

Rural Health Conference Covers Primary Healthcare Issues Around The State

The **20th Annual Oregon Rural Health Conference**, sponsored by Oregon Health & Science University Office of Rural Health, Oregon Association of Hospitals and Health Systems and the Oregon Rural Health Association was held October 2 – 4, 2003 in Newport, Oregon at the Best Western Agate Beach Inn.

Peter O. Kohler, M.D., President, Oregon Health & Science University, gave the welcome and opening remarks. Dr. Kohler emphasized OHSU's commitment to rural Oregon by saying "OHSU is proud to be a partner with rural communities throughout Oregon to promote the health and well being of all Oregonians. Over the past 15 years, OHSU has committed to the idea of a 96,000 square mile campus covering all of Oregon. And we intend to keep that commitment."

Over lunch, participants listened to *Bill Finerfrock*, Director, National Rural Health Clinic Association and *Bruce Goldberg, M.D.*, Director, Office for Oregon Health Policy and Research, speak about limited rural health resources and where they can make the most impact.

Marilyn Grey invigorated participants with an energetic presentation about *Celebration and the Art of Living Well* on Saturday morning. With humor and levity, Ms. Grey encouraged conference goers to celebrate everyday events and enjoy a zest

for life by honoring the experiences of courage, daring, and spontaneity that happen in our work.

L.J. Fagnan, M.D., Medical Director, OHSU School of Medicine, Department of Family Medicine and Director of the Oregon Rural Practice-based Research Network (ORPRN), discussed primary care practice-based research networks, their advantages, applications, and Oregon's network in particular. Participants learned about the goals and advantages of ORPRN, and about the Translating Research Into Practice (TRIP) program, which emphasizes translation of research into practice and behavioral changes in staff, clinicians and patients.

Several workshops were held preceding the Conference for attendees new to rural health. An orientation session, *Rural Health 101*, presented by *Karen Whitaker*, Vice Provost and Director, OHSU Center for Rural Health, offered a valuable introduction to pertinent information on rural health care in Oregon. This presentation, informative for all from clerical staff to board members, is available on the Office of Rural Health web site, www.ohsu.edu/oregonruralhealth. The *Oregon AHEC Workforce Summit* focused

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Rural Medical Liability Reinsurance Program

The Office of Rural Health (ORH) is pleased to participate in the Rural Medical Liability Reinsurance Program that took effect January 1, 2004. Oregon's 2003 Legislature passed HB3630 in an effort to insure that rural Oregonians will have access to needed health care by providing relief to rural physicians experiencing skyrocketing liability premiums. The Office of Rural Health is partnering with the State Accident Insurance Fund (SAIF) to administer the program.

House Bill 3630 created a mechanism to pay a portion of professional liability insurance premiums to those who qualify. To qualify, a physician must meet the following requirements:

- (a) be a doctor of medicine or osteopathy;
- (b) have a rural medical practice according to the criteria established by the Office of Rural Health (ORH);
- (c) hold an active, unrestricted license to practice medicine in Oregon; and
- (d) have an in-force policy of medical professional liability insurance, issued to an individually-named physician, with an authorized insurer with minimum limits of coverage of \$1 million per occurrence and \$1 million aggregate.

A "rural medical practice" means that 60% or more of a physician's practice (defined in hours or days each week, not by numbers or types of patients) must be in a rural area of Oregon. "Rural areas" are geographic areas 10

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on the critical nature of building new partnerships, and strengthening old partnerships, to address the challenges in the health care workforce. The *Rural Recruitment Workshop* made a return to the conference this year. This pre-conference workshop offered recruiters a review of how to effectively recruit providers to rural areas.

Critical Access Hospital (CAHs) administrators and staff from across the state met before the conference on Thursday, October 2, 2003. A CAH is able to improve its financial stability through enhanced Medicare reimbursement and reduced operating costs. Michael Bell, CPA, Michael Bell & Company, spoke to the group about financial management of critical access hospitals and the continuing challenge of effectively using the limited number of hospital beds allowed by a CAH designation.

The Annual Rural Health Conference provides a venue for those involved in rural health care to share information and experiences, talk about best practices, and network among colleagues. For more information about our 2004 conference, visit the Office of Rural Health web site, www.ohsu.edu/oregonruralhealth, or contact the Office of Rural Health by phone at 503-494-4450.

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or more miles from the centroid of a population center of 30,000 or more. For more on the definition of "Rural," please see the ORH web site at www.ohsu.edu/oregonruralhealth.

The Office of Rural Health is responsible for determining eligibility based upon practice location. In order to gather the appropriate information, ORH requires a signed affidavit in which the applying physician attests to meeting the above requirements. The affidavit also provides the physician's contact and liability carrier information. Blank affidavits can be requested by emailing Linda Peppler, Department Administrator, at pepplerl@ohsu.edu. She can also confirm whether or not an affidavit has been received by ORH.

SAIF calculates the credit each physician receives, which is designed not to exceed \$10 million per year for the entire program. Those calculations attempt to achieve a premium reduction that is as close to the following targets as possible:

- Up to 80% premium reduction for obstetricians;
- Up to 60% reduction for family physicians who deliver babies; and
- Up to 40% reduction for all other rural physicians.

Liability carriers who choose to participate in the plan are responsible for notifying SAIF of their intent to do so. If an authorized insurer chooses not to participate, any physician insured by them will not be eligible for the premium reduction. Participating liability carriers are required to provide an eligible physician with a quarterly statement explaining the quarterly premium due before the reduction is applied, the amount of the premium reduction and the premium after the reduction is

applied. Physicians who have questions about their premium reduction percentage are encouraged to contact their insurance carriers.

For more information please read the FAQ on the ORH web page, ohsu.edu/oregonruralhealth, or email Linda Peppler at pepplerl@ohsu.edu.

Internet-Based Library for Oregon Nurses Expanded

The OHSU Library offers free access to an Internet-based library of nursing texts for all nurses licensed in Oregon. Nine new books have been added to the collection, bringing the total to 21. Geriatric nursing, oncology, diagnosis, medical-surgical nursing, critical care and pediatrics are some of the areas the new titles cover. The original collection includes books on drugs, cardiac nursing, alternative medicine, nutrition, care plans, IV therapy, lab tests, primary care and more.

Go to www.ohsu.edu/library/nurses/ for a complete list of titles and more information about the library. Click on "Register for the Online Library" to sign up. Please be sure your email address is correct, since that is how your password and other information will be sent to you.

If you're interested in an on-site demonstration or have further questions, please contact Steve Teich, 503-494-3444, teich@ohsu.edu, or Dolores Judkins, 503-494-3478, judkinsd@ohsu.edu.

The online library is funded through a Digital Libraries Grant from the National Library of Medicine. The purpose of the 18-month grant, which ends in June 2004, is to determine the usefulness of such a resource to nurses in various types of settings and with differing specialties, and to test the feasibility of statewide coverage through a blanket agreement with the resource provider.



Columbia Hospital, circa 1950

Collaboration & Coordination Work for Primary Care in Oregon

The Community Site Development Group is a collaboration of statewide health care organizations working to increase access to primary care.

Participants in the group include the Oregon Primary Care Association (OPCA); the state Primary Care Office (PCO); the Office of Rural Health (ORH); the Oregon Area Health Education Center (OAHEC); and the Oregon Community Health Information Network (OCHIN).

The group provides an informal level of coordination among its participants and identifies communities where they can collaborate to provide assistance without duplication of services. They

work with communities that have the most immediate needs and the most underserved populations.

The group identifies communities in need of primary care services. A community may have participated in a community development model, or may have contacted one of the participating organizations on its own.

“Calls from different communities come to our respective offices,” said Craig Hostetler, Executive Director, Oregon Primary Care Association. “We work to make sure resources are not overlapping, and duplicate efforts are not made in a community.”

The ORH Community Health Improvement Partnership* (CHIP) is the most frequently utilized development model in determining a community’s primary health care needs. When the members of a community go through the development model process, they determine which primary health care services are most beneficial for the population.

Once a community has identified a health care need, the members of the Community Site Development Group determine who is best equipped to provide that community with the

technical assistance they need. This collaboration between group members forms a continuity of services and ensures communities can best meet the primary care needs of their citizens. “Through the group we have gained a deeper knowledge of what each organization involved is doing in the community,” says Hostetler.

The Ochoco Community Health Center in Prineville is an example of how the Community Site Development Group worked together to provide technical assistance to an area with primary health care needs. The group provided technical assistance and worked together to identify resources for the community to use in its pursuit of a Community Health Center designation. The Ochoco Community Health Center opened its doors to the Prineville community in 2002.

If you would like to learn more about the CHIP process, contact Paul McGinnis at the Office of Rural Health at 503-494-4450, or www.ohsu.edu/oregonruralhealth. Information about the Community Site Development Group is available by contacting Craig Hostetler at the Oregon Primary Care Association, 503-228-8852, or on the web at <http://orpc.org>.

Mark Your Calendar

The 2004 Annual Rural Health Conference to be Held in Portland

“A Quarter-Century of Service: Celebrating Our Past....Navigating Our Future”

The 21st Annual Oregon Rural Health Conference will be held October 7 – 9, 2004 at the DoubleTree Hotel, Lloyd Center, in Portland Oregon. Please mark your calendars and make arrangements to join us in Portland.

2004 marks the 25th anniversary of the Office of Rural Health and there will be new sessions and exciting extras for our 25th year. Watch the web site, www.ohsu.edu/oregonruralhealth, as well as this newsletter, for upcoming information on the conference and the 25th anniversary celebration. For more information, contact the Office of Rural Health at 503-494-4450.

*The Community Health Improvement Partnership (CHIP) develops ways to improve local health care and is about people becoming involved in health policy decisions both as consumers and as concerned community members. CHIP is a unique process involving residents in creating healthier communities. CHIP helps diverse groups and individuals seek a common sense of loyalty and identification with health system goals, projects and programs. It builds a shared commitment for the future.

TRAINING & CONFERENCE INFO

February 23 - 25, 2004

15th Annual Rural Health Policy Institute
Grand Hyatt Hotel, Washington, D.C.
National Rural Health Association
Eli Briggs, briggs@NRHArural.org, or call 703-519-7910

March 24, 2004

Regional Critical Access Hospital Conference
Red Lion in at the Park, Spokane, Washington
Office of Rural Health
www.ohsu.edu/oregonruralhealth or call Sandra Assasnik, 866-674-4376

March 25 - 26, 2004

17th Annual NW Regional Rural Health Conference
Red Lion in at the Park, Spokane, Washington
www.ahec.spokane.wsu.edu/content/conferences/NWRRHC%20Brochure.pdf or call 1-800-279-0705

The Office of Rural Health
would like to hear from you!

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