

Mark your Calendar!



The Branch

An Update for State Offices of Rural Health and our Partners

October, 2013

Website: www.nosorh.org Wikispaces: nosorh.wikispaces.com



October 3

- Joint Committee on Rural Emergency Care (JCREC) Committee (3pm EDT)

October 8

- Development Committee (2pm EDT)

October 15

- Policy Committee (2pm EDT)

October 21

- Rural Health Clinic Committee (2pm EDT)

October 22

- Communications Committee (1pm EDT)
- TruServe Learning Community Webinar (3pm EDT)

October 24

- Flex Committee (3pm EDT)

October 28-30

- NOSORH Annual Meeting

Annual Meeting Highlights:

October 28

- New SORH Orientation (9:30-11:30am EDT)

October 29

- FORHP Update, SORH Grant Update (8:30-9:30am EDT) 📞
- FORHP Community Based Division (9:30-10:30am EDT) 📞
- Role of SORHs in Health Insurance Marketplaces (1:30-3:00pm EDT) 📞

October 30

- Rural Health Policy Discussion (8:30-9:45am EDT) 📞
- JCREC Learning Session (1:00-5:00pm EDT)

📞 *Virtual sessions. See [Annual Meeting page](#) for details.*

New SORH Leaders Meet in Rockville



New SORH staff met with NOSORH and HRSA representatives in Rockville, MD, last month. Bottom Row, L to R: Angie Allen, TN; Melinda Merrell, SC; Matt Strycker, NOSORH; Ann Walsh, MD. Top row: Michelle Mills, CO; Gregg Kishaba, HI; Marcia Brand, HRSA; Roslyn Council, NJ; Melissa Lovell, WA; Jill Dean, SD; Brad Denton, TX; Amber Broughton, IN.

Ten State Offices of Rural Health (SORHs) were represented at the meeting of new SORH leaders held at the Health Resources and Services Administration (HRSA) headquarters in Rockville, MD, last month. The New SORH Orientation offers an overview of federal programs, SORHs and rural health organizations.

Attendees were given an overview of the Federal Office of Rural Health Policy (FORHP) and other HRSA programs including the National Health Service Corps and Bureau of Primary Health Care, in addition to other rural health partners like NOSORH and NRHA. "The training was very beneficial," said Melissa Lovell, director of the WA SORH. "Most importantly, meeting people face to face and learning names and each state's issues has allowed me to know who to ask questions of for specific things. Learning what is out there, and how to connect to programs and people is invaluable."

The orientation, offered every year as part of NOSORH's cooperative agreement with FORHP, is a great way for new SORH staff to get to know FORHP and other HRSA and rural programs better, according to Stephanie Hansen, NOSORH Education and Services Director. For more information, contact Hansen at steph@nosorh.org or (208) 375-0407.

New Look for NOSORH—and New Ways to Communicate!



As part of our effort to refresh the NOSORH brand, we are debuting a new logo (seen here). NOSORH's Communications Committee worked with Dovetail

Designs to create a NOSORH logo that reflects rural, collaboration and health, and links NOSORH to National

Rural Health Day. The NOSORH Board approved the logo during its August meeting. The theme for the logo will be incorporated into the public face of all NOSORH communications including the Branch and the updated website, which is on track to be launched by the end of the year.

We are also refreshing and focusing some of our communications, so that we can offer new ways for SORHs to connect with each other and NOSORH:

- **Via text message:** If you're interested in getting updates from NOSORH by text message—contact Donna Pfaendtner, NOSORH Administrator, at donnap@nosorh.org with your text contact information.

- **Via listservs/group texts:** If you want to be part of an email or text group on PCMH or Veterans Health or Rural Health Clinics or Exchanges or Free Clinics, please contact Donna to let her know your interests.

Continuing Resolution Update

As of midnight, September 30th the Congress and President had failed to reach agreement on a Continuing Resolution that would fund all government agencies to continue operations with the advent of the new Fiscal Year. Consequently, many federal agencies have been temporarily closed. All personnel not classified as "excepted" will be sent home later today (October 1st) until further notice.

Medicare and Medicaid payments to providers should not be disrupted by this shutdown, as funding for these programs comes from a Trust Fund

and is not subject to the discretionary spending authority included in the appropriations process. Furthermore, government and contractor personnel responsible for processing and payment of Medicare claims have been classified as "excepted" and will report for work as usual.

Most personnel at the Health Resources and Services Administration (HRSA) and the Federal Office of Rural Health Policy (ORHP) have been classified as "non-excepted" and therefore these agencies will be closed during the duration of the standoff between the President and Congress.

Although not unprecedented, such shutdowns are unusual. The last government shutdown occurred 17 years ago when President Clinton and Congressional Republicans could not agree on spending levels. In the 1980s there were several partial shutdowns of government due to appropriations disagreements between Congressional Democrats and President Reagan.

It is not clear how long the current impasse will last but we will work to keep you abreast of any relevant developments that will lead to a reopening of the government.

Please visit our [News & Events](#) section to learn about these and additional upcoming events.

Response to OIG Report

NRHA is asking SORHs and their partners to urge representatives to sign on to this letter (visit the [NRHA Action Center](#) for congressional contact information). For more information on NRHA efforts, visit the [NRHA Response to the OIG Report](#) web page.

Meanwhile, we would still like to hear from states that are continuing to analyze the [OIG report](#) on Critical Access Hospitals (CAHs).

New Hampshire SORH Participates in State Workforce Commission



Alisa Druzba

Given its emphasis on access to care and workforce development, it was a natural fit for the New Hampshire State Office of Rural Health (NH SORH) to be a part of the NH Legislative Commission on Primary Care Workforce Issues. The five-year commission is working to coordinate workforce as a part of Affordable Care Act (ACA) activities in the state.

“What we’re finding is that because of the ACA, people are very interested in talking about workforce development, when maybe in the past they didn’t have an understanding of these issues,” said Alisa Druzba, director of the NH SORH. “We’re focusing on

using the resources we have in the most efficient manner.” Druzba is the NH Department of Health and Human Services appointee. The Commission also includes individuals who represent medical, oral health, and mental health associations and providers in the state. Additional members have been requested to bring in more diversity and non-rural representation, Druzba said. Commission members meet together on a monthly basis.

“What’s nice is that the Commission has been in a position to readily talk about workforce, and about [Marketplaces](#)—if the state does choose to do Medicaid expansion,” Druzba said.

While Druzba brings the benefit of her expertise to the Commission, there have been benefits for her SORH as well. “When the Commission first started, we put in legislation that identified my office as a health professions data center,” Druzba said. Although the center was not funded, it helped establish the idea in her SORH. “I reallocated my money to bring a data center into existence and was able to hire a staff member this April to get the surveying off and running. We get

to have a leadership role around the kind of data that is collected and can use it more efficiently for shortage designation work.”

Another benefit has sprung from the Commission’s emphasis on using resources efficiently. “I report to them on SORH grants and talk about current uses of funding.” Druzba set up a schedule to discuss SORH-related topics at the Commission meetings, like “What is a patient-centered medical home?” In addition, she has been discussing the difficulty of clinicians obtaining training and residencies in the state, since many sites there are too small to take them on. “There’s been lots of energy around this,” she said. As a result, her Office is helping establish a clinical placement program—a contract went into effect in July. The contracting agency now is looking at how other states are doing this, looking at site education curriculums and the technology for managing it.

“It was just natural for us to take a leadership role when workforce came up,” Druzba said. “It was mostly being ready at the right time.”

Does your SORH have a “Promising Practice”? We’re interested in the innovative, effective and valuable work that SORHs are doing. Contact Beth Blevins, Branch editor, at bethb@nosorh.org to set up a short email or phone interview in which you can tell your story.

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Meeting Between AZ and ND SORHs Creates Ongoing Exchange



Jody Ward



Kevin Driesen

As a relatively new Flex Coordinator at the University of North Dakota Center for Rural Health (ND SORH), Jody Ward wanted to meet with a peer to learn more about effective strategies for her work. Ward decided the best way to do this was to visit another SORH and see a Flex Coordinator in action. To make it happen, she applied for funding from the NOSORH Educational Exchange (EE) program.

Ward has worked at the ND SORH since 2008, starting as a ND CAH Quality Network Coordinator, and has been the Flex Coordinator for the last year. Although she has found Flex conferences and meetings useful, Ward said she still wanted to learn one-on-one. “It’s one thing to be in a workshop and another to be in a work location and see what they’re doing there,” Ward explained. Ward chose the Arizona Center for Rural Health (AZ CRH) for her EE because she had heard great things about Arizona from ND SORH staff, Lynette Dickson and Gary Hart, who previously was the director for the Arizona program. Her mentor in the EE was Kevin Driesen, who has been the director of the AZ CRH Flex Program since 2009. The EE took place for two days in August.

“Kevin was very gracious, and went through the key areas

of the Flex Coordinator position with me,” Ward said. “He demonstrated various tools, including his office work plan and how he puts together Flex monitoring team reports.” Ward also was able to participate in a trauma workgroup, a webinar on the ICD-10 transition, and learn more about Arizona’s telepharmacy infrastructure by meeting with university staff involved with it.

“In North Dakota we help hospitals mentor other hospitals, setting up the training for whatever they want to learn more about,” Ward said. “It’s neat to be on the other end of it—I can’t tell you how valuable that is.”

“I think we ended up with the better end of the stick,” Driesen said. “Jody brings an incredible amount of experience—she brought the ND Flex program matrix and shared quality improvement strategies with our team. We want to schedule Jody to do webinars for us on what they are doing in North Dakota with quality. And as we make plans for our hospital quality workgroup next year, Jody would be at the top of my list for resources to connect with. It’s great to have that lateral exchange.”

“We want to keep this mentoring ongoing,” Ward said. “So we can continue to learn from one another and connect at national meetings, face to face.”

“We were very pleased with the educational exchange and look forward to a lot of future interaction,” Driesen said. “I hope that others take advantage of this opportunity!” Ward added.

NOSORH’s [Educational Exchange Program](#) supports leadership and partnership efforts of SORHs by offering and/or facilitating mentoring, education, information exchanges and training assistance. Applications are available on the [EE web page](#).

Steal This!

This month, New Resources and Webinars, and New Funding are available only in the October 2013 Steal Sheet. Items include:

- Rural Health Network Grant Guidance
- Health IT Webinar Series for Rural Healthcare Providers Begins
- Provider Health Insurance Marketplace Toolkit Now Available
- Rural HIT Workforce Grant Awards Announced
- HHS Launches Meaningful Consent Online Resource

The Steal Sheet also includes selected articles from this issue written in a more generic format, so that they may be used in newsletters, blogs, web pages, etc. NOSORH members are free to use and distribute any item from the Steal Sheet. The October Steal Sheet is available from the NOSORH Steal Sheets section on the [NOSORH Toolkits](#) page.

4th Annual RTT Conclave

Mark your calendars! The [4th Annual RTT Conclave](#) will be held next April (16-18th) in Athens, Ohio. The RTT (Rural Training Track) Conclave will be expanded to include many rural track programs, including medical school and residency, and both allopathic and osteopathic schools. SORHs can learn more about how to support RTT programs and network with RTT leaders. The RTT Conclave is being sponsored by Ohio University Heritage College of Osteopathic Medicine and by the new non-profit RTT Collaborative, an emerging network of individuals and programs committed to sustaining health professions education in rural places. For more information, contact Stephanie Hansen at steph@nosorh.org or (208) 375-0407.

See You in Asheville October 28th



Photo courtesy of [ExploreAsheville.com](#)

This year's NOSORH Annual Meeting is going to be jam-packed with information sessions and opportunities for networking—all in beautiful downtown Asheville, NC. Sessions will include the role of SORHs in Health Insurance Marketplaces, what states are planning for National Rural Health Day 2013, reports from the regions, and breakout sessions on topics including capacity building and promising practices for rural health, Veterans' health, oral health, and data systems for retention and recruitment. In addition, these pre- and post-conference sessions are available:

New SORH Learning Session:

This free session is an opportunity for SORH staffers who are fairly new to their positions or are attending the Annual Meeting for the first time to get together in a small group setting. It starts at 9:30am (before the conference opens at 1pm) on Monday, October 28th. Attendees will learn more about the SORH program, NOSORH and the Rural Assistance Center (RAC). Time will be provided for questions and networking.

EMS Learning Session:

The Joint Committee on Rural Emergency Care (JCREC) is holding a learning session on Wednesday, October 30th from 1-5:00 pm, after the NOSORH Annual Meeting concludes. During the session, participants will learn about and discuss EMS leadership development, rural community paramedicine (also known as Mobile Integrated Care), and more.

It's not too late to register. Discounted room rates are available through October 7th. To register, click [here](#). For more information on the NOSORH Annual Meeting, visit the [Annual Meeting](#) web page or contact Donna Pfaendtner (586) 336-4627.

Rural Health Network Grant Guidance Released

Applications are now being accepted for the Rural Health Network Development (RHND) Grant Program. Fifteen grants, totaling \$4.5 million, are available, each with an award ceiling of \$300,000 per year. Closing date for applications is Nov. 22, 2013. The purpose of the RHND Grant Program is to expand access to, coordinate, and improve the quality of essential health care services, and enhance the delivery of health care in rural areas. These grants support rural providers who work in formal networks to integrate administrative, clinical, technological, and financial functions. Funding should aim to improve the viability of individual partners within the network

and improve the delivery of care to people served by the network. The lead applicant organization must be a public or private non-profit entity located in a rural area. The network must be formal and composed of at least three separate, existing health care providers. For more information, see the [RHND Grant Program announcement](#).

NOSORH recently ran a webinar on this grant opportunity. The [presentation](#) and [viewable recording](#) from the September 17th **Network Development Grant Overview for SORHs** webinar are now available.

Get Your Rural On—Celebrate NRHD 2013!



National Rural Health Day (NRHD) is quickly approaching and NOSORH has a full day of webinars geared to increase the awareness of rural and help our SORHs celebrate.

The popular Rural 101 webinar returns, led by Kristine Sande, Associate Director of the North Dakota Center for Rural Health. Rural 101 is an overview of what rural is, how rural areas and rural health care are different, and the infrastructure that exists to support rural providers and communities. Directors from several State Offices of Rural Health will participate, sharing what it means to be

rural in their states and what makes their state's rural areas unique. Rural 101 is one of several webinars being planned for NRHD 2013. Keep an eye out in the Branch and the NOSORH web page for more information.

This year, our goal is to share as many [Community Success Stories](#) as possible, and "Celebrate the Power of Rural" nationwide. Check out the [Community Success Story "Tip Sheet"](#) for help. Pictures, videos, or audio clips can also be shared. The Community Success Story "Tip Sheet" is just one of a host of materials already available in the [Resources](#) section of the [National Rural Health Day website](#). Also remember to add the NRHD logo to your web pages—click [here](#) to get it.

For more information on NRHD and NRHD events, visit the [NRHD](#) web page. You can also contact NRHD Coordinator Bill Hessert at (814) 231-1213 or billh@nosorh.org for more information.