Summary: Hospital call coverage is a challenge in many rural hospitals due to low patient volume and provider shortages. Many rural hospitals, including Critical Access Hospitals (CAHs) use a traditional model, where Internal Medicine and Family Physicians share hospital coverage and call while maintaining full clinic practices. However, models using traditional call coverage have become a barrier to recruitment, as many physicians prefer positions that do not require extensive call coverage in addition to their clinical hours. To assist Oregon rural hospitals with this challenge, below is a summary of some coverage models being used in other states.

<table>
<thead>
<tr>
<th>Contact</th>
<th>State</th>
<th>Coverage Model Info</th>
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<td>Stacy Kusler</td>
<td>ND</td>
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<td>Kimberly Armstrong</td>
<td>AR</td>
<td>Some hospitals in Arkansas contract with a service company to provide emergency department (ED) physician coverage. Other hospitals have in-house physician coverage from Friday night to Monday morning and on-call coverage during the week. These two scenarios are the most common but a couple of rural hospitals cover their ED with a hospitalist. Arkansas law allows for a Qualified Medical Professional (QMP) or physician to be on-call for ED coverage, providing that when a patient presents to the ED, the patient receives a medical screening from the RN. The RN then contacts the covering physician or QMP, who determines if the patient is emergent or urgent. Depending on the information relayed, the physician or QMP may or</td>
</tr>
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Roger D. Wells  
*Physician Assistant*  
rogerdwells@gmail.com  
(308) 754.4421  
Howard County Medical Center; St. Paul, NE

**NE**  
At the Howard County Medical Center, as with many other local CAH facilities, PAs are used for the weekday night call and providers are rotated on the weekends. Some MDs do not want any call and back up the PAs, while some enjoy the opportunity to be on call and are willing to take a weekend every few weeks.

Whomever takes the weekend call takes off the following Monday without costing any vacation time. Both the MD and PA receive compensation and the back-up MD for a PA will get a small compensatory rate also.

Marty Fattig  
*CEO*  
mfattig@nchnet.org  
(402) 274-4366  
Nemaha County Hospital; Auburn, NE

**NE**  
Nemaha County Hospital in Nebraska uses a team of PAs for ER and hospital coverage.

Carrie Galbraith  
*Director of Recruitment*  
cgalbraith@icahn.org  
(217) 925-5968  
Illinois Critical Access Hospital Network

**IL**  
All of the CAHs in Illinois are very low census and cannot justify the salary of a full time hospitalist. As a result, they are implementing hospitalist programs through an ER hybrid. The ER group is given permission to admit patients and round on inpatients. For hospitals that have low ER volume, using an NP to cover the ER while the physician is rounding is being considered.

A recent hospitalist study in Illinois:  
[http://www.icahn.org/files/Hospitalist_Stud...Hospit...report.pdf](http://www.icahn.org/files/Hospitalist_Study/ICAHN_Hospitalist_Report.pdf)

Other models considered include: creating a hospitalist group out of the PCP’s. For example: with 5 PCP’s, each physician takes call for inpatients 1:5 weeks and is the hospitalist of the week.

Tracie Ingram  
*State Rural Health Officer*  
Tracie.Ingram@la.gov  
(225) 342-1889  
Louisiana Office of Rural Health

**LA**  
CHRISTUS Coughshatta Health Care Center has enlisted their Rural Health Clinic (RHC) to provide ER coverage along with call. The RHC provides the in-patient care. Most rural hospitals in Louisiana that offer hospitalist coverage contract with the ER physician service to coverage both services.

Rebekah S. Fincher  
*Manager Physician Relations and Alignment*  

**AR**  
Conway Regional Health System has grown to 8 physicians. Previously, with 6 physicians the schedule was that the physicians worked 14-17 shifts a month. On weekdays, two
| rfincher@conwayregional.org | doctors split the call: 7am-12pm and 12pm-6pm. A rounder came in and rounded on 10 assigned patients (that worked as the off week) and didn’t take call/admits. The nightshift worked 6pm-7am so potentially four doctors per week with the night shift, rounder and two physicians taking call. Then the physicians were rotated the next week. |
| (501) 932-3303        | Conway Regional Health System |