

Pockets of Opportunity Access Plan:

Design: The IPHCA team has developed the associated “Priority Matrix” Excel file to identify “pockets of opportunity” for current and prospective health centers to consider expanding access. This matrix aims to identify counties within Indiana where health centers have the most opportunity to reach vulnerable and underserved Hoosiers. County-level data from nine key sources were leveraged to inform the outcomes of this matrix. Each metric is scaled in quintiles (1-5), weighted, and scored to assign a rank from 1-92. The tool was designed to be flexible, and we encourage teams to add relevant variables, change associated weights, and interpret the outcomes as they see fit. The tool includes a source data tab with brief descriptions, website information, and original datasets from each variable for convenience.

Source Data:

- Social Vulnerability Index (SVI)
 - Source: CDC
- Medically Underserved Area/Population (MUA/P)
 - Source: HRSA
 - Please carefully review the original MUA.P source data tab to note partial county MUA/P
- Health Professional Shortage Area (geographic level and population level)
 - Source: HRSA
 - Please carefully review the original HPSA Find source data tab to note partial county HPSA
- Social Deprivation Index (SDI)
 - Source: Robert Graham Center
- Health Center Presence
 - Source: IPHCA
- County Health Rankings (Outcomes)
 - Source: County Health Rankings
- Percent of County Population who are Medicaid Recipients
 - Source: Indiana FSSA
- Percent Below the Poverty
 - Source: US Census Bureau
- Depression Rates
 - Source: Mental Health America
- County Unmet Need
 - Not included in the analysis but is available in a separate worksheet tab at the zip code level for your review
- Priority Matrix Template Reference
 - Praxie : <https://praxie.com/project-prioritization-matrix-online-software-templates/>

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Scaling: The tool has three key components that allow for it to give an “apples to apples” comparison of all variables. The key components are **scaling**, **weighting**, and **ranking**. Scaling and weighting both occur in the Raw Data tab of the document. To scale, we must be able to compare, for example, an SVI score of .1234 to a HPSA score of 10. This tool utilizes quintiles based on each variable’s upper and lower extremities. Once the quintiles for the measure are determined, each county is given a “criteria score” from 1-5 with respect to the raw data range. (see image below).

Example:

Criteria Scale		Less Opportunity			Most Opportunity	
		1	2	3	4	5
SVI	Low	0	0.201	0.401	0.601	0.801
	High	0.2	0.4	0.6	0.8	1
MUA < 62.0	Low	No /				Yes
	High	No Data				
Cty Hlth Rnk	Low	1	18.401	36.801	55.201	73.601
	High	18.4	36.8	55.2	73.6	92
SDI	Low	0	20.01	40.01	60.01	80.01
	High	20	40	60	80	100
HPSA	Low	1	5.01	10.01	15.01	20.01
	High	5	10	15	20	25
Existing CHC	Low	Yes				No
	High					
% Medicaid	Low	14%	24%	34%	44%	54%
	High	24%	34%	44%	54%	64%
% Below Poverty	Low	4.0%	7.5%	11.0%	14.5%	18.0%
	High	7.5%	11.0%	14.5%	18.0%	21.8%
Depression Rates	Low	20	34.501	49.01	63.501	78.01
	High	34.5	49	63.5	78	92.5

Weighting: Once scaling is determined, the measure is then assigned a weight. As the name suggests, the weight reflects the variable’s relevance to the overall calculation. This matrix aims to identify counties within Indiana where health centers have the most opportunity to reach vulnerable and underserved Hoosiers. To that end, this team knew they wanted to weigh counties with high depression rates that did not already have a health center much higher than counties that did. To do so, we assigned “health center presence” and “depression rates” their own, entirely separate categories with 100% weight. Depression weight was scored in quintiles, but since health centers’ presence warrants a “yes/no” result, a county **without** a health center was assigned a weight of 5 (most opportunity) and a county with a health center was assigned a 1 (least opportunity).

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All seven remaining categories were assigned a weight of one-seventh, or 14.3%, for the remaining category. There are three categories (the group of seven, depression rates, and health center presence). Each county will be given a score from 1-5 in each category. The overall score for this tool is 15.

When using this template, teams are encouraged to consider which variables may be of greater interest. For example, HPSA designation may be considered to have stronger relevance to the overall analysis than MUA/P. You can adjust the weights of each category from 0%-100%.

Example:

Criteria 1		Criteria 2		Criteria 3	
Social Vulnerability Index		Medically Underserved Area/Population		County Health Ranking	
Weight:	14.3%	Weight:	14.3%	Weight:	14.3%
<i>1=Less Opp.</i>		<i>1=>62</i>		<i>1=Less Opp.</i>	
<i>5=More Opp.</i>		<i>5=<62</i>		<i>5=More Opp.</i>	

Ranking: Results from each of the three categories are added together to give a score out of 15. The county with the highest score will be assigned a rank of 1, the second highest a two, and so on with all remaining counties. 1 indicates the county with the most need/opportunity for a health center to reach underserved Hoosiers.

A “heat map” visual was generated in a separate tab to depict the number 1 county in dark red and the number 92 county in light red. An additional heat map was generated to demonstrate the rank of depression rates across the state.

Excel File Guidance: The three tabs which would likely be of most interest for you are:

- “Priority Matrix” (green)
- Heat Map (red)
- Behavioral Heat Map (blue)

Contact Information: Please contact Ben Harvey bharvey@indianapca.org with questions.