

RURAL **HEALTH** WORKSHOP

Federal Update on Rural Health



Speaker

- Kristen Dillion, MD, FAAFP
 - Chief Medical Officer
 - Federal Office of Rural Health Policy (FORHP)





Federal Update on Rural Health

Louisiana Rural Health Workshop

June 21st, 2023

Kristen Dillon, MD, FAAFP, Chief Medical Officer
Federal Office of Rural Health Policy (FORHP)

Vision: Healthy Communities, Healthy People



The Federal Office of Rural Health Policy

Established in Section 711 of the Social Security Act

The Federal Office of Rural Health Policy (FORHP) collaborates with rural communities and partners to support community programs and shape policy that will improve health in rural America.

Cross Agency Collaboration

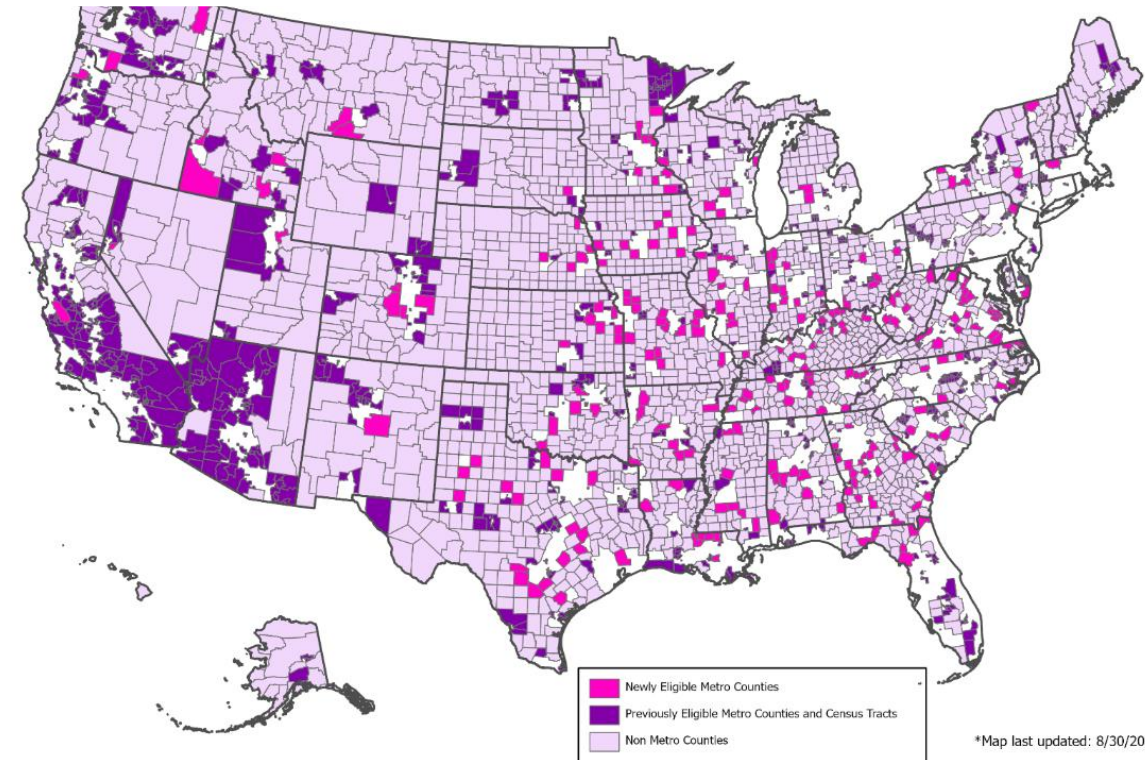
Works across HRSA, HHS, and several other federal partners to accomplish its goals

Capacity Building

Increases access to health care for people in rural communities through grant programs and public partnerships

Voice for Rural

Advises the HHS Secretary on policy and regulation that affect rural areas



Looking Ahead

Key Priorities for 2023

Addressing Rural Substance Use Challenges

Addressing Rural Disparities

Expanding Workforce Partnerships

Supporting Rural Hospitals and Clinics

Enhancing Rural Community Health



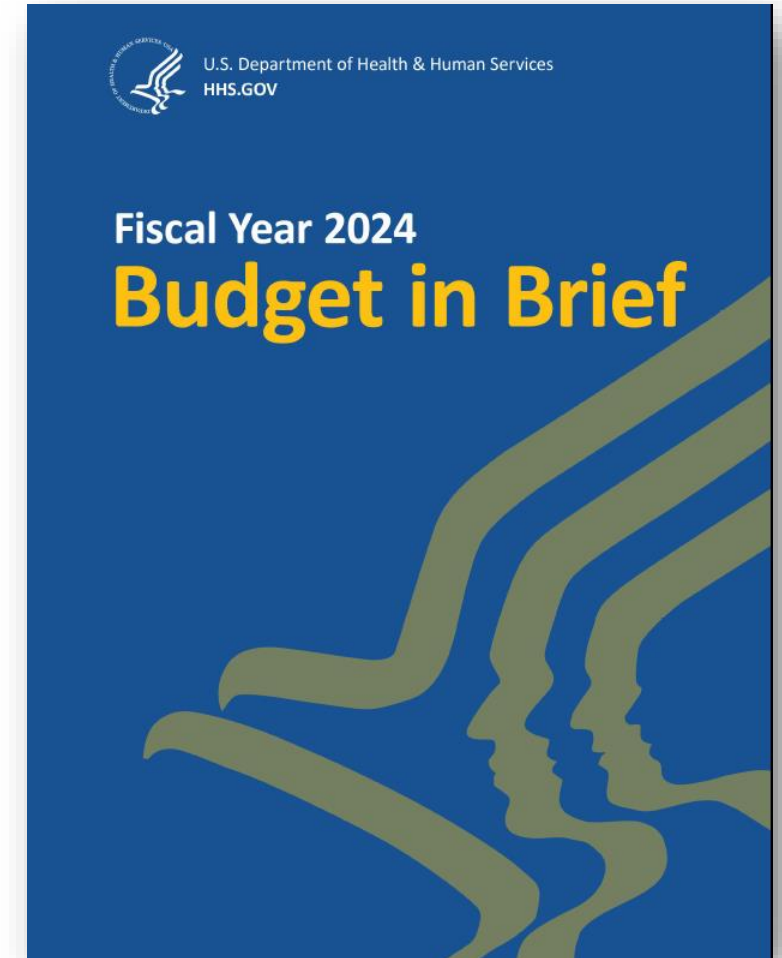
New Proposals for 2024

From the Administration's Budget

The Budget provides **\$415.9 million**, an increase of **\$63.4 million**, to expand access and improve health care in rural communities

- **+\$10 million** for the **Rural Health Clinic Behavioral Health Initiative** to expand access to behavioral health care services
- **+\$10 million** for **Financial and Community Sustainability for At-Risk Rural Hospitals** to provide expert technical assistance to rural hospitals severely at-risk for imminent closure
- **+\$20 million** for the **Rural Service Lines Pilot** to enhance or expand service lines to support people where they live
- **+\$20 million** for the **Rural Communities Opioid Response Program**

<https://www.hhs.gov/about/budget/fy2024/index.html>



The Rural Maternal and Obstetric Crisis

Rural Maternal Obstetrics Management Strategies (RMOMS) Program Continues

Challenges

- Access to Prenatal Services
- Loss of Rural Hospital Obstetric Units
- Disparities Related to Maternal Mortality, Preterm Birth, Infant Mortality

Opportunities:

- Medicaid Postpartum Coverage Expansion
- New Funding Cycle – **Fall 2023**

Focus Areas

- Rural Hospital Obstetric Services; Approaches to Risk-Appropriate Care; Sustainability



For more information:



[RMOMS Application Site](#)



[RMOMS Website](#)



[Email: RMOMS@hrsa.gov](mailto:RMOMS@hrsa.gov)



NEW! Rural Maternity Obstetrics Management Strategies (RMOMS)

Funding Amount: Up to \$1,000,000 per year

Application Period: May 15, 2023 – July 7, 2023

Purpose: To establish or continue collaborative improvement and innovation networks to improve access to and delivery of maternity and obstetrics care in rural areas.

Focus Areas

- Rural Hospital Obstetric Service Aggregation
- Approaches to Risk-Appropriate Care
- Sustainability

U.S. Department of Health and Human Services



NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2023

Federal Office of Rural Health Policy

Community-Based Division

Rural Maternity and Obstetrics Management Strategies Program

Funding Opportunity Number: HRSA-23-049

Funding Opportunity Type(s): New

Assistance Listings Number: 93.912

Application Due Date: July 7, 2023

Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!

HRSA will not approve deadline extensions for lack of registration.

Registration in all systems may take up to 1 month to complete.

Issuance Date: May 15, 2023



For more information:



[RMOMS Application Site](#)



[RMOMS Website](#)



[Email: RMOMS@hrsa.gov](mailto:RMOMS@hrsa.gov)



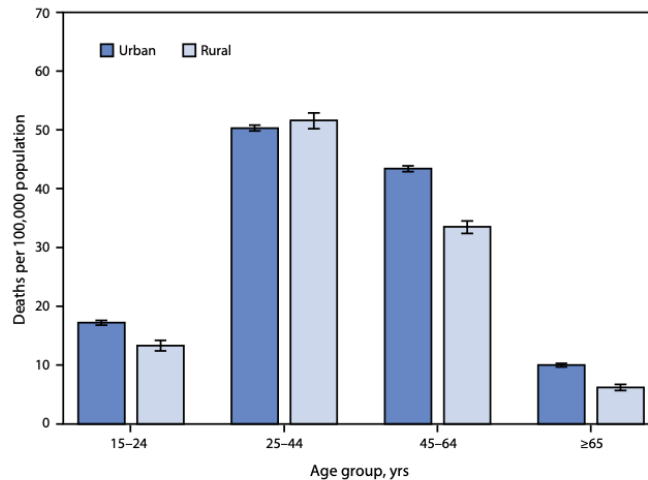
The Opioid and Substance Use Epidemic ...

Rural Community Opioids Response Program Continues

QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

Drug Overdose Death Rates* Among Persons Aged ≥15 Years, by Age Group and Urban-Rural Status† — National Vital Statistics System, United States, 2020



* Deaths per 100,000 population; 95% CIs indicated by error bars. Drug overdose deaths were identified using the *International Classification of Diseases, Tenth Revision* underlying cause-of-death codes X40–X44 (unintentional), X60–X64 (suicide), X85 (homicide), or Y10–Y14 (undetermined intent).

† Urban-rural status is based on county of residence using the National Center for Health Statistics Urban-Rural Classification Scheme for Counties. https://www.cdc.gov/nchs/data/series/sr_02/sr02_166.pdf

Advancing Behavioral Health Equity in Rural Communities

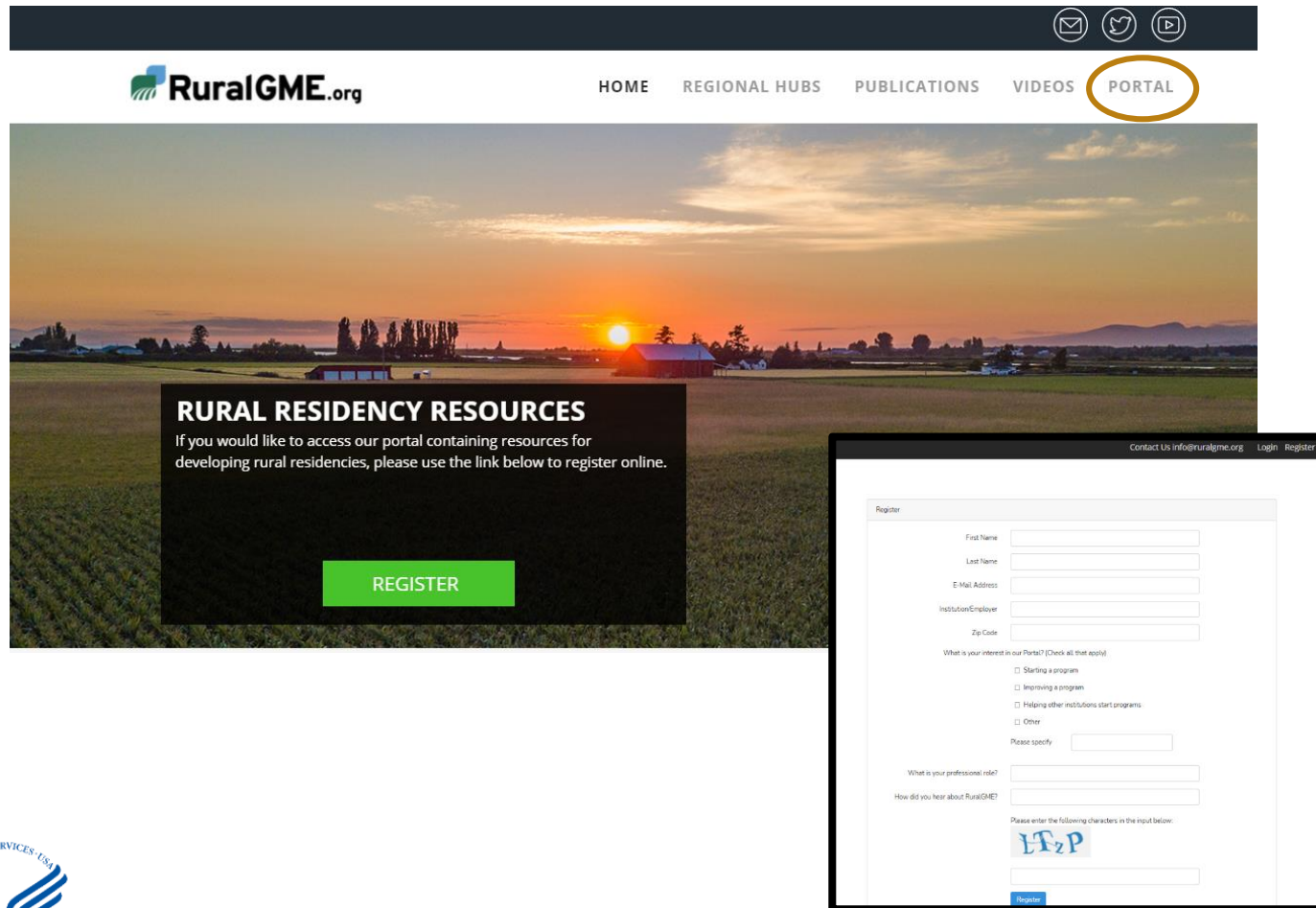
The **Rural Communities Opioid Response Program (RCORP)** provides direct funding and technical assistance to rural communities.

We have invested over **\$500 million** since 2018. This funding addresses behavioral health needs, substance use disorder, and opioid use disorder.



Rural Residency Training

Helping Rural Communities Develop and Sustain Training Programs

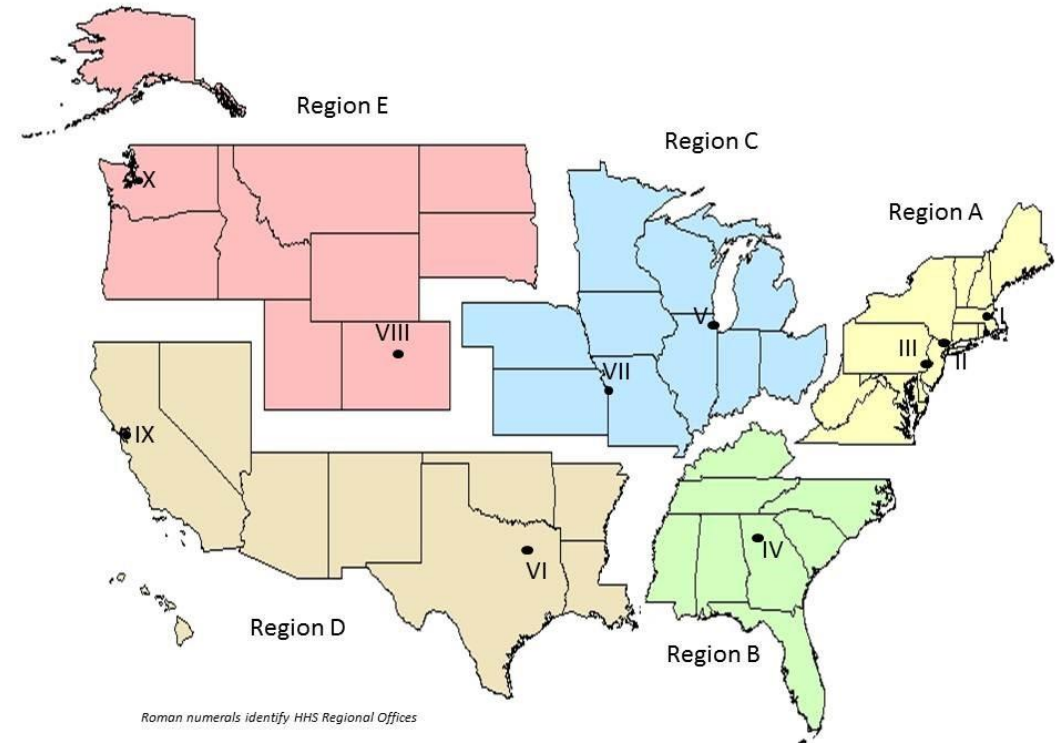


- Helping to expand rural residencies nationally in support of the Rural Residency Planning Grant Program and the Teaching Health Center Planning Grant Program
 - Rural GME development resources and tools available via the [RuralGME.org](https://portal.ruralgme.org) portal
 - To register for free access to portal resources, visit: <https://portal.ruralgme.org/register>

Assisting the 50 State Offices of Rural Health

The National Organization of State Offices of Rural Health

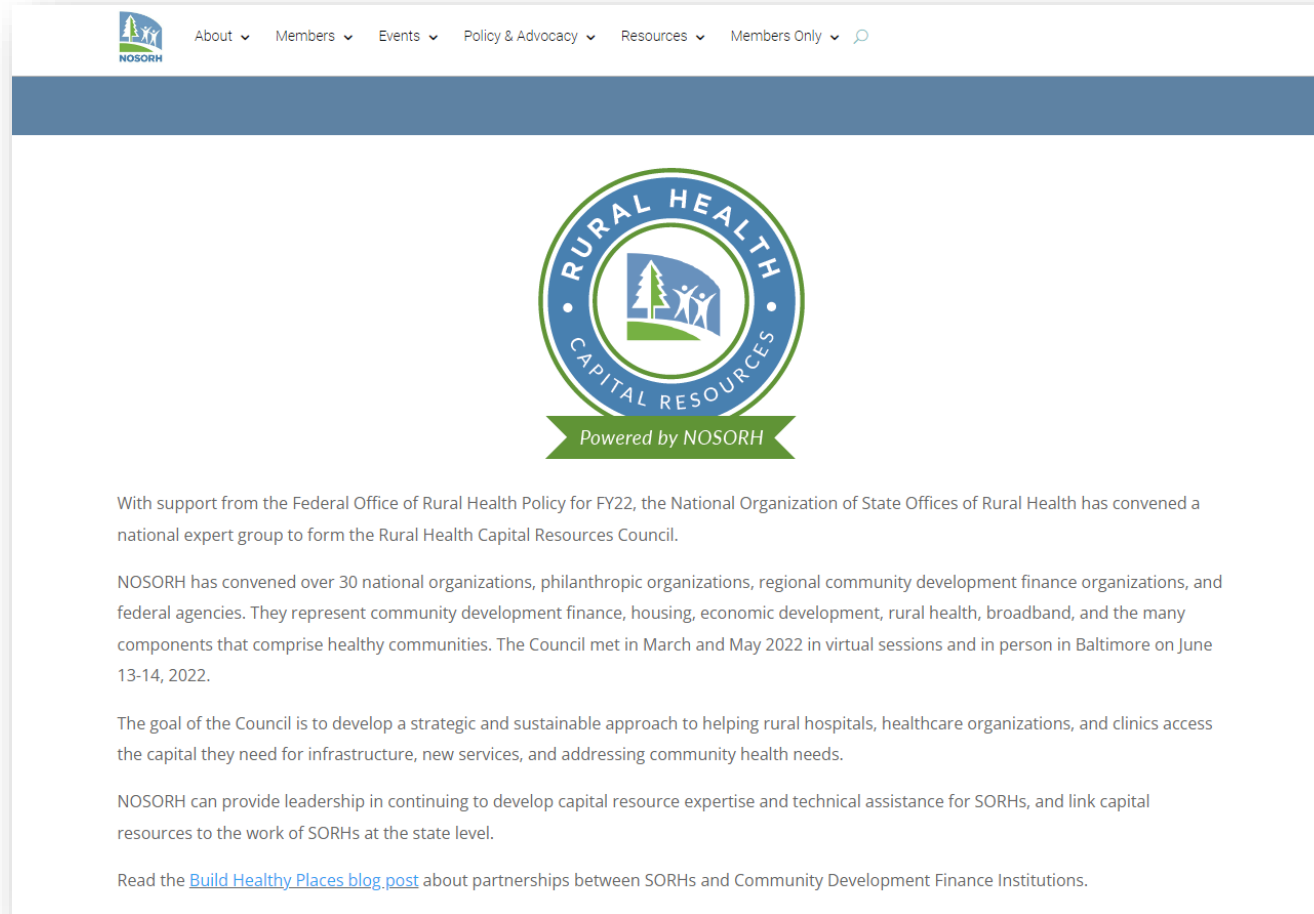
- Share information, resources and innovative projects with other rural health stakeholders
- Coordinate with other state partners on rural health issues
- Grant Writing Technical Assistance
- National Rural Health Day
 - “Community Stars”



<https://nosorh.org>

Rural Health Capital Resources Council

National Organization of State Offices of Rural Health



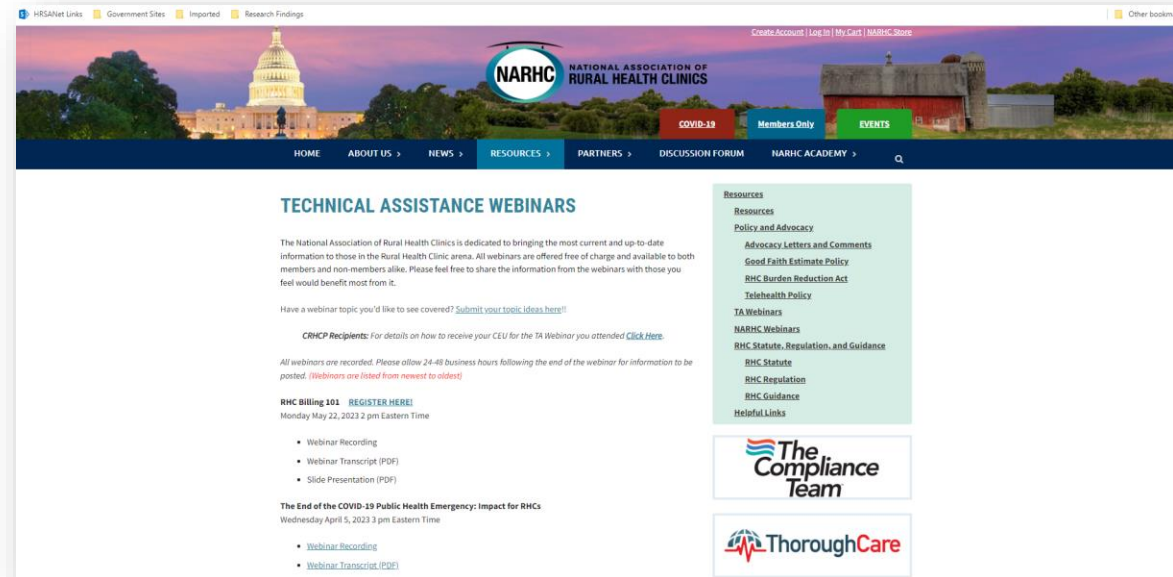
The screenshot shows the homepage of the Rural Health Capital Resources Council. At the top is a navigation bar with links: About, Members, Events, Policy & Advocacy, Resources, and Members Only. Below the navigation bar is a large circular logo for the Rural Health Capital Resources Council, featuring a stylized landscape with a tree and a person, and the text "RURAL HEALTH CAPITAL RESOURCES" and "Powered by NOSORH". Below the logo, the text reads: "With support from the Federal Office of Rural Health Policy for FY22, the National Organization of State Offices of Rural Health has convened a national expert group to form the Rural Health Capital Resources Council." It then states: "NOSORH has convened over 30 national organizations, philanthropic organizations, regional community development finance organizations, and federal agencies. They represent community development finance, housing, economic development, rural health, broadband, and the many components that comprise healthy communities. The Council met in March and May 2022 in virtual sessions and in person in Baltimore on June 13-14, 2022." The next paragraph says: "The goal of the Council is to develop a strategic and sustainable approach to helping rural hospitals, healthcare organizations, and clinics access the capital they need for infrastructure, new services, and addressing community health needs." It then mentions: "NOSORH can provide leadership in continuing to develop capital resource expertise and technical assistance for SORHs, and link capital resources to the work of SORHs at the state level." Finally, it says: "Read the [Build Healthy Places blog post](#) about partnerships between SORHs and Community Development Finance Institutions."

- Over 30 national organizations, philanthropic organizations, regional community development finance organizations, and federal agencies.
- Representing community development finance, housing, economic development, rural health, broadband, and more.
- Building a clearinghouse of resources and information
- [Rural Health Capital Resources Council webpage](#)

Supporting Rural Health Clinics

Technical Assistance Series

- Cooperative agreement providing assistance, solutions, and information to RHCs on key policy, regulatory, programmatic, and clinical issues
 - Highlights of NARHC TA:
 - Technical assistance webinars
 - Recordings, slides and transcripts are posted https://www.narhc.org/narhc/TA_Webinars1.asp
 - NARHC forums and email listserv: online information exchange/referral service
 - Sign up <https://www.narhc.org/discussionforums/DiscussionDefault.asp>
 - NARHC website and resources: online information to disseminate key priorities and resources on specific topics (e.g., good faith estimate, telehealth policy)



- https://www.narhc.org/narhc/TA_Webinars1.asp

The National Rural Recruitment & Retention Network

3RNET - State Level Resource for Employers and Professionals

Post Jobs, Get Referrals, Hire & Inspire

[VIEW APPLY](#)

[APPLY TO POST JOBS NOW](#)

[LEARN MORE](#)

People Who Can Help

You have questions, we have people with answers.

[3RNET NETWORK COORDINATORS](#)

[J-1 VISA WAIVER CONTACTS](#)

[CONTACT 3RNET](#)

Education

We get it, recruiting can be tough. Fortunately, we've been working this since 1995 (are we vintage?). We offer both in-person and virtual education to make your life easier.

[3RNET ACADEMY](#)

[EMPLOYER'S GUIDE TO WORKFORCE PROGRAMS](#)

[COMMUNITY BASED TRAINING](#)

REGISTER PROFESSIONAL REGISTER EMPLOYER LOGIN

FOR PROFESSIONALS FOR EMPLOYERS

Your new career starts here

[SEARCH](#)

[Filter Search](#)

Finding Jobs With 3RNET is As Easy As

1

Search for jobs by profession or location in all 50 states.

2

Register for FREE to get full access to job details and notifications.

3

Get information on Loan Repayment Programs, J-1 Visa waivers, and more.

[REGISTER FOR FREE](#)



<https://www.3rnet.org/>



A National Rural Health Clearinghouse

The Rural Health Information Hub

www.ruralhealthinfo.org

Topic Guides

MORE ON THIS TOPIC

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Rural Healthcare Workforce

Maintaining the healthcare workforce is fundamental to providing access to quality healthcare in rural areas. Rural healthcare facilities must employ enough healthcare professionals to meet the needs of the community. They must have proper licensure, adequate education and training, and cultural competency skills. Equally important, optimizing how health professionals are used and enhancing coordination among them helps ensure that patients are getting the best care possible.

Strategies can include:

- Using interprofessional teams to provide coordinated and efficient care for patients and to extend the reach of each provider
- Ensuring that all professionals are fully utilizing their skill sets and working at the top of their license; that is, practicing to the full extent of their training and allowed scope of practice.
- Removing state and federal barriers to professional practice, where appropriate
- Changing policy to allow alternative provider types, once evidence shows they can provide quality care

Funding Opportunities

MORE ON THIS TOPIC

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About This Guide

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Rural Healthcare Workforce – Funding & Opportunities

For additional funding options, please see RHInet's [Online Library: Funding & Opportunities](#)

Sort By: [Date](#) | [Name](#) ☐ Hide Inactive Funding

[Narrow by type](#)

[Narrow by geography](#)

[Narrow by topic](#)

Indian Health Service Loan Repayment Program

Loan repayment for undergraduate and graduate health professional educational loans in return for full-time clinical service in Indian Health Service programs.

Geographic coverage: Nationwide

Application Deadline: Aug 15, 2019

Sponsors: Indian Health Service, U.S. Department of Health and Human Services

NIDDK Education Program Grants (R25 Clinical Trial Not Allowed)

Grants to support educational activities that complement and/or enhance the training of a workforce to meet the nation's biomedical, behavioral and clinical research needs. Institutions are encouraged to diversify their student and faculty populations to enhance the participation of individuals from groups identified as underrepresented in the biomedical, clinical, behavioral and social sciences.

Models and Innovations

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Models and Innovations

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Rural Healthcare Workforce – Models and Innovations

These stories feature model programs and successful rural projects that can serve as a source of ideas and provide lessons others have learned. Some of the projects or programs may no longer be active. Read about the [criteria and evidence-base](#) for programs included.

Sort By: [Date](#) | [Name](#)

[Narrow by geography](#)

[Narrow by topic](#)

Promising Examples

High Plains Community Health Center Care Teams

Updated/reviewed February 2019

- **Need:** Meeting health care demands in a region with a limited number of physicians, where recruiting additional providers is considered impractical.
- **Intervention:** Using the additional support of health coaches, implementation of care teams consisting of 3 medical assistants to support each provider.
- **Results:** More patients seen per provider hour, with improved patient outcomes and clinic cost savings.



Rural Health Research

The Rural Research Gateway



www.ruralhealthresearch.org

Search for...

[About Us](#) - [Browse Research](#) - [Webinars](#) - [Research Alerts](#) - [Other Resources](#)



RECAP: MATERNAL HEALTH DISPARITIES: AN INTERSECTION OF RACE AND RURALITY

View NEW Recap: Maternal Health Disparities

Rural Health Research Gateway

The Rural Health Research Gateway provides easy and timely access to research conducted by the Rural Health Research Centers, funded by the [Federal Office of Rural Health Policy](#). Gateway efficiently puts new findings and information in the hands of our subscribers, including policymakers, educators, public health employees, hospital staff, and more.

- [Gateway flyer](#)
- [Popular rural health products and topics, 2021-2022](#)
- [Learn more](#)



Rural Health Research Recaps

- Access brief summaries on key rural health issues
- Key findings from the work of the Rural Health Research Centers



Research Alerts

- Email notifications when new research products are completed
- See five most recent alerts



Research Publications

- Access policy briefs, chartbooks, journal articles, and other products developed under the Centers' Research Projects



Research Centers

- Learn about the Rural Health Research Centers Program
- View list of currently funded research centers
- Learn about their areas of expertise



Dissemination Toolkit

- Learn how to create health research products
- Tips for developing policy briefs, fact sheets, journal articles and more

[Rural Health Research Gateway](#) > [Topics](#)

Medicare

Research Findings

View publications, including policy briefs, working papers, and journal articles, on Medicare:

- [Research Products & Journal Articles](#) - (230)

Webinars

Access information on upcoming or archived webinars on Medicare.

- [Impact of the CMS Value-Based Purchasing and Readmission Reduction Programs on Rural Hospitals](#)
Presented Tuesday, October 20, 2015
- [The 2014 Update of the Rural-Urban Chartbook](#)
Presented Tuesday, December 9, 2014
- [Change in Profitability and Financial Distress of Critical Access Hospitals \(CAHs\) from Loss of Cost-Based Reimbursement](#)
Presented Friday, October 31, 2014

Projects on this Topic

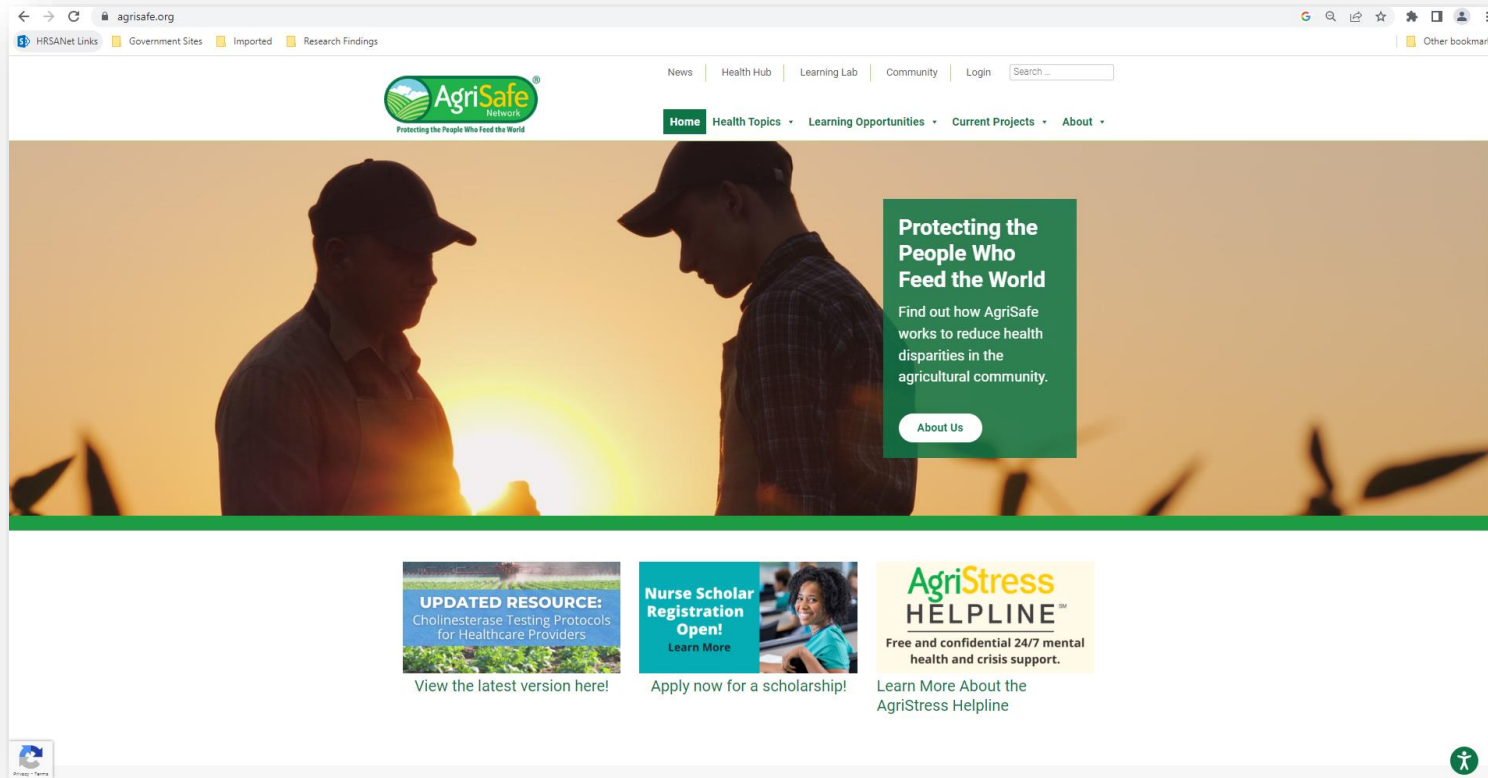
Learn more about the research questions guiding each study, the lead researcher for each, and when the Research Center anticipates releasing completed product(s) under each project.

- Currently, there are [20 research projects underway](#) to explore this issue.
- In the past, [96 research projects have been completed](#) on Medicare.

Agricultural Health and Safety

The AgriSafe Network

www.agrisafe.org

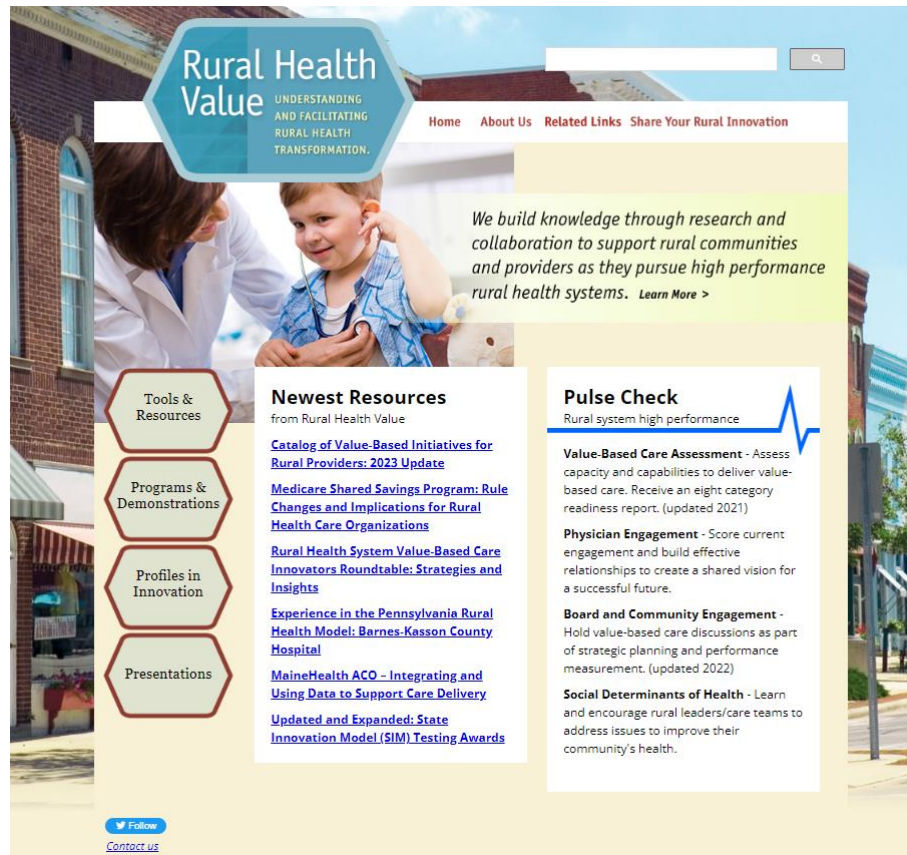


- Addressing Health Disparities and Safeties in the Agricultural Sector
 - Training
 - Certification
 - Webinars

Rural Health Value

Rural-Specific Resource on Changes in Health Care

<https://ruralhealthvalue.public-health.uiowa.edu/>



Rural Health Value Policy Brief Medicare Shared Savings Program: Rule Changes and Implications for Rural Health Care Organizations

PURPOSE

The Rural Health Value (RHV) team offers this summary of changes to the Centers for Medicare & Medicaid Services (CMS) Medicare Shared Savings Program (SSP) that take effect in January 2023 for current participants, and in January 2024 for organizations applying in 2023 for a January 1, 2024 start. We focus on program changes that may support entry into the SSP for those healthcare organizations (HCOs) that have never participated in the SSP, and may facilitate reentry for those HCOs that had previously discontinued participation in the SSP. Consistent with the RHV vision to build and distribute actionable knowledge that helps create high performance rural health systems, the purpose of this document is to delineate changes to the SSP made by CMS in the Calendar Year 2023 Medicare Physician Fee Schedule Final Rule – Medicare Shared Savings Program that may make participation in the nation's largest value-based payment program more favorable for rural HCOs.

INTRODUCTION

The SSP is a value-based Medicare alternative payment model that generally retains fee-for-service payments (i.e., prospective payment system for hospitals, home health, and skilled nursing; cost-based reimbursement for Critical Access Hospitals, and fee-for-service for health professionals) while adding payment incentives (in the form of shared savings) for clinical quality and cost control performance. Groups of HCOs participate in the SSP by forming accountable care organizations (ACOs). Some ACOs currently participate in the SSP with only upside risk; that is, Medicare will share program savings with the ACO (assuming adequate quality performance). Other ACOs assume two-sided risk; that is, Medicare shares program savings with the ACO, but the ACO is also responsible for covering a portion of program losses if losses occur (downside risk). The percent of savings shared is greater if the ACO also agrees to accept downside risk.

Thus far, many rural ACOs have been reluctant to assume downside risk, but under current rules they are required to begin assuming downside risk by the third year of a five-year glide path and assume the highest level of risk (level E) in their fourth year (see Table 1). The SSP is considered the major public policy strategy for achieving the Center for Medicare & Medicaid Innovation aim that "all Medicare fee-for-service beneficiaries will be in a care relationship with accountability for quality and total cost of care by 2030".¹ The new rule also addresses the CMS broader goal of increasing participation in the SSP, especially among low-revenue ACOs and ACOs lacking previous performance-based payment experience. Through calculation of an advanced payment (including quarterly per-beneficiary payments) and adjustments to quality scores, the rule prioritizes equity for underserved and medically complex populations, addressing another CMS goal.²

¹ <https://innovation.cms.gov/strategic-direction>

² Shared Savings Program Fast Facts - As of January 1, 2022, available at <https://www.cms.gov/medicare/medicaid-innovation/2022-01/2022-Shared-Savings-Program-Fast-Facts.pdf>



Helping Rural Communities Assess New Models

The Rural Emergency Hospital Technical Assistance Initiative



Christina Campos (center right) speaks to staff in the emergency department at Guadalupe County Hospital in Santa Rosa, New Mexico. The hospital is one of the first to start the process of converting into a Rural Emergency Hospital as part of a new federal payment program. (ADRIA MALCOLM FOR KHN)

Struggling to Survive, the First Rural Hospitals Line Up for New Federal Lifeline

National Technical Assistance Center

- Rural Health Redesign Center:
<https://www.rhrco.org/reh-tac>;
REHSupport@rhrco.org

Supplemental Funding for State Flex Programs

- Outreach and broad education

Supplement to HRSA partners

- National Conference of State Legislators:
 - Tracking state activity on establishing laws on REH licensure:
<https://www.ncsl.org/research/health/rural-emergency-hospitals.aspx>
- National Academy for State Health Policy
 - Developing model licensing language
 - <https://www.nashp.org/medicares-new-rural-emergency-hospital-designation-considerations-for-states/>

Direct Technical Assistance to Hospitals and Clinics

Expert Clinical, Financial and Quality Measurement Services Available

Rural Healthcare Provider Transition Project

- [Helps](#) organizations in strengthening their foundation in key elements of value-based care: quality, efficiency, patient experience and patient safety.
- Eligible entities include small rural hospitals and Rural Health Clinics.
- **Application Period:** rolling application – [apply now!](#)

Targeted Technical Assistance to Rural Hospitals Program

- [Provides](#) targeted assistance to hospitals working to maintain health care services.
- Helps hospitals and communities understand community health needs and how to keep needed health care local.
- **Application Period:** Fall 2023

Delta Region Community Health Systems Development Program

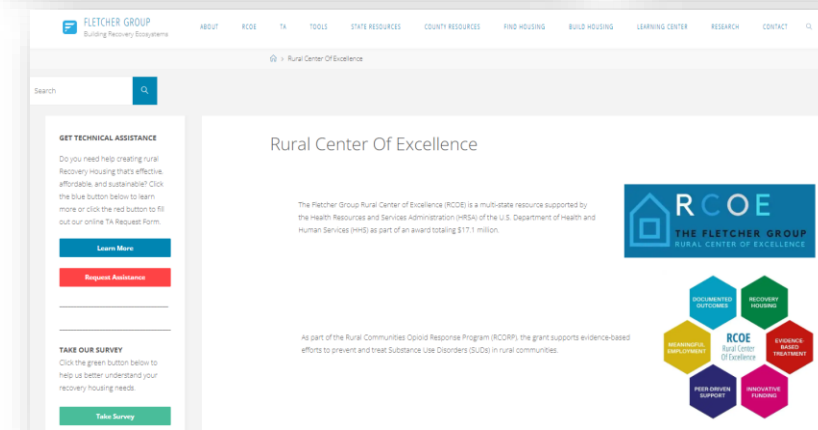
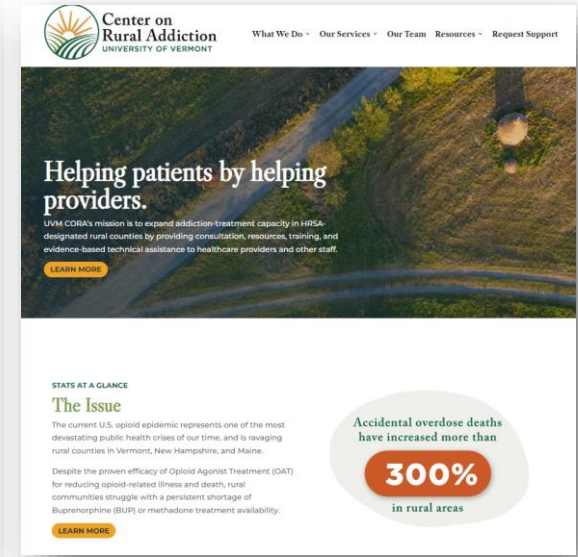
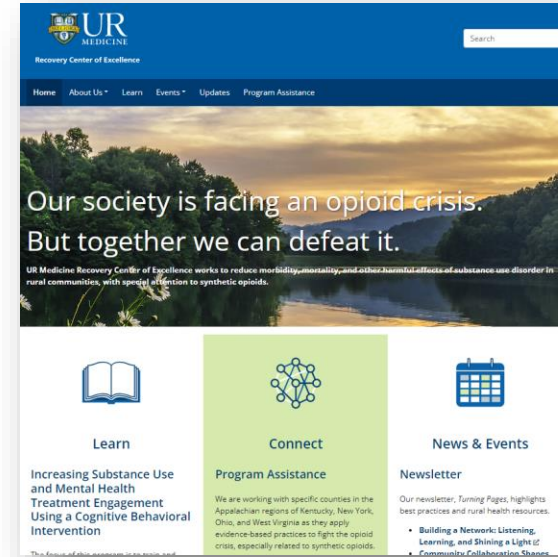
- [Provides](#) intensive technical assistance to healthcare facilities in rural communities in the Mississippi Delta region.
- Helps strengthen the local health care delivery system to position for population health.
- **Application Period:** rolling application – [apply now!](#)



Behavioral Health Resources

Rural Centers of Excellence

- University of Vermont
 - Focused on innovative and effective treatment interventions for SUD, particularly OUD, in rural communities
 - ✓ <https://uvmcora.org/>
- University of Rochester
 - Focused on addressing synthetic opioid-related overdose mortality in rural communities in the Appalachian region
 - ✓ <https://recoverycenterofexcellence.org/>
- The Fletcher Group in collaboration with the University of Kentucky
 - Focused best practices in recovery housing programs for SUD, particularly OUD; interventions among low-income, high-risk individuals in rural communities
 - ✓ <https://fletchergroup.org/rcoe/>



Telehealth Centers of Excellence Program

Funded Through the Office for the Advancement of Telehealth

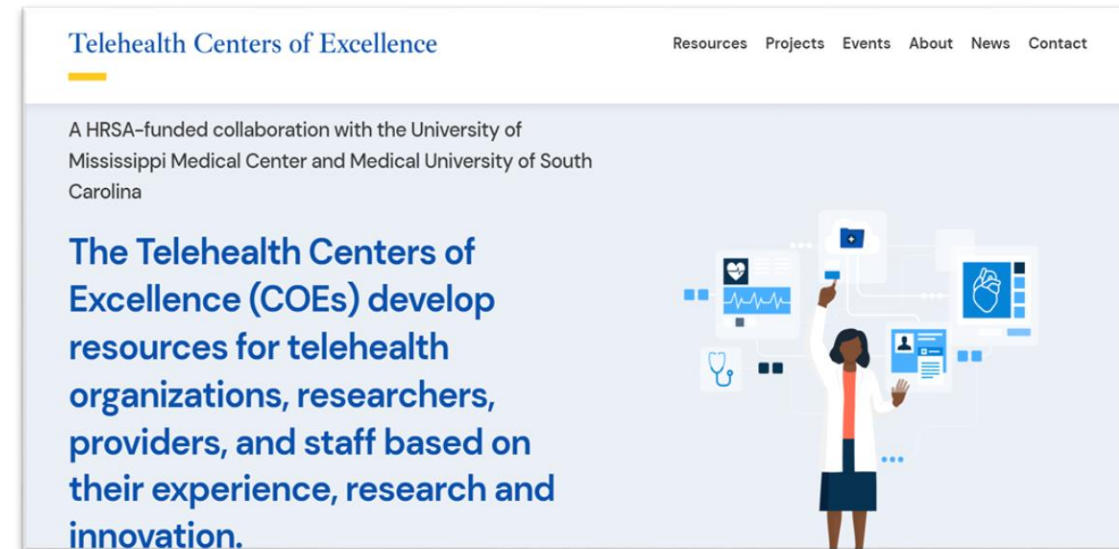
The **Telehealth Centers of Excellence (COE)** examine the efficacy of telehealth services in rural and urban areas. The Centers of Excellence provide clinical services and serve as a test-bed for new, innovative ways to use telehealth technology.

OAT funds two COEs:

- University of Mississippi Medical Center
- Medical University of South Carolina

New Website launched in 2022:

<https://telehealthcoe.org/>



Rural Tele-Mentoring Training Center

Technical Assistance and Evaluation Program



- National resources to implement and evaluate telementoring programs
- To request training and technical assistance:
<https://ruraltelementoring.org/interest/>

Telehealth Resource Centers

Funded Through the Office for the Advancement of Telehealth

Telehealth.HHS.gov

<https://telehealth.hhs.gov/>

Office for the Advancement of Telehealth

<https://www.hrsa.gov/rural-health/topics/telehealth>

Telehealth Centers of Excellence

<https://telehealthcoe.org/>

Telehealth Resource Centers

<https://www.telehealthresourcecenter.org/>

ProviderBridge

<https://www.providerbridge.org/>

Multi-Discipline Licensure Resource Project

<https://licensureproject.org/>

TELEHEALTH.HHS.GOV



Telehealth Centers of Excellence



Information and Resources

Weekly Announcements



Announcements from the Federal Office of Rural Health Policy

Having trouble viewing this email? [View it as a webpage](#)

May 18, 2023

What's New

Funding Now Available for the Rural Maternity and Obstetrics Management Strategies

Program. On Tuesday, HRSA announced that the Rural Maternity and Obstetrics Management Strategies Program (RMOMS) is accepting applications through **Friday, July 7**. Approximately \$2 million is available to fund up to two health networks to preserve access to and continuity of maternal and obstetrics care in rural communities. For more information about the RMOMS program and current awardees, [visit the RMOMS webpage](#).

Stigma and Opioid Use Disorder. More than 450 clinicians and counselors in rural New England were surveyed about stigma as a barrier to treating patients for opioid use disorder (OUD) as well as practitioners' beliefs about medications for OUD. Over half (55 percent)

<https://public.govdelivery.com/accounts/USHSHRSA/subscriber/new?qsp=HRSA-subscribe>



Become a HRSA Grant Reviewer

We need rural subject matter experts

We are seeking subject matter experts to provide peer, virtual reviews of the agency's grant applications. Grant reviewers are compensated for their time.

REQUIRED SUBJECT MATTER EXPERTISE IN AT LEAST ONE AREA	
Behavioral Health	Maternal and Child Health
Health Workforce Training	Primary Care Delivery
HIV/AIDS	Rural Health
Working with or Member of Underserved Communities	

ADDITIONAL EXPERTISE	
Diversity, Equity, Inclusion, and Accessibility (DEIA)	Lived Experience
Health Equity	Social Determinants of Health

If you are interested in serving as a grant reviewer, you can learn more at hrsa.gov/grants/reviewers.

If you sign up, also email SStack@hrsa.gov so we know you're in the system



Connect with HRSA

Contact Information: kdillon@hrsa.gov

Learn more about our agency at: www.HRSA.gov

Rural Health Questions? Email RuralPolicy@HRSA.gov

[Sign up for the HRSA eNews](#) 

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Questions?

We want to hear from you!

<https://www.surveymonkey.com/r/BW59S9F>



RURAL **HEALTH** WORKSHOP

Break with Exhibitors: 9:15 – 9:45 a.m.

Breakout Sessions: 9:45 – 11:45 p.m.

Networking Lunch: 11:45 a.m. – 1:00 p.m.

