

CAH Recruitment and Retention Workshop Review

The Office of Rural Health Flex Program sponsored a Recruitment and Retention Workshop for Critical Access Hospitals (CAHs) August 14 and 15, 2003 in Eugene, Oregon. The workshop focused on recruitment and retention issues for Critical Access Hospitals.

Critical Access Hospital Recruitment and Retention Reimbursement

Critical Access Hospitals can be reimbursed for the costs of recruitment and retention activities.

According to the Centers for Medicare and Medicaid Service's Hospital Manual, section 404.3, Other Educational Programs: "An example of an educational program for which costs may be allowable is a program where nurses are sent to college to obtain Bachelor of Science degrees in nursing, related health care fields, or other advanced training courses in such subjects on the condition that they work for the hospital for a specific period following completion of the program."

For many just completing their medical education training now, the promise of future training is a good recruitment tool.

The Hospital manual also states under section 2136.1, Allowable Advertising Costs, "Costs of advertising for the purpose of recruiting medical, paramedical, administrative and clerical personnel are allowable if the personnel would be involved in patient care activities or in the development and maintenance of the facility." This is a good tool to use if your facility is regularly paying out of general funds for advertisement in the paper or on-line while searching for a provider.

These reimbursable expenses can help enhance the recruitment and retention programs of Critical Access Hospitals, which may not have the funds for education programs or increased advertising.

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Dear "Aunt Sandy"

Your recruitment questions answered



Dear "Aunt Sandy":

I provide the only family practice services to a small rural community through my privately owned clinic. I am happy to serve this community and love living here. The problem is that I see a high proportion of Medicaid patients and I am not covering my expenses. Is there something I can do so I don't end up moving?

Signed,
Help Keep Me Here

Dear "Help Keep Me Here":

Sadly, insufficient Medicaid (or Medicare) reimbursement can be factor in the failure of rural practices. If this is affecting your practice, there is hope. There may be help to remedy the situation. Have you ever considered receiving status as a Rural Health Clinic? Rural Health Clinics (RHCs) were established by Public Law 95-210, the Rural Health Clinic Service Act, in 1977. The purpose of RHCs is to increase primary care services for Medicaid and Medicare patients in rural communities. RHCs can operate as public, private, or non-profit. The main benefit of receiving RHC status is enhanced reimbursement. In fact, since 2001, Medicaid is required to pay 100% of reasonable costs. The main requirements to obtain RHC status include:

- The clinic is located in a "Rural Area" as designated by the U.S. Census Bureau. It must also be located in a Health Professional Shortage Area (HPSA), Medically Underserved Area (MUA), or receive special designation as an underserved area by the state Governor.
- The clinic must employ a mid-level practitioner at least 50% of the time the RHC operates. Examples include a

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Determining Demand

Paul McGinnis, of the Office of Rural Health, offered a practical, hands-on presentation regarding the demand for providers.

McGinnis has developed tools to help communities determine how much business a provider must do in order to stay solvent. He provided several formulas which, when used with recent population data, can determine the number of patient visits needed to stay in business, and the what the potential is for increased business.

This recruitment and retention tool can offer potential providers a financial look into their future.



Paul McGinnis, Office of Rural Health, explains physician demand formulas.

'younger' generation will be drawn to, candidates who use the web to gather information about opportunities and communities. The participants experienced the hurdles to gathering information electronically by looking at provider opportunities from medical facility web sites throughout the U.S. The group brainstormed ways to look at their own web sites from the perspective of an outsider, and judge its friendliness, usability, and accessibility.

Dr. Cullinan discussed the significance of looking for someone who will fit into the community and can bring fresh ideas and energy about upcoming growth and change. Many participants remarked on the importance of being candid about the community with prospective providers. She reminded the participants that, not only do they have to sell a rural opportunity, they also have to sell the rural lifestyle.



Nancy Abrams, Dia Shuhart, and Susan Taylor discuss Shortage Designations and Loan Repayment Programs.

If you would like to utilize these tools, please contact Emerson Ong, Data Coordinator at the Office of Rural Health, 503-494-4450, toll-free at 866-674-4376, or via email at ong@ohsu.edu.

Thinking Outside the Box for Rural Recruitment

Cristine Clifford Cullinan, Ph.D. led an interactive session with a special focus on the experience of the candidate. She talked about using recruitment tools that a

The ideas for retention the group came up with included having a flexible management style, 're-hiring' your best employees and doing retention interviews. Dr. Cullinan discussed the importance of making sure your employees know they are appreciated and how their current position adds to the organization as a whole.

Overview of Shortage Designations and Recruitment and Retention Programs

Nancy Abrams, Oregon Department of Human Services, gave information and answered questions about the federal shortage designations and the National Health Service Corps programs that are part of the federal Department of Health and Human Services programs to encourage recruitment of providers to rural areas. Information on the National Health Service Corps can be found at <http://nhsc.bhpr.hrsa.gov/>.

Dia Shuhart, DHS Physician Visa Waiver Program, spoke on the new Oregon Conrad 30 Program which takes the place of the former USDA sponsored J-1 Visa Waiver program. She explained the implementation process for the new program. The new program will enable J-1 Visa Waiver holders to work in the state of Oregon under contract with the Oregon Department of Human Services for a minimum of three years. Conrad 30 is for facilities that have been looking for a provider for six or more months. The web site for the Oregon Conrad 30 Program is www.dhs.state.or.us/publichealth/hsp/conrad/index.cfm.

Susan Taylor, Oregon Student Assistance Commission, talked about the Oregon Rural Health Services Loan Repayment Program. The program was created to encourage physicians, nurse practitioners and physician assistants to practice in areas with unmet health care needs. This repayment program focuses on primary care providers. In exchange for service in qualifying locations, participants receive annual payments towards student loan principal borrowed for their professional education. Annual payments may be up to \$25,000, if warranted by the qualifying student loans of a participant. More information can be found on the Oregon Student Assistance Commission web site at www.osac.state.or.us.

Material and information from the workshop is available from the Office of Rural Health. Please feel free to contact the Office of Rural Health, toll-free at 866-674-4376.

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physician assistant, certified nurse mid-wife, or nurse practitioner.

- Must provide outpatient primary care.
- The clinic must be under the medical direction of a physician, who must be on site at least once every two weeks.
- Must provide six basic lab tests on site.
- Must be clean and handicapped accessible.
- Must have a current and applicable policy and procedures manual.
- Drugs and samples must be stored safely.
- Adequate medical records must be maintained for six years.

Still have questions about the requirements to be a Rural Health Clinic? Our web site provides further details at: www.ohsu.edu/oregonruralhealth/addtlruralclinicinfo.pdf

If you are interested in RHC status you should contact:

- 1) The State Health Division at 503-731-4002, ext. 885, to determine if the location meets RHC qualifications.
- 2) For Rural Health Clinic forms, contact John Pilmer, Client Care Compliance Specialist at the Health Care Licensure and Certification Department, 503-731-4013.
- 3) If your location has been approved contact Troy Soenen, (503) 494-4450, Office of Rural Health, for further assistance.

Make it pay to stay!

Aunt Sandy

For recruitment and retention technical assistance, feel free to contact Office of Rural Health toll-free at 866-674-4376. Please fax your questions for Aunt Sandy to 503-494-4798.

A Recruitment & Retention Success Story

At the Recruitment and Retention Workshop, *Harold Brown, CEO, Prairie Du Chien Memorial Hospital, Prairie Du Chien, WI* gave a presentation titled *Rural Innovative Approaches to Developing a Healthcare Workforce*. Mr. Brown's enthusiasm for developing and implementing a successful recruitment and retention program was contagious.

Prairie Du Chien has the lowest turnover rate of the eighteen rural hospitals in Wisconsin, and the hospital boasts a 5-year retention rate of 71.4%. Mr. Brown credits this high rate to his "Grow Your Own" recruitment program and a variety of innovative retention programs.

Prairie Du Chien starts recruitment programs at the elementary school level and continues working with students through high school. Local school teachers are invited to spend their summers working in the hospital to learn about health care careers. They, in turn, encourage their students to pursue careers in health care.

The hospital scholarship program grants money to current health professions students, which they will not have to pay back if they take a job at Prairie Du Chien. If the student decides not to pursue a health professions degree, or becomes employed elsewhere, the 'scholarship' becomes a loan that the student must pay back to the hospital. If a position at the hospital is not available, the loan is forgiven.

The hospital retains employees through a variety of programs such as childcare, wellness, and smoking cessation. Mr. Brown offers employees a higher than average wage and benefit package, which includes a retirement plan with a 6% match from the hospital. Employees participate on advisory teams and in quarterly meetings where feedback is invited. Outstanding efforts by employees receive recognition at these meetings. Employees are given a financial reward when quarterly operations gains are met.

Mr. Brown provided excellent ideas and evidence that recruitment and retention can be implemented successfully in rural communities. For more information on recruitment and retention services, please contact the Office of Rural Health at 503-494-4450, or toll-free 866-674-4376.

**The HERO Program at the
Oregon Office of Rural Health
would like to hear from you!**

Call us at:
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