

The Inside Scoop on the Community-Based Division-Now and Moving Forward

Nisha Patel, MA, CHES

Director, Community-Based Division/FORHP

npatel@hrsa.gov or 301-443-6894



Community-Based Division Programs and Priorities

□ Programs:

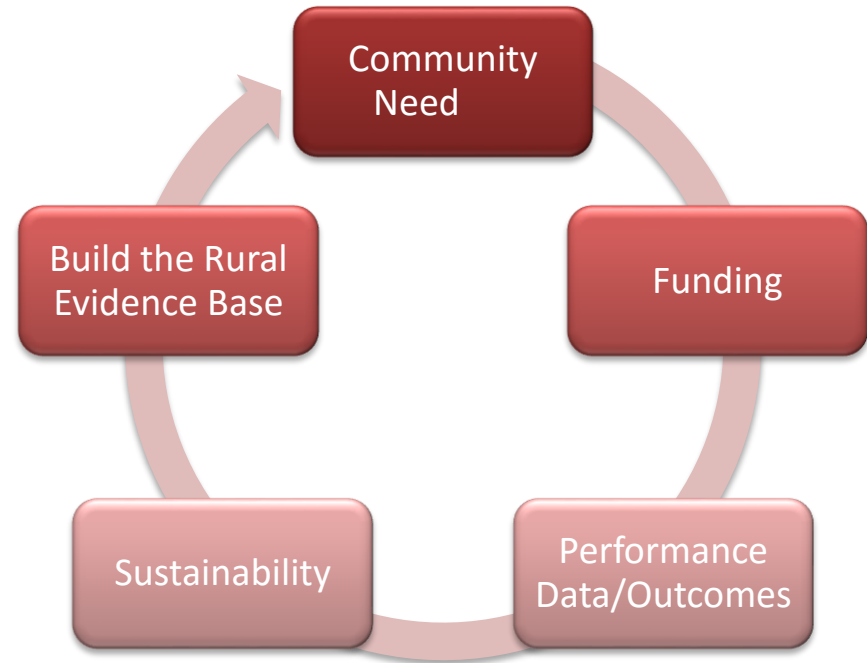
■ 330a of Public Health Service Act (PHS)

- Rural Health Outreach
- Rural Network Development
- Rural Network Planning
- Quality Improvement
- Delta States Network
- HIT/Workforce (pilot)
- Allied Health Training (pilot)
- Care Coordination (pilot)
- Benefits Counseling (pilot)

■ Black Lung & Radiation Exposure Screening Education

■ Rural Access Emergency Devices (RAED)

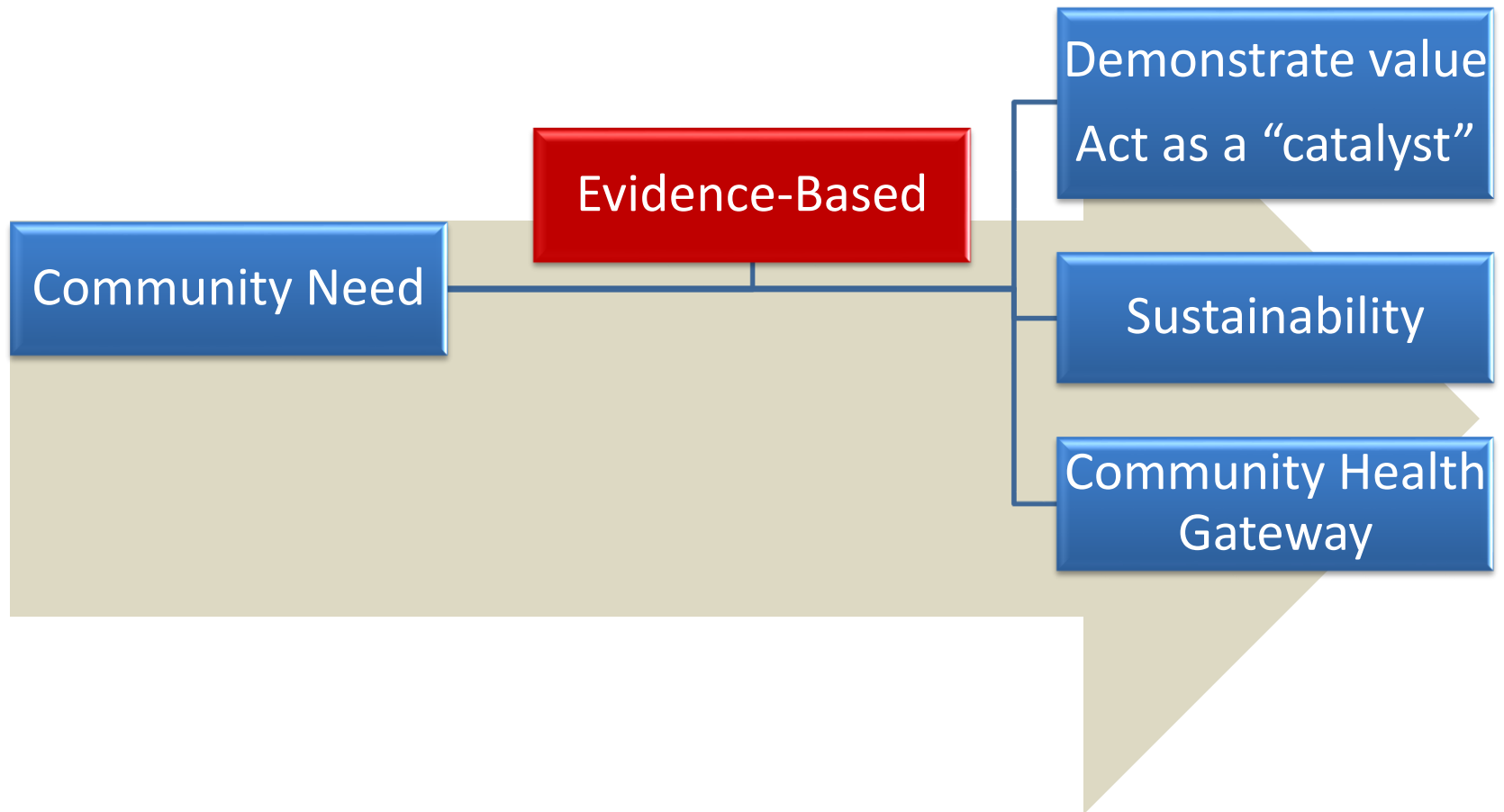
- Opioid Overdose Reversal



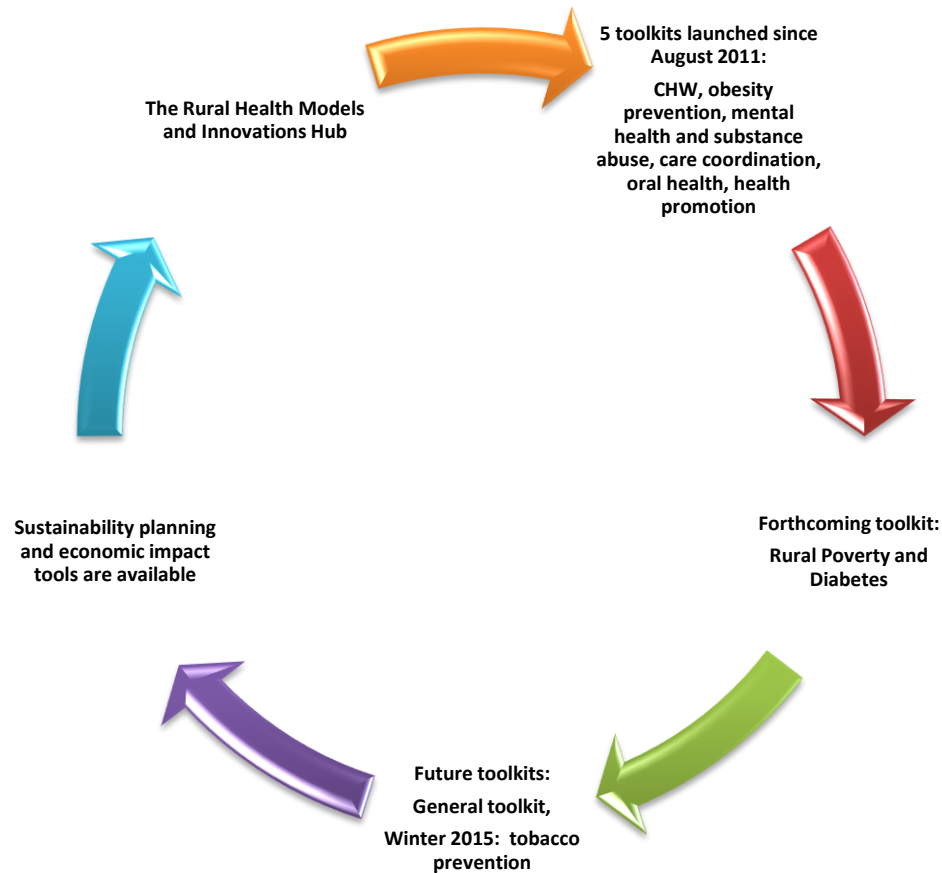
□ 2015 Focus:

- Tell Your Story
- Continue Evidence-Based Approach
- Push for Sustainability
- Measure Performance

Community Health

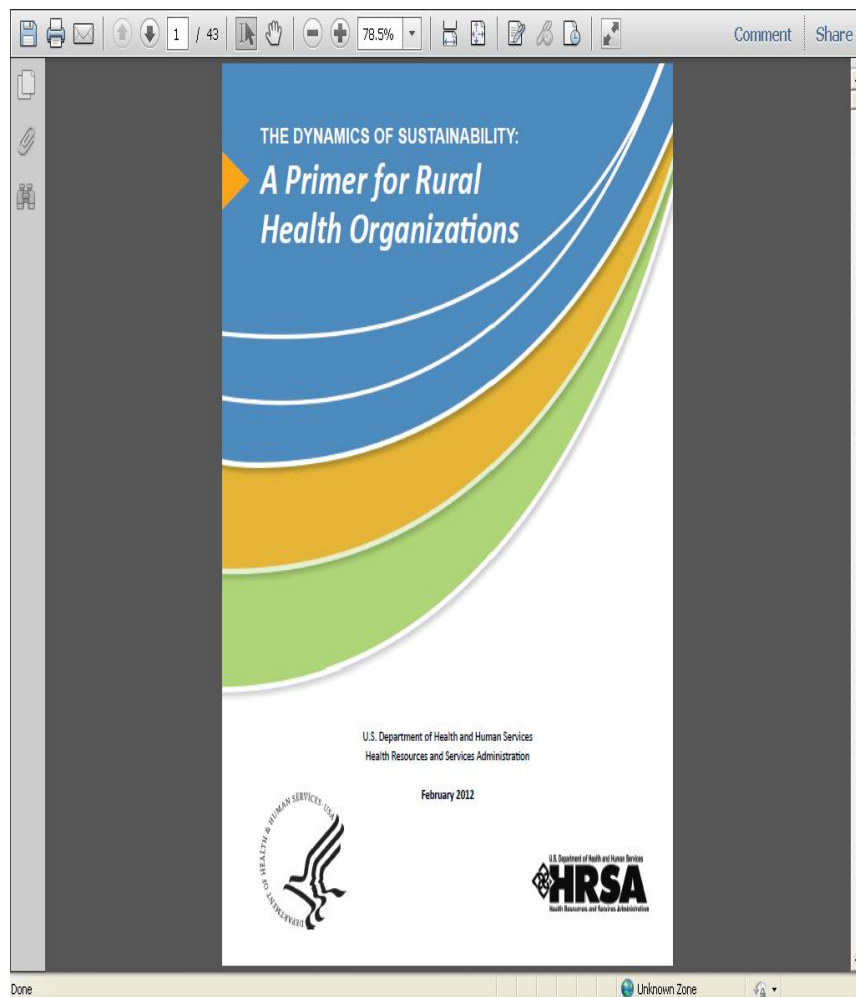


Expansion of the Rural Community Health Gateway



How Will You Sustain Your Program?

- Sustainability Primer
 - ▣ contains information and opportunities for reflection and discussion appropriate for consideration at the initial stage of program implementation.
 - ▣ <http://www.raconline.org/sustainability/>



Key Highlights of 2015

New Awards for Outreach, Network Planning, RAED-OOR, Allied Health Training and Care Coordination Programs

Outreach, Quality and Delta Program supplements for Outreach, Education & Enrollment Efforts

Pilot Program: Rural HIT Lessons Learned

Continue to see sustainability data increase

Expansion of the Rural Community Health Gateway & Rural Health Models and Innovations Hub

- Outreach: 60
- Network Planning: ~15
- Allied Health Training: ~10
- Care Coordination: ~8
- Rural Opioid Reversal: ~18

- Outreach, Quality and Delta Supplements: 57
 - Focus on outreach, education & enrollment
 - Up to \$25,000K per grantee

Reporting Period: September 2014 – January 2015	TOTAL
Number of Grantees	57
Total # of outreach events conducted	1,684
Total # of people educated by general educators	48,521
Total # of newly insured educated on their insurance and benefits	8,612
Total # of people enrolled	8,227
Total additional funding leveraged as a result of this supplemental funding	\$1.3M

FY16 Upcoming CBD Funding Opportunities

Rural Health Network Development Planning

- Align with current health landscape-population health
- Address hospital closure
- Bring key partners together

1 Year Program

Up To \$100,000

November 2015

Small Health Care Provider Quality Improvement

- Develop QI Strategies to Improve Patient Care/Chronic Disease Outcomes
- Improve health indicators and decrease ER visits/admissions to hospital

3 Year Program

Up To \$200,000

December 2015

Delta States Rural Development Network Program

- Delivery of preventative or clinical health services surrounding chronic disease
- Increase access to prescription drugs for the medically indigent
- Align with current health landscape

3 Year Program

Up To \$510,000* Varies by State

January 2016

State Office of Rural Health Role

SORH language under Section 330a PHS Act:

- ▣ “To be eligible to receive a grant, an eligible entity, in consultation with the appropriate SORH or another State entity, shall prepare and submit to the Secretary an application...”

SORH language in 330a program funding opportunity announcements (FOA):

- ▣ Applicants are required to notify the State Office of Rural Health (SORH) of their intent to apply to this program.
- ▣ Applicants must include a copy of the letter or email sent to the SORH, and any response to the letter that has been received, that was submitted to the SORH describing their project

Questions and/or Comments?

