NOSORH's Rural Health Resources

March 17, 2022

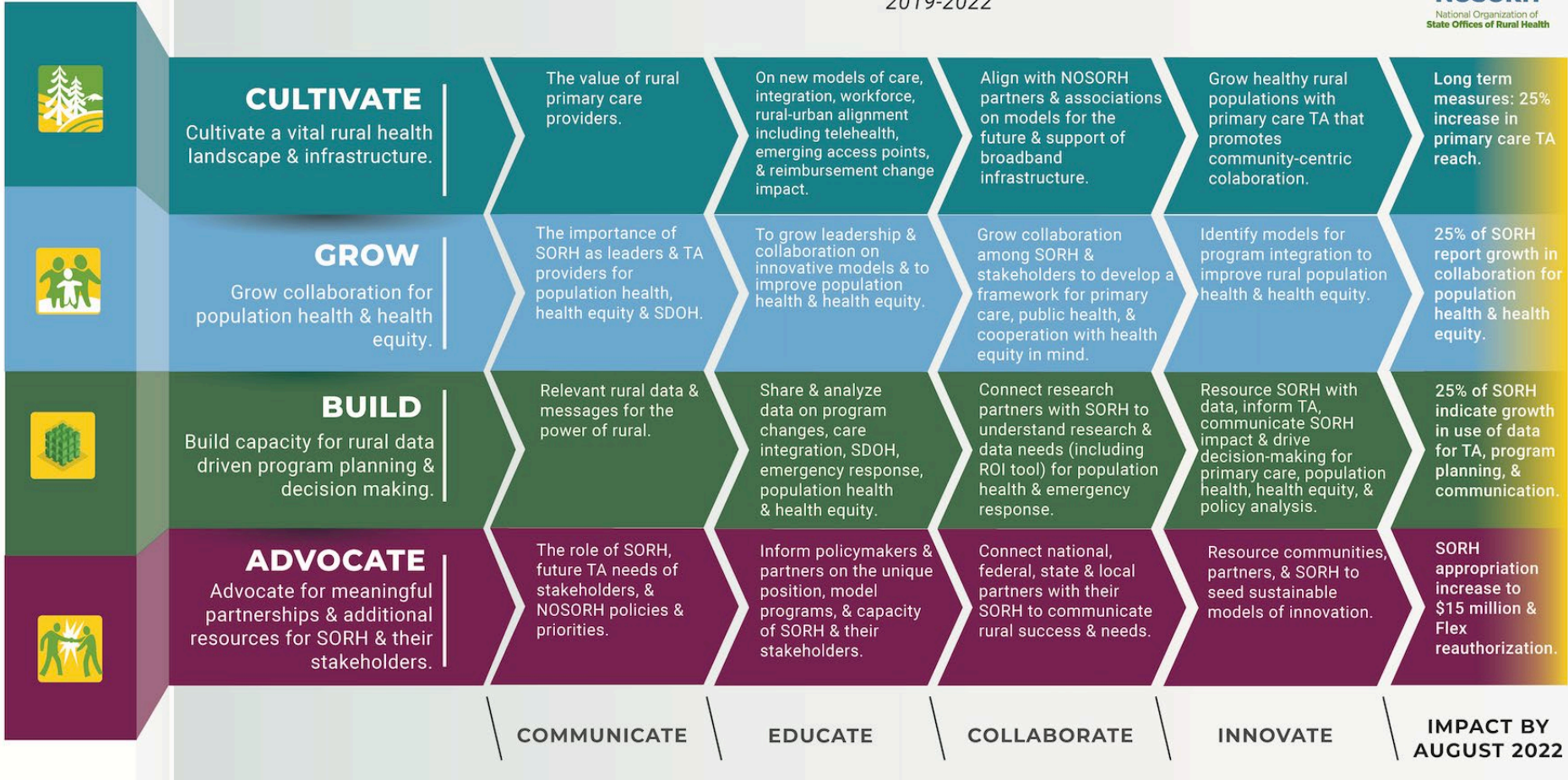# Learning Objectives

1 Locate resources on the NOSORH website

2 Integrate the resources into current SORH efforts

3 Utilize simple methods to share the resources with stakeholders

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POWER OF RURAL - STRATEGIC PLAN
2019-2022

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	COMMUNICATE	EDUCATE	COLLABORATE	INNOVATE	IMPACT BY AUGUST 2022
CULTIVATE Cultivate a vital rural health landscape & infrastructure.	The value of rural primary care providers.	On new models of care, integration, workforce, rural-urban alignment including telehealth, emerging access points, & reimbursement change impact.	Align with NOSORH partners & associations on models for the future & support of broadband infrastructure.	Grow healthy rural populations with primary care TA that promotes community-centric colaboration.	Long term measures: 25% increase in primary care TA reach.
GROW Grow collaboration for population health & health equity.	The importance of SORH as leaders & TA providers for population health, health equity & SDOH.	To grow leadership & collaboration on innovative models & to improve population health & health equity.	Grow collaboration among SORH & stakeholders to develop a framework for primary care, public health, & cooperation with health equity in mind.	Identify models for program integration to improve rural population health & health equity.	25% of SORH report growth in collaboration for population health & health equity.
BUILD Build capacity for rural data driven program planning & decision making.	Relevant rural data & messages for the power of rural.	Share & analyze data on program changes, care integration, SDOH, emergency response, population health & health equity.	Connect research partners with SORH to understand research & data needs (including ROI tool) for population health & emergency response.	Resource SORH with data, inform TA, communicate SORH impact & drive decision-making for primary care, population health, health equity, & policy analysis.	25% of SORH indicate growth in use of data for TA, program planning, & communication.
ADVOCATE Advocate for meaningful partnerships & additional resources for SORH & their stakeholders.	The role of SORH, future TA needs of stakeholders, & NOSORH policies & priorities.	Inform policymakers & partners on the unique position, model programs, & capacity of SORH & their stakeholders.	Connect national, federal, state & local partners with their SORH to communicate rural success & needs.	Resource communities, partners, & SORH to seed sustainable models of innovation.	SORH appropriation increase to $15 million & Flex reauthorization.

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Upcoming Institutes

	Rural Health Data Institute	Beginning early May, registration open now!
	Rural Primary Care Institute	Coming Summer 2022
	Rural Health Leadership Institute	Coming Summer 2022
	Rural Health Grant Writing Institute	Registration opening soon, coming Spring 2022
	Rural Community Development course	Coming Summer 2022

Key Upcoming Dates

- **National Rural EMS & Care Conference** April 19-21, *Virtual*

- **Region A** June 21-23 *Pittsburg, PA*

- **Region B** May 17-19 *Lexington, KY*

- **Region C** July 26-28 *Indianapolis, IN*

- **Region D** June 7-9 *Reno, NV*

- **Region E** July 12-14 *Boise, ID*

- **NOSORH Annual Meeting** October 4-6 *Harrisonburg, Virginia*

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Annual Meeting Sessions
Educating providers and community on rural mental health
The Telehealth Resource Centers response to COVID-19 and Beyond
Adventures on the Journey to Value
Introduction to Graduate Medical Education
Post-pandemic priorities for rural health systems

Webinars
Economic Development for Health Care Leaders, Part One
Improving rural health recruitment and retention through telementoring:
Lessons from the pandemic

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CONNECTIONS
FOR COMMUNITY CARE

Powered by NOSORH

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Tonne McCoy, TAC

- Earned a MS in Psychological Science from Shippensburg University
- Currently pursuing Doctoral work in Experimental Psychology at Idaho State University
- Served the Idaho Bureau of Rural Health and Primary Care for 6 years
- Holds Certified Rural Health Clinic Professional (CRHCP) credentials
- Holds Lean Six Sigma Green Belt status

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Tiered TA - Expected Impact

- Improve overall business literacy of participating rural primary care leaders, SORH team members and other participating stakeholders

- Increase TA and community outreach capacity of SORH

- Evaluate sustainability potential of SORH TA capacity through development of a TA continuity plan, as appropriate

- Establish and/or strengthen relationships with rural primary care providers and rural communities

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TIERED TECHNICAL ASSISTANCE PROGRAM

CONNECTIONS FOR COMMUNITY CARE — Powered by NOSORH

Program Options

Level	Annual Fee	Included Technical Assistance Services*
Tier 1 Project focused	$5,000	• Determination of SORH staff capacity and bandwidth using SORH Proficiencies Benchmarking assessment and SORH self-assessment using RHC – specific matrix, if appropriate • Development of SORH TA continuation strategy (SORH team member or outsourcing), if appropriate • Assessment of rural primary care provider needs/project readiness • Development and implementation of a technical assistance plan/strategy for focused project/identified need(s) • Project specific remote assistance with execution of technical assistance plan/strategy while increasing SORH team capacity • Project specific remote TA offered to rural primary care provider and/or project participants to supplement Local SORH efforts, as needed • TA offered is focused on a single issue such as adding a service line, recruitment, retention, or compliance issue (not an exhaustive list). • Remote TA up to 3 organizations (not to exceed 10 individual rural primary care providers) not participating in the Tier 1 Project
Tier 2 Open ended – general needs	$7,500	All of Tier 1 PLUS - • TA offered to supplement Local SORH efforts, as needed • Remote TA up to 6 organizations (not to exceed 18 individual rural primary care providers) • TA may include workflow, revenue cycle – including coding, billing & documentation, quality metrics, process efficiencies, community development, leadership/management development, etc. (not an exhaustive list) • High level of rural primary care provider engagement with regular contact, as appropriate; enhance rural primary care provider collaboration efforts
Tier 3 For SORH starting primary care engagement and technical assistance. Project focused or more open ended for general needs.	$12,000	All of Tier 2 PLUS - • Remote TA for up to 10 organizations (not to exceed 25 individual rural primary care providers) needing in-depth/hands-on assistance. TA may include workflow, revenue cycle (including coding, billing & documentation), quality metrics, process efficiencies, community development, establishing relationship(s) with rural primary care providers, leadership/management development, etc. (not an exhaustive list) • SORH desire to begin work with rural primary care providers or enhance rural primary care provider engagement • May have limited SORH staff time or new SORH staff • Weekly touch-point calls with SORH & TAD • Other individualized activities as deemed appropriate and necessary based on SORH goals and need

Expected Impact

- Improve overall business literacy of participating rural primary care leaders, SORH team members and other participating stakeholders
- Increase technical assistance and community outreach capacity of SORH
- Evaluate sustainability potential of SORH technical assistance capacity through development of a technical assistance continuity plan, as appropriate

Tiered Technical Assistance

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Primary Care Committee

Members include both SORH staff interested in rural primary care as well as collaborative partners that share like-minded mission and vision

Development and delivery of resources

RELATIONSHIPS

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SEED Groups

Small Education Exchange and Development Groups -
SORH staff that share an interest in a particular topic, gather on mutually agreed schedule, use an "organic" approach to agenda creation and facilitated by a SORH volunteer Coordinator

C3 - Started focused on the RHC COVID-19 Testing Program now includes all RHC COVID-19 Programs
    Fourth (4th) Tuesday of each month at 3 PM ET

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New Webpage!!

[HRSA COVID-19 Funding for Rural Health Clinics](#)

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RHC COVID19 Testing (RHCCTM)

https://www.hrsa.gov/coronavirus/rural-health-clinics/testing

For questions related to the RHCCT: rhccovidtestinginfo@nosorh.org or
RHCCOVID-19Testing@hrsa.gov

- Works directly with RHCs on reporting requirements, allowable and unallowable expenses, etc.
- Partnership with the National Association of Rural Health Clinics for this project.
- Dedicated email address: rhccovidtestinginfo@nosorh.org

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RHC COVID19 Testing and Mitigation(RHCCTM)

https://www.hrsa.gov/coronavirus/rural-health-clinics/testing

For questions related to the RHCCTM: rhccovidtestinginfo@nosorh.org or
RHCCOVID-19Testing@hrsa.gov

- Eligible RHCs received $100K on June 10th, 2021.

- RHCs must continue to report and be registered in the Reporting Portal

- Funds must be expended by December 31, 2022

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RHC Vaccine Confidence (RHCVC) Grant Program

https://www.hrsa.gov/coronavirus/rural-health-clinics/confidence

For questions related to RHCVC: rhcvaxconfidenceinfo@nosorh.org
or
RHCVaxConfidence@hrsa.gov

- RHCVC Frequently asked Questions: https://www.hrsa.gov/coronavirus/rural-health-clinics/confidence/faqs

- RHCs that received the NOA received approximately, $49,529 per RHC.

- You can access your state's <u>current list</u> of awardees from Find Grants (hrsa.gov) Search *Activity Code G29* for RHCVC awardees.

RHC COVID19 Vaccine Distribution(RHCVD)

https://www.hrsa.gov/coronavirus/rural-health-clinics/distribution

For questions related to the RHC COVID-19 Vaccine Distribution Program: RHCVaxDistribution@hrsa.gov

RHC Vaccine Distribution Program (RHCVD) will distribute COVID-19 vaccines directly to RHCs in order to increase the availability of COVID-19 vaccines in rural communities.

The RHCVD Program aims to improve COVID-19 vaccine access and vaccination rates to medically underserved rural communities. Working in partnership with CDC, HRSA invites all Medicare-certified RHCs to join the RHCVD Program to

- RHCs can request any of the 3 vaccines.

- RHCs can receive federal vaccine allocations separate from jurisdictions' weekly allocations.

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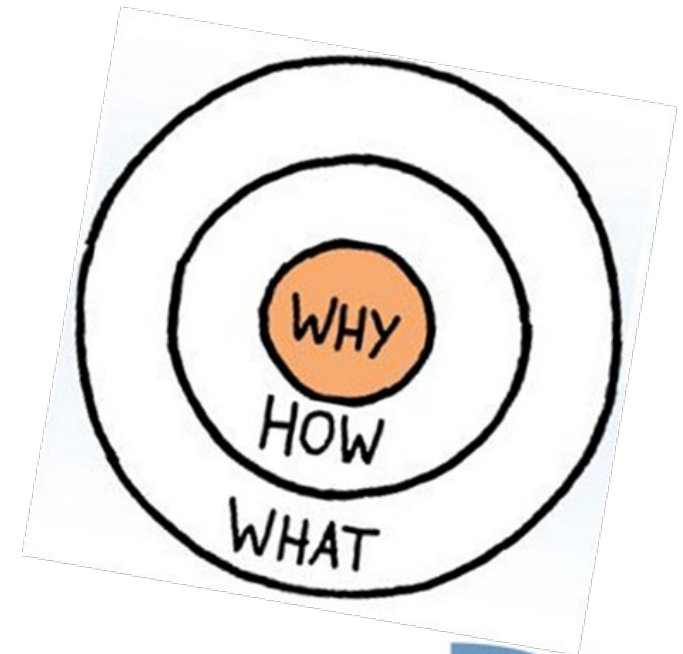
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Coming Soon

Three **Institutes** already mentioned -
      Rural Primary Care Institute
      Rural Health Leadership Institute
      Community Development Course

C3 SEED –   Tuesday, March 22 at 3 PM ET
            Tuesday, April 26 at 3 PM ET
            Tuesday, May 24 at 3 PM ET
            Tuesday, June 28 at 3 PM ET
            Tuesday, July 26 at 2 PM ET

TA Office Hours – Wednesday, June 22 at 2 PM ET

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Importance of Safety Net Providers

RHC & Rural Primary Care Providers are **SPECIAL**

- ➢ **Backbone of healthcare system**
- ➢ **Importance of solid infrastructure**
- ➢ **Patient-centric service delivery**

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Rural Primary Care WHY?

Helping our patients, neighbors and communities become and remain more well.

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How SORH Plug In?

- *RESOLVE* to ensure the rural communities we serve have access to tools and resources needed to meet challenges of the ever-changing landscape

- Stay the course - demonstrating and encouraging self-care and *RESILIENCY*

- Be *READY* to meet rural communities where they are and any challenges that may arise

- Be committed to establishing and nurturing *RELATIONSHIPS* that assist rural communities we serve become and remain more well

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Grow collaboration for population health & health equity.

The importance of SORH as leaders & TA providers for population health, health equity & SDOH.

To grow leadership & collaboration on innovative models & to improve population health & health equity.

Grow collaboration among SORH & stakeholders to develop a framework for primary care, public health, & cooperation with health equity in mind.

Identify models for program integration to improve rural population health & health equity.

25% of SORH report growth in collaboration for population health & health equity.

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Annual Meeting Sessions

Multi-sector rural health partnerships with community development: Moving from ideas to collaboration

LGBTQ 101 for Health Care Professionals

Rural public health: A new focus of SORH

Equitable health communication: Practical strategies to advance rural health objectives

Webinars

Exploring the FORHP Community-based TA Providers

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Upcoming Resources

Resource for SORH supporting Community-Based Organizations (CBOs)

NOSORH engagement: ASTHO Technical Assistance Center for CDC 2103 Health Disparities funding

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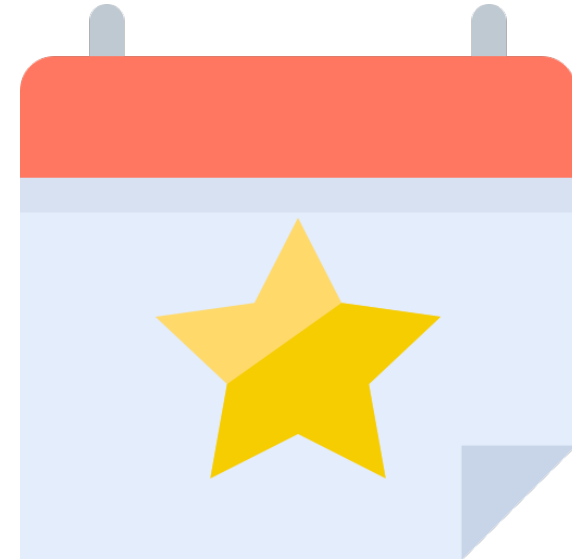25% of SORH indicate growth in use of data for TA, program planning, & communication.

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Webinars and Meeting Sessions
SORH Panel: Strategies for diversifying your funding
Overview of FY22 SORH application instructions

NEW - Data SEED (Evaluation)

Recent PARC Comments
Maternal Care Health Professional Target Areas
All-cause ED Utilization Measure
2023 Qualified Health Plans
NTIA Broadband Expansion

•REC

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Upcoming Activities

SORH Core Proficiencies: Benchmarking Report and Webinar (March 24th)

Brief: Integrating SORH, Flex and SHIP workplans

Current PARC Monitoring: Broadband, HPSAs, and more!

NOSORH Offering: Special projects for Data and SORH Proficiencies

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Webinars/Meeting Sessions
Preparing to engage with Legislators & Policymakers

National Rural Health Day
Community Stars eBook
Fact Sheet: 2021 NRHD Impact

Advocacy
Fact Sheet: SORH Program Appropriations
Fact Sheet: Flex Program Reauthorization

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Mark Your Calendars!

2022 National Rural Health Day
November 17th

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Questions?

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Contact us!

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