHY YOUR INPUT IS CRITICAL...

The Board:

- Ensures mission alignment
- Sets forth the health center's strategic plan to ensure long-term sustainability
- Provides fiduciary oversight
- Represents the interests of the community
- Defines the scope of health center project











STEPS TO IMPLEMENTATION

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6 STEPS TO IMPLEMENTATION

1. Getting to Know You

Defining Goals, Priorities and Mission

2. Formalize Planning Process

Letter of Intent and Confidentiality Agreement

3. Due Diligence

Documents Request and Review

4. Negotiate Definitive Agreements and Navigate Approvals

- HRSA, NY Article 28, etc.

5. Planning for Consolidation

- IT, staff transfer

6. Implementation/Closing!



BOARD INPUT AND DIRECTION

- Drivers to Consolidate: Identify Your "Why"
- Mission and Strategic Goals
- Assessing Operational Alignment
- Risk and Financial Impact
- Legal Considerations
- Impact on Health Center Project



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DRIVERS TO CONSOLIDATE: IDENTIFY YOUR "WHY"



- Expand reach to new communities
- Expand scope of services
- Achieve economies of scale
- Expand source of fundings
- Prepare for anticipated changes in leadership (for example, retiring CEO)





MISSION AND STRATEGIC GOALS



- Does the opportunity advance the charitable mission of the health center?
- Do the strategic plans align?

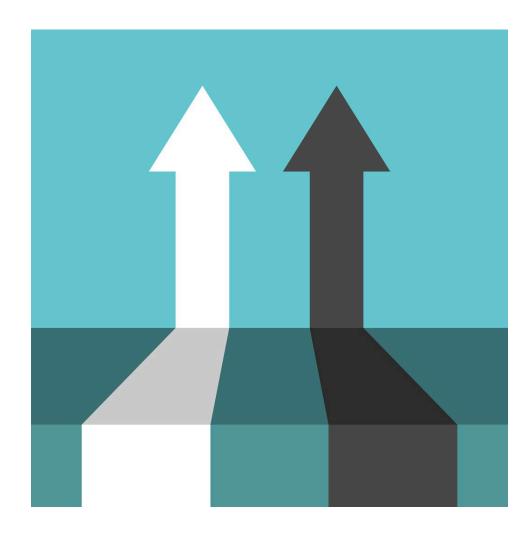






ASSESSING OPERATIONAL ALIGNMENT

- Do staffing models and compensation scales align?
- How will medical records be transferred/consolidated?
- Do key policies (for example, discount schedules) align?







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RISK AND FINANCIAL IMPACT



- What are the risks to the health center?
- What is the anticipated financial impact?
- What are the unknowns?

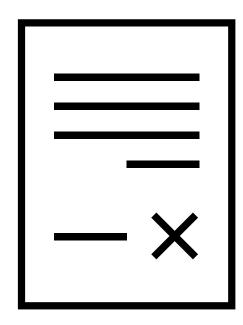


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LEGAL CONSIDERATIONS



- Is the health center coordinating its efforts with counsel/consultants?
- What are the necessary approvals (federal, state, other)?
- How do these approvals impact the timeline?

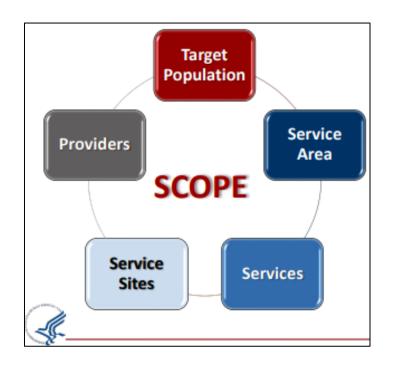








IMPACT ON HEALTH CENTER PROJECT



- Will the consolidation result in a change to the named Health Center Project grantee?
- Will the opportunity add new sites/services to the health center project?
 - If so, are the <u>Change in Scope Assurances</u> satisfied?





SUCCESSOR-IN-INTEREST VS. CHANGE IN SCOPE



SUCCESSOR-IN-INTEREST

- Consolidation would result in a change to the named Health Center Project grantee
 - Section 330 grant (and the health center project activities) must transfer to the other entity pursuant to the "successor in interest" grant transfer process.







SUCCESSOR-IN-INTEREST

 Submit board resolutions demonstrating that the boards of each entity approved the merger/acquisition and the board approves the relinquishment/assumption of the HRSA Health Center Project award.







BUREAU OF PRIMARY HEALTH CARE

HRSA Technical Assistance Resource: Health Center Mergers, Acquisitions and Other Organizational Changes and Related Successor-in-Interest Requests

Date of Issuance: January 27, 2020

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https://bphc.hrsa.gov/sites/default/files/bphc/compliance/hc-rg-changes-sii-requests.pdf

HRSA APPROVAL: CHANGE IN SCOPE (CIS)

- Adding a new site or service, without assuming another health center's H80 grant
 - Review the "change in scope" application and the "assurances"
 - HRSA review process is typically within 60 days



CHANGES IN SCOPE (CIS): ASSURANCES

- Required to add/remove an in-scope service or site
 - This CIS will be for the benefit of the current or proposed health center patient population, and the health center's governing board will retain oversight over the provision of any services and/or sites.
 - This CIS will be accomplished without additional Health Center Program Federal award funding and will not shift resources away from carrying out the current HRSA-approved scope of project.
 - This CIS will not diminish the patient population's access to and quality of services currently provided by the health center.







FINAL TIPS AND COMMON PITFALLS





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DON'T FORGET YOUR DUTY OF CONFIDENTIALITY







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DON'T RUSH THE PROCESS





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