***Maryland Primary Care Office: Acronyms, Facts & Definitions***

**PCO – Primary Care Office**

Mission/Vision: To improve access to healthcare for all Maryland residents.

The Maryland **Primary Care Office (PCO)** is federally funded by the Health Resources and Services Administration’s **Bureau of Health Workforce (BHW)** to promote federal, state, local, and private collaboration to expand comprehensive, community based primary care services for medically underserved populations. The PCO uses federal criteria to recommend eligible areas to the Office of Shortage Designation.

**WHAT WE CAN DO FOR YOU**

* Collect and submit data that can lead to shortage designations that help bring federal resources to Maryland.
* Serve as a liaison to federal immigration officials for requests for visa waivers that enable foreign health professionals to serve in underserved areas.
* Coordinate workforce programs that provide clinical staff to underserved areas of the state. Examples of these programs are the Loan Assistance Repayment Program (LARP), the National Interest Waiver (NIW), the National Health Service Corps (NHSC), the Nurse Corps, and the J1 Visa Waiver Program.
* Provide Technical Assistance for Communities and Organizations

**PROGRAM ADMINISTRATION**

The Maryland Department of Health and Mental Hygiene’s Office of Primary Care Access administers the PCO program. For more information, visit: <http://phpa.dhmh.maryland.gov/opca/Pages/pco-home.aspx>

For more information on the PCO program, please contact Elizabeth Vaidya at 410-767-5695 or Elizabeth.vaidya@maryland.gov

**RSA – Rational Service Area**

Whole county, or an area whose population has similar socio-economic characteristics, or an area that has physical access barriers which result in the population being isolated from nearby resources, or an established neighborhood within a metropolitan area which displays a strong self-identity.

**MUA/P – Medically Underserved Area or MUP – Medically Underserved Population**

Medically Underserved Area/Population (MUA/P) are areas or populations designated by Health Resources and Services Administration (HRSA) as having: too few primary care providers, high infant mortality, high poverty and/or high elderly population. In order to establish a Federally Qualified Health Center (FQHC) or FQHC Look-Alike, a site must be located in an MUA/P or providing services to residents who reside in an MUA/P.

**IMU – Index of Medical Underservice Score**

A federal scoring system that ranks data used for eligibility of a MUA/P (primary care providers, infant mortality rate, poverty and elderly population) by assigning a numerical score. Eligible areas must score a 62 or lower.

**FQHC – Federally Qualified Health Center**

Public and private, non-profit, health care organizations that meet certain criteria under the Medicare and Medicaid Programs of the Social Security Act, and receive federal grant funds under the Health Center Program (Section 330 of the Public Health Service Act). Applications can only be accepted when opportunity is available by HRSA. Types of FQHCs include Community Health Centers, Migrant Health Centers, Health Care for the Homeless Programs, and Public Housing Primary Care Programs.

**Look-Alike - Federally Qualified Health Center Look-Alike**

Meets all the criteria of an FQHC but does not receive 330 funding. Applications can be submitted year round for this program. Maryland does not have any Look-Alikes.

**Rural Health Center – Type of Federally Qualified Health Center**

A facility certified as located in a federally designated rural area that has been approved through a Fiscal Intermediary (FI) or Medicare Administrative Contractor (MAC) for claims processing and reimbursement.

**HPSA – Health Professional Shortage Area**

Criteria and the process used for designation of HPSAs were developed in accordance with the requirements of Section 332 of the Public Health Service Act. HPSA designation is a prerequisite for participation in a number of federal workforce programs, including National Health Service Corps (NHSC), Nurse Corps, J-1 Visa Waiver, and the Maryland Loan Assistance Repayment Program.

Designations are subject to updating every two years as part of the Bureau of Health Workforce’s (BHW) bi- annual review of HPSAs. During this time, new data relevant to the designation must be submitted by the Maryland Primary Care Office (PCO) to the BHW in support of its continued status as a HPSA.

HPSAs may be designated as having a shortage of primary medical care, dental or mental health providers. They may be urban or rural areas, population groups, or medical or other public facilities.

For each HPSA discipline (primary care, dental and mental health) there are four different types of HPSA designations, each with its own designation requirements:

* Geographic Area
* Population Groups
* Facilities
* Community Health Center Auto-HPSAs