



The Ohio State Office of Rural Health (SORH) is co-located with the Primary Care Office within the Ohio Department of Health (ODH). The goal of the Ohio SORH is to help rural communities build strong healthcare networks by providing information and technical assistance, by helping to build state and local partnerships, and by encouraging recruitment and retention of providers in rural areas. The Ohio Black Lung Clinics Program, Rural Hospital Flexibility Program (Flex), and Small Rural Hospital Improvement Program (SHIP) are administered through the Ohio SORH.

From the Ohio SORH:

[2013 Statewide Rural Health Conference and Flex Annual Meeting Registration Open](#)

Registration is open for the 2013 Statewide Rural Health Conference and Flex Annual Meeting. The conference will be held at Cherry Valley Lodge in Newark, Ohio on Nov. 21 – 22, 2013. There is no fee to register to attend one or both days. At this year's conference, Dr. Theodore E. Wymyslo, Director of the Ohio Department of Health, will present the opening keynote session on activities to transform the health care delivery system in rural Ohio. The conference will also feature sessions on a variety of key rural-related topics, with break-out tracks for Critical Access Hospitals (CAHs) and other small, rural hospitals; Rural Health Clinics (RHCs) and clinics working toward RHC certification; and local health departments and community-based organizations. By attending, you will expand your rural network and develop new knowledge and skills. You can [register online](#) or visit the [conference Web page](#) for more information, including the conference brochure. Please register by no later than **Nov. 8, 2013**.

[ORHP Released Rural Health Network Development Grant Program \(Reminder\)](#)

The Federal Office of Rural Health Policy (ORHP) recently released the FY 2014 Rural Health Network Development Grant Program (announcement number: HRSA-14-044). This opportunity is for established networks with at least three members. The Network Development Program supports rural integrated health care networks that have combined the functions of the entities participating in the network in order to: achieve efficiencies; expand access to, coordinate, and improve the quality of essential health care services; and strengthen the rural health care system as a whole. The applicant organization must be a public or private non-profit entity located in a rural area [as defined by ORHP](#).

Applicants may propose funding for up to three years from May 1, 2014 to April 30, 2017. The maximum award an applicant can request up to is up to \$300,000 per year. ORHP expects to fund approximately 15 grantees. The application can be downloaded off of www.grants.gov and entering in the announcement number (HRSA-14-044) or by clicking on this link: <http://www.grants.gov/view-opportunity.html?oppld=243713>.

Please note that ORHP will be rescheduling the technical assistance call for this opportunity, which was originally scheduled for Thursday, Oct. 10, 2013. That call was cancelled due to the partial government shutdown. If the deadline is extended, that information will be provided via grants.gov. The original deadline is listed as **Nov. 22, 2013**.

[Critical Access Hospital \(CAH\) Patient Safety Consortium Update](#)

Congratulations to the 20 CAHs that participated in the CAH Patient Safety Consortium! Consortium participants completed significant work and set the foundation for a great collaborative. The project, funded from the ODH Flex Program with the use of Small Rural Hospital Improvement Grant Program (SHIP) Funds, was carried out under a contract with the Ohio Hospital Association's (OHA) Research and Educational Foundation (REF).

For the project, the consortium selected six preventable harm events to monitor, including Methicillin-resistant

Staphylococcus aureus (MRSA), Clostridium difficile (C.diff), Central Line-associated Blood Stream Infections (CLABSI), Catheter-associated Urinary Tract Infections (CAUTI), Surgical Site Infections (SSI) and hand hygiene compliance for hospital staff. OHA led the consortium to develop and deploy the Preventable Harm Index, an information software system to monitor patient safety initiatives. The consortium entered baseline data and successfully deployed the Preventable Harm Index across all 20 participating hospitals on Aug. 15, 2013. OHA plans to continue the consortium and partner with the Flex Program in the future. More information is available [here](#).

[National Health Service Corps 2014 Application Cycle Reminder](#)

The National Health Service Corps (NHSC) [2014 application cycle](#) is open, and the deadline to submit is **Nov. 1, 2013**. This cycle is open: 1) for eligible sites to apply to become approved NHSC sites and 2) for existing NHSC sites with an expiration date on or before Dec. 31, 2013 required to submit a [2014 recertification application](#). To apply as a NHSC site, various [eligibility requirements](#) must be met, including: location within a federally designated [Health Professional Shortage Area \(HPSA\)](#); being an [eligible site type](#), which includes certified RHCs, CAHs, school based clinics and county health departments; offering services on a discount/sliding-fee schedule; and accepting patients covered by Medicare, Medicaid, and the Children's Health Insurance Program.

For RHCs, there is a [one-page NHSC quick guide](#) available. For a CAH to apply, please note that both the CAH and an affiliated outpatient clinic must apply. Both the CAH and the affiliated outpatient clinic must meet the requirements for NHSC sites, and must apply and be approved as NHSC sites. Please see the [NHSC FAQ on CAHs](#) for more information. Additional information is available on the [NHSC website](#).

Across Ohio:

[ODH TV Ads Thank National Health Service Corps Providers for their Service](#)

In honor of the service of National Health Service Corps (NHSC) providers around the state, ODH ran TV commercial tributes on September 11, 2013, the National Day of Service and Remembrance. This special commercial aired on cable networks across the state. View the ads on the [ODH website](#). NHSC providers play a valuable role in improving the health of Ohioans by serving as outstanding healthcare providers within underserved areas. To learn more about the NHSC, visit: www.nhsc.hrsa.gov.

[Two Ohio CAHs Receive Supplemental Outreach Grants](#)

Congratulations to Fostoria Community Hospital and Trinity Hospital Twin City for recently receiving supplemental awards for the Rural Health Care Services Outreach Program from the Federal Office of Rural Health Policy. This funding opportunity is geared toward supporting Affordable Care Act outreach and enrollment activities as related to the Health Insurance Marketplace, to raise awareness of affordable insurance options and provide assistance and information to the uninsured about enrolling in available sources of insurance. The overarching goal is to increase the number of eligible individuals educated about their coverage options and enrollees to the Health Insurance Marketplaces or other available sources of insurance.

[Three Ohio Applicants Receive Small Health Care Provider Quality Improvement Program Awards](#)

Congratulations to three Ohio applicants recently receiving Small Health Care Provider Quality Improvement Grant awards from the Federal Office of Rural Health Policy: Defiance Hospital, Holmes County General Health District and Trinity Hospital Twin City. The grant program aims to improve patient care and chronic disease outcomes by assisting rural primary care providers with the implementation of quality improvement strategies. ProMedica Defiance Regional Hospital (DRH), a CAH in Defiance, Ohio, plans on expanding the interdisciplinary health care team currently led by ProMedica Physician's Group Defiance, a National Committee for Quality Assurance-recognized patient centered medical home, with an innovative nurse-led care navigation model. Holmes County General Health District plans to utilize the chronic care model and establish a multi-agency workgroup for quality improvement. Trinity Hospital Twin City, a CAH located in Tuscarawas County, plans to implement the care improvement model using IT in office-based

group physician practices and to introduce the services of a certified diabetes educator.

[Tri-County Mental Health and Counseling Services, Inc. and Family Health Care, Inc. Announce Merger](#)

Tri-County Mental Health and Counseling Services, Inc., a community mental health center serving Southeast Ohio, and Family Healthcare, Inc., a Federally Qualified Health Center providing primary care, pediatrics and dentistry to Southeast Ohio residents, announced a merger effective July 1, 2013. The new corporation, Hopewell Health Centers, Inc., includes 16 sites across the eight Ohio counties of Athens, Hocking, Jackson, Meigs, Perry, Ross, Vinton, and Washington. The new name was selected in an open contest, with both a Family Healthcare, Inc. patient and a Tri-County counselor entering the name “Hopewell,” in reference to the Native American people who lived in the region. History suggests that the Hopewell people were known for settling conflict through peaceful resolution and collaboration. The goal of the merger is to promote integration of primary care and mental health services for Southeast Ohioans. More information is available [online](#).

[Morrow County Hospital Hosts 2013 GuardCare](#)

The 2013 GuardCare held during August was hosted by Morrow County Hospital, A CAH located in Mount Gilead. This year’s event was sponsored by the Morrow County Health Department, Morrow County Hospital and the Ohio Department of Health (ODH). Ohio’s GuardCare program is an annual event coordinated in partnership with the Ohio Adjutant General’s Department and ODH that allows Ohio National Guard (ONG) medical personnel to provide free health services to Ohio communities, while providing training and professional development opportunities for ONG members. This year’s event resulted in the provision of free health services to more than 790 residents, including physicals, immunizations, dental screenings, STD and HIV testing, complete blood work profiles and mammograms. Ohio GuardCare recently released an [infographic](#) of this year’s event, and additional information about the program is available on the [ONG website](#).

[Ohio’s Health Centers Receive Funding for Health Insurance Outreach and Enrollment Assistance](#)

July 10, 2013 - Ohio’s health centers received a total of \$3,908,021 from HRSA for health insurance outreach and enrollment assistance. Ohio has 36 health centers with 183 sites that served 495,432 patients last year, 32.75 percent of them uninsured. With their outreach and enrollment funding, the health centers expect to hire 75 additional workers, who will assist 84,439 people with enrollment into affordable health insurance coverage. With these awards, consumers will get help understanding their coverage options through the new Health Insurance Marketplace, Medicaid and the Children’s Health Insurance Program; determine their eligibility and what financial help they can get; and enroll in new affordable health coverage options.

National News:

[CMS Proposes Rule to Establish Medicare FQHC PPS and Broaden RHC Non-physician Practitioner Contracting Policies](#)

Sept. 23, 2013 – The Centers for Medicare and Medicaid Services (CMS) published a proposed rule in the Federal Register describing details of the pending Prospective Payment System (PPS) for Federally Qualified Health Centers, developed in response to a mandate established in the Patient Protection and Affordable Care Act of 2010. The FQHC PPS is set to become effective for cost reporting periods beginning on or after Oct. 1, 2014. The proposed rule would also allow Rural Health Clinics (RHCs) to contract with non-physician practitioners, if the RHC has at least one Nurse Practitioner (NP) or Physician Assistant (PA) employed by the clinic. To review the full proposed rule, [clinic here](#). Comments must be received by no later than 5 p.m. on Nov. 18, 2013. You can also read an article by Bill Finerfrock, Executive Director of the National Association of Rural Health Clinics (NARHC) on the proposed rule included in the [Fall 2013 Edition of the NARHC newsletter](#).

[Robert Graham Center Releases Primary Care Workforce Projections by State for the Next 25 Years](#)

The AAFP’s Robert Graham Center for Policy Studies in Family Medicine and Primary Care recently issued primary care

physician workforce projections for each state for the next 25 years. The two-page [report](#) for Ohio projects a need for an additional 681 primary care physicians by 2030.

[What to Watch as Health Law Takes Effect](#)

Oct. 1, 2013 – This article from *the Daily Yonder* includes interviews with rural health experts on implementation of major provisions of the Patient Protection and Affordable Care Act, including the insurance marketplaces.

[NRHA calls for EHR extension](#)

NRHA has joined members of Congress and other entities in requesting a one-year extension of the requirements for stage 2 of the Electronic Health Records Meaningful Use Incentive Program for providers who need additional time for compliance. "The challenges of rural care delivery — including limited resources, technical support and vendor access — make it extraordinarily difficult for many rural providers to meet the implementation timeline," says NRHA CEO Alan Morgan.

Resources:

[Dispensary of Hope works with healthcare providers and clinics to provide uninsured and low-income patients with prescription medication](#)

The Dispensary of Hope (DoH), a 501(c)3 charity, is a licensed medication distributor that recovers donated surplus medication from physician offices, hospital pharmacies, manufacturers and other licensed healthcare providers. It inventories and tracks the medications in its Nashville-based center before distributing them through a national network of licensed nonprofit clinics and outpatient charitable pharmacies. These include local health departments, nonprofit primary care clinics and mental health clinics, free clinics, Federally Qualified Health Centers and FQHC Look-Alikes. The medications are offered to patients who are uninsured and who have incomes under 200 percent of the Federal Poverty Level. Annually, DoH moves about \$18 million worth of medications. DoH is operated by Saint Thomas Health, an affiliate of Ascension Health, the nation's largest nonprofit and largest Catholic Health System. Currently, DoH is Board of Pharmacy-approved to send medication to clinics and pharmacies in 32 states, including Ohio.

DoH is funded by foundations, grants, and subscription fees from members of its network. The in-network subscription fee for unlimited amounts of medications is \$7,500 a year. During 2012, in-network clinics received an average of \$102,000 worth of medications, according to Anita Stanford, Director of DoH Site Network Development. In addition, DoH offers a free, non-subscription program for reduced-price diabetic supplies including meters, strips, and other control solutions. For more information or to find out how to join the network, visit <http://www.dispensaryofhope.org/>.

[Rural Oral Health Toolkit Released](#)

The Rural Assistance Center (RAC) and NORC Walsh Center for Rural Health Analysis released a new Rural Oral Health Toolkit to help rural communities improve access to oral health care. This toolkit contains resources to help communities develop oral health programs, building on best practices of successful oral health program models. The Rural Oral Health Toolkit contains seven modules with information and links to resources, websites, publications and tools such as evaluation strategies.

[Pediatric Medical Home "How To" Video Series](#)

Transforming a pediatric practice to the medical home model of care can be a complicated process. With the release of three new instructional videos, the [National Center for Medical Home Implementation](#) (NCMHI) aims to make that transformation easier and more understandable. Each video provides useful ideas and can be viewed in less than 10 minutes. Videos include: [Creating Efficiency: Team Huddles](#), [Building a Stronger Pediatric Medical Home: Family Advisory Groups](#), and [Enhancing Collaboration with Families: Care Partnership Support](#). NCMHI also offers an [online toolkit](#) to support development and/or improvement of a pediatric medical home, which includes a How to Begin video tutorial.

[Ohio Senior Health Insurance Information Program](#)

The Ohio Senior Health Insurance Information Program (OSHIIP) administered by the Ohio Department of Insurance provides information for hospitals, community case managers, social workers, discharge planners, outreach workers and financial counselors on Medicare. Individuals can be trained as OSHIIP volunteers and gain expert knowledge to both assist Medicare beneficiaries and ensure providers are maximizing Medicare resources.

National Policy and Research in Brief:

[Rates of Black Lung Disease in Relationship to Black Lung Treatment Centers \(Policy Brief\)](#)

Aug. 2013 – The West Virginia Rural Health Research Center released a [report](#) (10 pages) and [policy brief](#) (seven pages) and that investigates the rates of black lung disease among active miners in relationship to the location of Health Resources and Services Administration (HRSA)-funded Black Lung Clinics.

[Accountable Care Organizations in Rural America](#)

July 2013 - This rural policy brief from the RUPRI Center for Rural Health Policy Analysis reports that Medicare Accountable Care Organizations (ACOs) currently operate in 17.5 percent of all U.S. non-metropolitan counties, including Medicare ACOs operating exclusively in non-metropolitan counties. The implications of ACOs for rural providers are also described, as ACO participants must direct attention to increasing clinical quality, improving patient experience, and lowering cost of care.

[The Uninsured: An Analysis by Income and Geography](#)

June 2013 - This rural policy brief from the RUPRI Center for Rural Health Policy Analysis reports that a larger proportion of the rural population than the urban population is uninsured and low income. A larger proportion of the rural population than the urban population will be eligible for subsidized Health Insurance Marketplace coverage due to income levels and current lack of insurance.

[Promotion and Protection of Rural Miner Health: Are the Resources in Place?](#)

June 2013 – The West Virginia Rural Health Research Center has released a [report](#) (23 pages) and [policy brief](#) (12 pages) on mining communities access to care in terms of locations of rural safety net providers and the capacity of the safety net to prevent, diagnose and treat mining related injury and illness.

[Rural Implications of the Primary Care Incentive Payment Program](#)

June 2013 - This brief from the RUPRI Center for Rural Health Policy Analysis reports on eligibility among rural primary care providers for the Primary Care Incentive Payments established in the Patient Protection and Affordable Care Act. According to the brief, for most practice types, rural providers were more likely to be eligible than urban counterparts, although rural family practice physicians were less likely to be eligible.

[Accountable Care Organizations: benefits and barriers as perceived by Rural Health Clinic management](#)

June 28, 2013 – This article published in the journal *Rural and Remote Health* reports on the results of a survey, focus groups, and phone interviews with RHC management personnel on the subject of benefits of and barriers to RHC participation in ACOs.

Upcoming Events:

- Nov. 21 – 22, 2013 [2013 Ohio Statewide Rural Health Conference and Flex Annual Meeting](#)
Registration is open for the 2013 Statewide Rural Health Conference and Flex Annual Meeting. The conference will be held at Cherry Valley Lodge in Newark, Ohio, and there is no fee to register. The first day of the conference will coincide with the third annual National Rural Health Day, being celebrated on Thursday, Nov. 21. Please visit the [conference Web page](#) for more information or to register. Please register by Nov. 8, 2013.
- Nov. 12, 2013 [Genesis Black Lung and Respiratory Clinic - Better Breathers Club](#)
The November meeting of the Better Breathers Club held by the Genesis Black Lung and Respiratory Health Clinic will be from 1:30 to 3:00 p.m. on Tuesday, Nov. 12 in the Genesis HealthPlex, 2800 Maple Avenue in Zanesville, Conference Rooms A and B. The speaker, Cathy Blair, CNP with Genesis Wellness will be discussing the flu, and Joyce Bates from Rambo Memorial will provide flu shots if available. Please RSVP by Nov. 5 for a flu shot.
- Nov. 13, 2013 [Coal Miners Health Fair](#)
The Genesis Black Lung and Respiratory Health Clinic will be holding a Coal Miners Health Fair on Nov. 13, 2013 from 9 a.m. to noon at the Muskingum County Center for Seniors in Zanesville. This event is geared toward active or retired coal miners and anyone who has ever been exposed to coal dust through employment, but it is open to any adult. Free screenings will be available, and a nurse practitioner will review results. The Department of Labor will help fill out applications and answer questions about black lung benefits. Registration is not necessary. For more information, call the Genesis Black Lung & Respiratory Health Clinic at 740-454-4328.
- Dec. 6, 2013 [Genesis Black Lung and Respiratory Clinic - Better Breathers Club](#)
The December meeting of the Better Breathers Club held by the Genesis Black Lung and Respiratory Health Clinic will be from 1:30 to 2:30 p.m. on Friday, December 6 in the Genesis HealthPlex, 2800 Maple Avenue in Zanesville, Conference Rooms A and B. The speaker will be Rhonda Forrestal, PT, with the Genesis Center for Occupational and Outpatient Rehabilitation.

Send Us Your Suggestions:

We would love to hear about local events, news and story ideas for the quarterly rural health newsletter. If **you have a suggestion** you would like considered, please send it to jennifer.jones@odh.ohio.gov.

To subscribe to the Rural Health Listserv, unsubscribe, or change your subscribed email address, please contact Jennifer Jones at jennifer.jones@odh.ohio.gov.

*Ohio Department of Health
Bureau of Community Health Services &
Patient-Centered Primary Care
246 N. High Street
Columbus, OH 43215
Phone: 614-995-5556
Fax: 614-995-4235*

<http://www.odh.ohio.gov/SORH>