

Welcome!

Hospital State Division (HSD) Overview



HSD Mission & Values

Mission

- Enhance access to quality care by supporting states with resources to strengthen the rural health infrastructure.

Vision

- Healthy people living in rural communities in America.

Values

- Integrity
- Relationship building/Partnership
- Adaptability
- Mission-driven

We achieve our mission through:

- Grant Programs to States
- Technical Assistance Support
- Evaluation and Data Analysis

Hospital State Division

People

Flex Team	SORH Team	SHIP Team	Division Leadership
<p>Laura Seifert (State Flex Program Coordinator and TASC TA for Flex); population health program areas</p>	<p>Sarah Ndiang’ui (SORH Program Coordinator and NOSORH)</p>	<p>Krista Mastel (SHIP Program Coordinator and Health Equity Network Planning)</p>	<p>Kristi Martinsen Division Director</p>
<p>Natalia Vargas (RQITA/MBQIP), quality program area</p>	<p>Jessica Sanders (Rural Veterans Health Access Program)</p>	<p>Jeanene Meyers (Rural Healthcare Provider Transitions Project, Vulnerable Rural Hospital Assistance Program)</p>	<p>Rachel Moscato Deputy Division Director</p>
<p>Kathleen Connors de Laguna (Flex Monitoring Team), financial and operational program areas</p>	<p>Suzanne Snyder (Delta Systems Program)</p>	<p>Jason Steele COVID SHIP Testing and Mitigation, Delta Workforce</p>	
<p>Tahleah Chappel (EMS Supplement), EMS program area</p>			

[HSD Project Officer Map](#)



HSD Programs

Supporting States

- **State Offices of Rural Health (SORH)**
 - 50 States
 - \$11 Million
- **Medicare Rural Hospital Flexibility (Flex)**
 - 45 States
 - 6 States EMS supplemental funding
 - \$30.5 Million (\$2 million EMS Supplement)
- **Small Rural Hospital Improvement Grant Program (SHIP)**
 - 46 States
 - \$20 Million
- **Flex Rural Veterans Health Access Program (RVHAP)**
 - 3 States
 - \$850,000

Supporting Grantees

- **Data/Evaluation**
 - Flex Evaluation: Supports Flex Program and CAHs and provides MBQIP Quarterly Reports
- **Technical Assistance**
 - Information Services: Supports Flex Program and SHIP Program grantees
 - Rural Quality TA: Supports Flex Programs MBQIP and CAHs
 - NOSORH: Supports SORH

Supporting Hospitals

- **Delta Region Community Health Systems Development (DRCHSD)**
 - Supporting 27 sites
 - \$10 million
- **Rural Healthcare Provider Transitions Project (RHPTP)**
 - Hospitals and clinics
 - \$800,000
- **Vulnerable Rural Hospitals Assistance Program (VRHAP)**
 - 30 Hospitals
 - \$800,000
- **Delta Region Rural Workforce Training Program**
 - 5 awardees
 - \$2 million

[Visit FORHP Webpage to Learn More about HSD Programs](#)



HSD Programs

State Run Programs



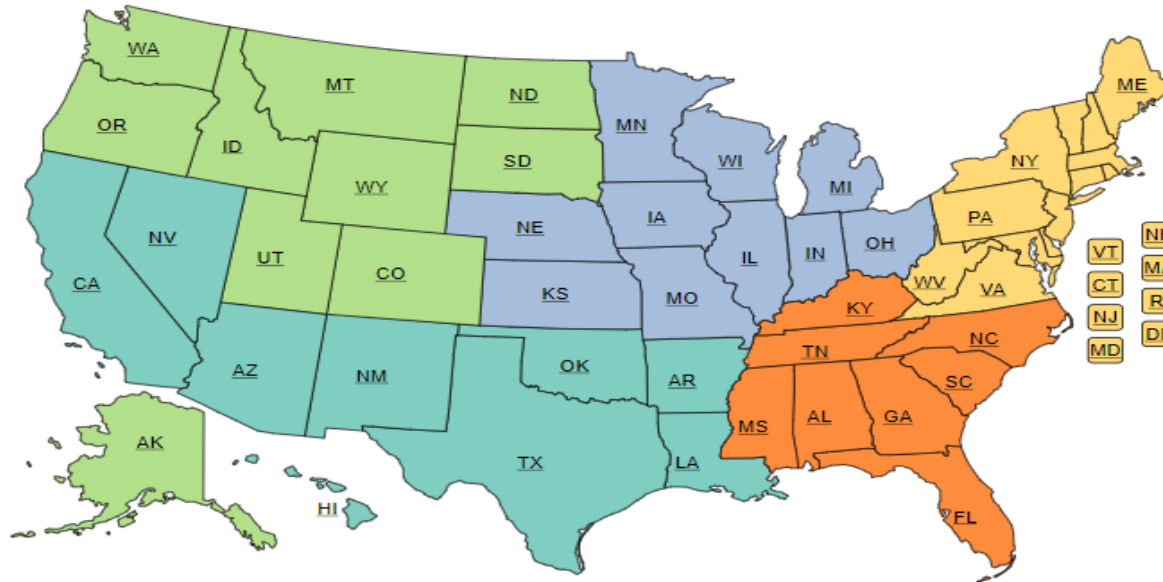
HSD Project Officers

[Home](#) > [Federal Office of Rural Health Policy](#) > [Rural Hospital Programs](#) > Project Officers for Rural Hospital Programs

Project Officers for Rural Hospital Programs

Click a state or use the dropdown menu to see state data

Indiana



Federal Office of Rural Health Policy Regions

See [HHS Regions Map](#)

**Indiana
(Region C)**

SORH Project Officer:
Mikael Redmond
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SHIP Project Officer:
Jeanene Meyers
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FLEX Project Officer:
Tanleah Chappel
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<https://www.hrsa.gov/rural-health/rural-hospitals/region-map.html>



HSD Program Roles

Project Officer

- Monitors portfolio of assigned states within a program
- Exercises programmatic and oversight activities

Program Coordinator

- Provides overall leadership in administration and oversight of the grant programs
- Responsible for program development, review, award and monitoring

State Offices of Rural Health (SORH)

- **Program Coordinator: Sarah Ndiang'ui**

- Jessica Sanders – Project Officer
- Suzanne Snyder – Project Officer
- Sarah Ndiang'ui – Project Officer

- Awards \$11M across 50 states, \$3:\$1 state to federal match

The SORH Program creates a focal point within each State for rural health issues. The program provides an institutional framework that links communities with State and Federal resources to help develop long-term solutions to rural health problems. State Offices of Rural Health support a wide range of activities, depending on the needs of their state. State Offices of Rural Health may support quality improvement networks, loan repayment programs, annual rural health conferences, regular rural health updates, information or technical assistance for grant writing, support for rural health clinics or emergency medical services.



SORH Grantees

- Single grantee in each of 50 States, as designated by the Governor.
- Flexibility in deciding where to locate SORH.
 - 37 in State Health Departments / Agencies
 - 10 in institutes of higher learning (PA, KY, WI, OK, AZ, NV, MT, OR, ND & CT (at community college)
 - 3 are not-for-profit organizations (SC, CO, MI)
 - Several SORH have changed models (OR, OK, MN, CT)
- Many SORH Directors are also State Primary Care Officer (PCO).



Medicare Rural Hospital Flexibility Grant Program (Flex)

- **Program Coordinator: Laura Seifert**

- Tahleah Chappel – Project Officer, EMS Lead
- Natalia Vargas – Project Officer, Quality Lead
- Laura Seifert – Project Officer, Population Health Lead
- Kathleen Connors de Laguna – Project Officer, Financial & Operational Improvement Lead
- Awards \$30M across 45 states and 1360 hospitals (CT, DE, MD, NJ, RI have no CAHs)

Supports Critical Access Hospitals (CAHs) to promote quality and performance improvement including:

- Stabilizing finances
- Integrating emergency medical services into health care systems;
- Incorporating population health
- Fostering innovative models of health care

Under the Flex Program, the **Medicare Beneficiary Quality Improvement Project** ([MBQIP](#)) seeks to improve the quality of care provided in CAHs by facilitating voluntary reporting of quality measures not required by CMS.

States coordinate technical assistance based on the needs of hospitals in their state. Hospitals interested in participating in the Flex Program should contact their State Office of Rural Health to determine program eligibility.



Flex EMS Supplements

- FY 19 – FY21
 - Two Focus Areas: Sustainable models of care and data and quality
 - ✓ States Involved: AZ, OH, SC, WA, FL, KY, NM, ND
 - ✓ \$250,000 each year
 - September 1, 2019 – August 31, 2022
- FY 22 – FY23
 - One Focus Area: Accurate EMS data reporting and quality improvement at the agency level
 - ✓ States Involved: AZ, MI, ND, NM, UT, WA
 - ✓ \$300,000 each year
 - September 1, 2022 – August 31, 2024



Small Rural Hospital Improvement Grant Program (SHIP)

- Program Coordinator: Krista Mastel
 - Jeanene Meyers – Project Officer
 - Krista Mastel – Project Officer
- Awards ~\$20M across 46 states, \$13,011 per hospital, 1665 participating hospitals in FY22
- This program supports eligible small rural hospitals in meeting value-based payment and care goals through purchases of hardware, software, and training. SHIP also assists such hospitals in participating in delivery system reforms such as to become or join a Medicare Shared Savings Program or Accountable Care Organizations (ACOs), participate in other shared saving programs, and purchase health information technology (hardware/software), equipment, and/or training to comply with quality improvement activities such as advancing patient care information, promoting interoperability, and payment bundling.
- All rural short-term general acute care hospitals with 49 beds or less the U.S. states and territories, including faith-based and tribally operated, are eligible. SORHs are the official award recipient of record and act as fiscal intermediaries for hospitals in their states.



Rural Veterans Health Access Program (RVHAP)

- **Program Coordinator: Jessica Sanders**

- Provides funding to States to work with providers and other partners to improve the access to needed health care services and improve the coordination of care for veterans living in rural areas.
- Collaboration with Veterans Rural Health Resource Centers (VRHRC)
- Three objectives:
 - Increasing care coordination
 - Increasing access to mental health services and substance use disorder services
 - Increasing access to crisis intervention services and the detection of PTSD, traumatic brain injury, etc.

- Awardees: Oklahoma, Michigan, Kentucky



SHIP COVID-19 CARES ACT

FORHP Stakeholders: Through grants to states, FORHP is connected to over 1,700 small rural hospitals

- Prospective Payment System hospitals in a rural area with fewer than 50 beds
- Critical Access Hospital – special Medicare designation for enhanced payment

Earlier Activities:

- \$150 million to 1,730 small rural hospitals through CARES Act, and the Small Rural Hospital Improvement Program (SHIP) grantees
- Partner with HHS Preparedness and Response and the Strategic National Stockpile to distribute ventilators to over 1,718 ventilators to 900 small rural hospitals in November 2020



SHIP COVID-19 Testing and Mitigation

Program Coordinator: Jason Steele

Purpose: To maintain and increase COVID-19 testing, expand access to testing for rural residents, and broaden efforts to respond to and mitigate the spread of the virus in ways tailored to their local communities

Funding Information:

- \$398 million to over 1,540 small rural hospitals across the country, state grantees receive \$258,376 per participating hospital
- Hospitals receive funds from the state SHIP grantees
- Rural hospitals with provider based RHCs are eligible to receive both SHIP and RHC Testing and Mitigation awards

Period of Performance: July 1, 2021 – December 31, 2022

Contact: [State Offices of Rural Health](#)



HSD Programs

Programs Supporting State Grantees



Rural Quality Improvement Technical Assistance Cooperative Agreement (RQITA)

- **Program Coordinator: Natalia Vargas**

- Assist Flex grantees with CAH challenges around data reporting and quality improvement through newsletters, toolkits, one-one consultations, and other resources.
- Current Awardee: Stratis Health
- Supports: Flex Programs (MBQIP) and CAHs
- \$600,000/year



Medicare Rural Hospital Flexibility Program Evaluation

- **Program Coordinator: Kathleen Connors de Laguna**

- The Flex Monitoring Team ([FMT](#)) is a consortium of the Rural Health Research Centers at the Universities of Minnesota, North Carolina-Chapel Hill, and Southern Maine.
- Funded by FORHP to evaluate the impact of the Flex program
- Synthesize work plans, CAH quality and financial data
- Creates policy briefs and other reports as informed by data elements
- Develops the quarterly MBQIP reports for all CAHs and State Flex Grantees
- [Critical Health Access Hospital Measurement and Performance Assessment System \(CAHMPAS\)](#)
- Current Awardee: University of Minnesota (lead)
- Supports: Flex Program and CAHs
- \$1,585,000/year



State Offices of Rural Health Coordination and Development Program

- **Program Coordinator: Sarah Ndiang'ui**
 - Supports training and resource development to build capacity of the State Offices of Rural Health
 - Current Awardee: [National Organization of State Offices of Rural Health](#)
 - Supports: SORH grantees
 - \$750,000/year
 - Many programs work with NOSORH to help promote program changes or policy updates. Check with Sarah if you need to make a connection with Tammy Norville, the CEO.



Information Services to Rural Hospital Flexibility Grantees Program

- **Program Coordinator: Rachel Moscato**

- Provides direct and timely information that is easy for Flex Programs to use
- Comprehensive network of rural health resources, a variety of communication tools, education and technical assistance services
- Current Awardee: The Technical Assistance and Services Center ([TASC](#)) at the National Rural Health Resource Center
- Supports: Flex Program and SHIP Program grantees
- \$1.1 million/year



HSD Programs

Support Direct to Rural Hospitals



Rural Healthcare Provider Transition Project (RHPTP)

- **Program Coordinator: Jeanene Meyers**
- Provides TA (no funding) to assist eligible small rural hospitals and rural health clinics (RHCs) in strengthening their foundation in key elements of value-based care, including, but not limited to:
 - Quality
 - Efficiency
 - Patient experience and
 - Safety of care
- Open to eligible small rural hospitals and certified RHCs
- TA Provider - National Rural Health Resource Center
- Applications accepted on a rolling basis, but deadline assigned for each upcoming project year.
- TA begins in January



RHPTP: TA Opportunities

- Focused onsite/virtual TA:
 - Quality Focused TA
 - Financial/Operational Focused TA
 - Coaching to support implementation of best practices and adoption of transition to VBC strategies
 - Peer-to-Peer Learning Collaborative for implementation and sustainability
 - HELP Webinars



Additional TA Opportunities

- Virtual TA – Twenty hospitals and certified RHCs selected annually
 - Four-part Peer-to-Peer Network to promote knowledge base and support readiness for future “focused, onsite/virtual TA”.
- Monthly HELP Webinars on a variety of Advanced Payment Models, and/or Value-based Care topics

Additional information: Rhonda Barcus, Program Manager, rhptp@ruralcenter.org



Delta Region Community Health Systems Development Program (DRCHSD)

- **Program Coordinator: Suzanne Snyder**
 - Enhance healthcare delivery in the Mississippi Delta region through intensive, multi-year technical assistance to healthcare facilities in rural communities.
 - Technical Assistance Focus Areas:
 - Finance and Operations
 - Quality Improvement
 - Telehealth
 - Care Coordination
 - Population Health
 - Integration of Social Services
 - Emergency Medical Services (EMS)
 - Workforce
 - Current Awardee: The National Rural Health Resource Center
 - Amount: \$10 million
 - Supports: Hospitals, clinics, and other health care organizations in the rural Delta Region



Vulnerable Rural Hospitals Assistance Program (VRHAP)

- **Program Coordinator: Jeanene Meyers**

- Purpose: Provide targeted in-depth assistance to rural hospitals within communities struggling to maintain health care services
- Goal: For residents in rural communities to continue to have access to essential health services
 - Find ways to ensure hospitals and communities can keep needed care locally
 - Three types of support:
 - On-site TA (5 hospitals yr.)
 - Remote facilitated assistance (25 hospitals)
 - Self directed access to best practices, resources, and tools.
- Current Awardee: Texas A&M, Center for Optimizing Rural Health
- Amount: \$800,000



Delta Region Rural Workforce Training Program

- **Program Coordinator: Jason Steele**

- Creates strategic networks to educate and train future and current health professionals in the rural counties and parishes of the Mississippi Delta region in critical administrative support occupations.
- Strategic Network supports :
 - Recruitment
 - Formal training
 - Certification; and
 - Placement of students.
- Current Awardees: Louisiana Tech University, Arkansas Rural Health Partnership, Louisiana Primary Care Association, Southern Alabama AHEC, Jackson State Community College
- Amount: \$2.34 million
- Supports: Workforce training programs in the rural Southern Delta Region



Three Prong Approach to Rural Emergency Hospital Technical Assistance

Program Coordinator: Kristi Martinsen

1. National Technical Assistance Center
 - Rural Health Redesign Center: <https://www.rhrco.org/reh-tac>; REHSupport@rhrco.org
 - Resources for broad dissemination; 1:1 assistance throughout the process of conversion
2. Supplement to Medicare Rural Hospital Flex Grantees
 - Outreach and education
3. 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/>

