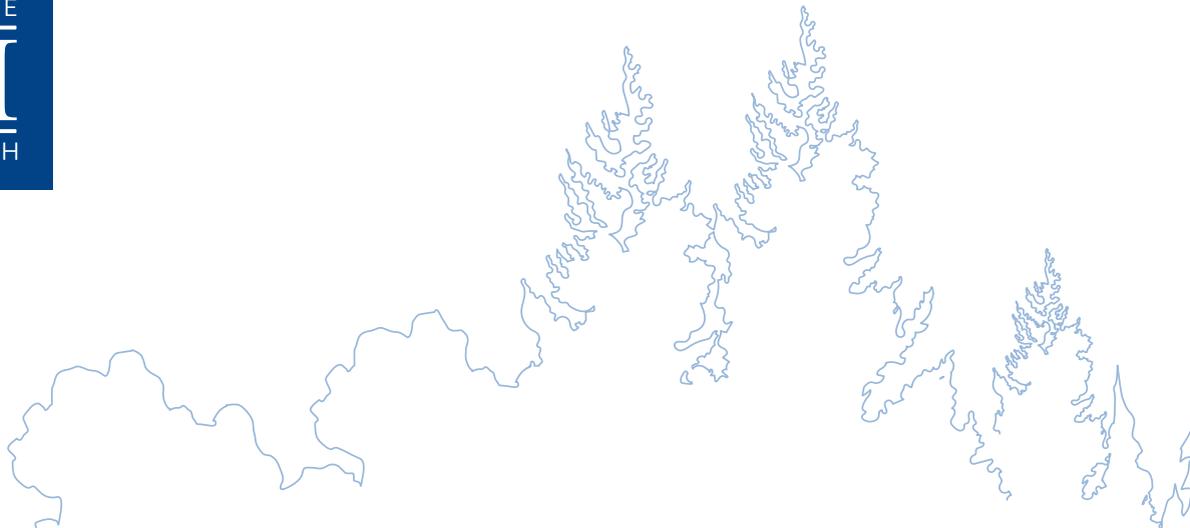


OREGON OFFICE



of RURAL HEALTH



# 2016 Year-End Report

OREGON

OFFICE

OF RURAL

HEALTH





# About the Oregon Office of Rural Health

The Oregon Office of Rural Health (ORH) has been the focal point for rural and frontier health in Oregon since 1979. Supported by the Federal Office of Rural Health Policy, the state of Oregon and Oregon Health & Science University, ORH offers assistance to hospitals, clinics and communities to strengthen the rural and frontier health care delivery system.

**OUR VISION** *Working with communities to create health care solutions for rural Oregonians.*

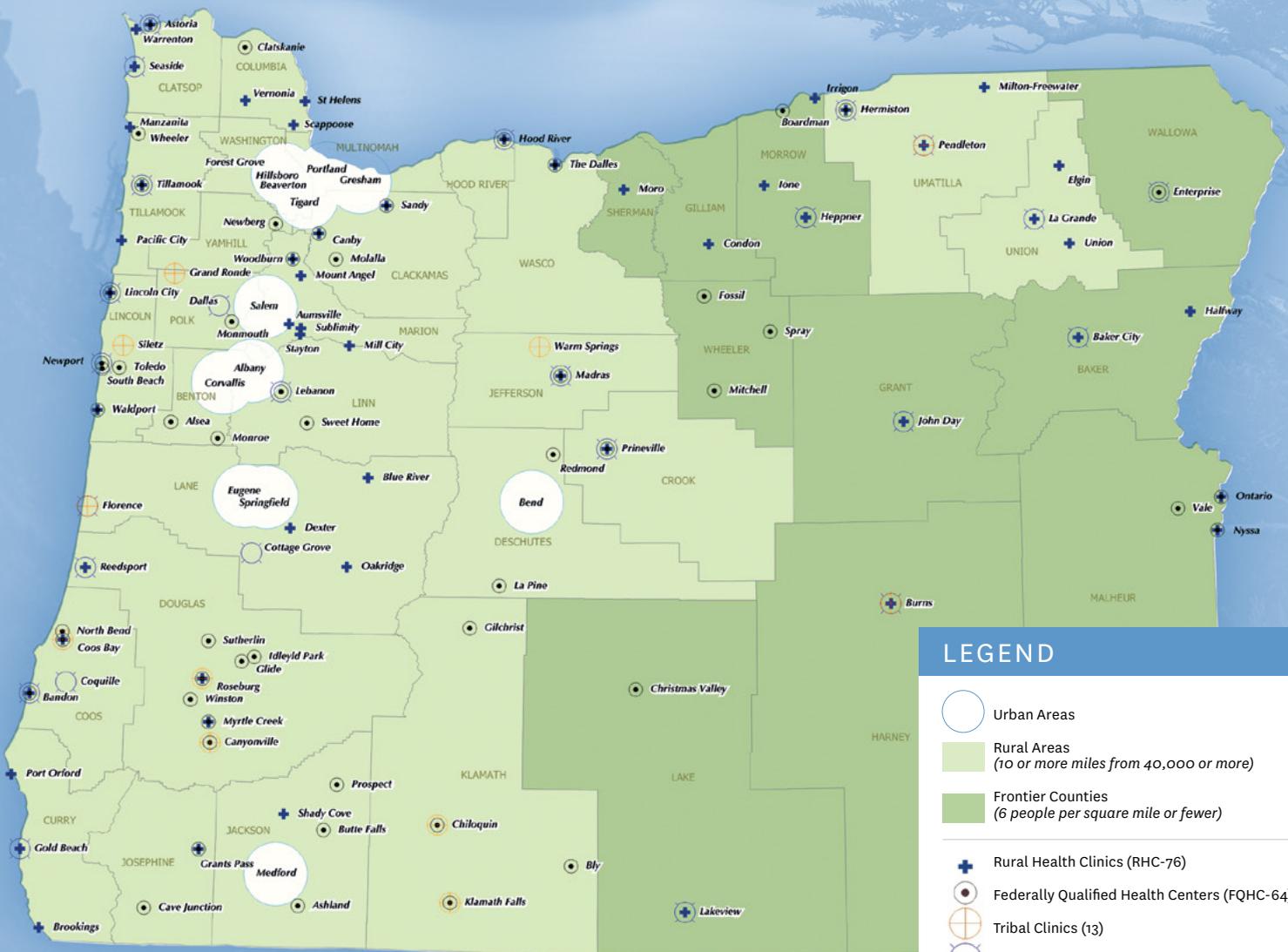
**OUR MISSION** *To improve the quality, availability and accessibility of health care for rural Oregonians.*



# What Is Considered Rural and Frontier?

*36% of Oregon's population lives in rural and frontier communities*

The Oregon Office of Rural Health defines rural as all geographic areas in Oregon ten or more miles from the centroid of a population center of 40,000 people or more. Frontier counties are defined as those with six or fewer people per square mile. Ten of Oregon's 36 counties are frontier.



## OREGON RURAL HEALTH CARE SAFETY NET

For more information on what is considered rural and frontier, or to determine if your community is rural or frontier, visit our website: [www.ohsu.edu/orh](http://www.ohsu.edu/orh)

4/18/2017



# The Work of ORH Is Aligned Under the Following Service Areas:



## WORKFORCE SERVICES

### PROVIDER RECRUITMENT AND RETENTION

ORH works with rural practice sites to help them recruit and retain practitioners, and with practitioner candidates to help them find suitable rural and frontier Oregon practice sites.

### PROVIDER INCENTIVE PROGRAMS

ORH manages loan repayment, loan forgiveness, tax credits and malpractice subsidy programs to incentivize the recruitment of rural and frontier Oregon providers.

## FIELD SERVICES

### DATA & ANALYSIS

ORH provides data and analysis about rural and frontier health to providers, elected officials, government agencies, educators and members of the public.

### TECHNICAL ASSISTANCE

ORH offers technical assistance to rural and frontier communities and health care facilities to strengthen their health care delivery systems.

## POLICY DEVELOPMENT AND ADVOCACY

The state legislature has charged ORH with “coordinating” the provision of health care to rural Oregonians and developing legislative proposals to benefit the health of rural Oregonians.

## INFORMATION SERVICES

ORH keeps its constituents informed through the annual Oregon Rural Health Conference, the annual Forum on Aging in Rural Oregon, quarterly newsletters and social media.



# Funding Sources

The 2016 budget for the Oregon Office of Rural Health was \$2,887,275.

Our support is a combination of federal funding, state funding, and service fees. Funding cycles vary depending upon the source of revenue. ORH is committed to using all of its resources as efficiently as possible to provide the highest quality services to rural Oregon.

State: \$1,252,102 43%

Federal: \$1,352,566 47%

ORH Revenue: \$282,607 10%

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**Total: \$2,887,275**

# ORH Partners

The Oregon Office of Rural Health has been a partner of Oregon Health & Science University since 1989. Together, we have been building a stronger network of providers in rural Oregon.



## STATE

- Oregon Area Health Education Centers (AHEC)
- Oregon Association of Hospitals and Health Systems (OAHHS)
- Oregon Department of Human Services (DHS)
- Oregon Health Authority (OHA)
- Oregon Health & Science University (OHSU)
- Oregon Health Care Workforce Institute (OHWI)
- Oregon Medical Association (OMA)
- Oregon Primary Care Association (OPCA)
- Oregon Rural Health Association (ORHA)
- Oregon Rural Practice Research Network (ORPRN)
- Pacific University
- Telehealth Alliance of Oregon (TAO)
- Western University of Health Sciences -Comp NW



## NATIONAL

- Health Resources and Services Administration (HRSA)
- Federal Office of Rural Health Policy (FORHP)
- National Organization of State Offices of Rural Health (NOSORH)
- National Rural Health Association (NRHA)
- National Rural Recruitment and Retention Network (3RNet)



# Workforce Services

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The Workforce Services Team improves access to health care in rural, frontier and underserved communities through recruitment and retention technical assistance.



## Health Care Provider Candidate Sourcing

ORH sources candidates through direct outreach to students, residents and practicing providers throughout the country. We work directly with candidates reached through the national non-profit Rural Recruitment and Retention Network (3RNet) and through the scholarship and loan repayment programs we administer.

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**ORH heard from 644 providers during 2016 who had an interest in practicing in Oregon.**

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## Practice Opportunities

Workforce Services provides support to rural clinics, federally qualified health centers, hospitals and communities in the recruitment and retention of their provider workforce. Utilizing our membership in the national, nonprofit Rural Recruitment & Retention Network (3RNet), ORH worked with Oregon practice sites to market their opportunities and communities to health care providers and their families nationwide.

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**43 sites posted 130 practices opportunities and 473 applied for Incentive Program participation during 2016.**

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## Provider Incentive Programs

**Loan repayment** is an incentive for clinicians already working in or ready to begin working in an eligible site. Providers apply to receive this funding to repay existing loans in exchange for a service commitment. ORH administered **three loan repayment programs in 2016**: 14 providers received awards totaling \$452,864 through State Partnership Primary Care Loan Repayment Program (SLRP), 18 providers received awards totaling \$1,009,648 through the Medicaid Primary Care Loan Repayment Program (MPCLRP) and 19 providers received awards totaling \$274,645 through the Behavioral Health Loan Repayment Program (BLRP).

**Loan forgiveness** is an incentive for students who receive loans during their education that are forgiven when they complete a service obligation after graduation. ORH approved loans for 8 students totaling \$385,000 in 2016 through the **Primary Care Loan Forgiveness Program (PCLF)**. ORH also assists with the **Scholars for a Healthy Oregon Initiative (SHOI)**, an OHSU scholarship program for Oregonian students. SHOI requires a service commitment in a rural or urban underserved community upon completion of the students' training. 20 students were awarded scholarships totaling \$2,526,149 in 2016 through the SHOI program.

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**169 loan repayment and 27 loan forgiveness recipients are currently practicing in 154 rural or urban underserved sites.**

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ORH also administers the **Rural Practitioner Tax Credit**, the Rural Volunteer EMT Tax Credit and the **Rural Medical Practitioners Insurance Subsidy Program**. These incentives are designed to help retain rural providers. Approximately 2,766 providers benefited from these programs in 2016.

# Field Services

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The Field Services Team provides information and technical assistance to rural and frontier clinics, hospitals and communities. Field Services also administers grants for projects that enhance the quality and accessibility of health care in rural and frontier Oregon.



## Challenges Facing Rural and Frontier Home Health Agencies

The Office of Rural Health interviewed 20 Home Health Agencies and compiled [this report](#) on the demographics of aging in rural and frontier Oregon, the availability of home health and long-term care services and, specifically, the challenges facing rural and frontier Home Health Agencies.

## Improvements to the Areas of Unmet Health Care Need (AUHCN) Report

The Office of Rural Health annually produces the AUHCN report to identify medically underserved areas. This helps to inform the distribution of state funds, grant dollars and other resources for the benefit of rural and frontier communities. This year, ORH convened a stakeholder group to revise the analysis to focus on access to care, and to include access to oral and mental health care services. The new variables have been finalized and the report will be released in May on the ORH website. Please contact Emerson Ong at [ong@ohsu.edu](mailto:ong@ohsu.edu) with any questions about the AUHCN methodology or report.



## Conference Scholarships

With funding from the HRSA Rural Hospital Flexibility Grant Program, ORH was able to offer scholarships to Critical Access Hospital staff to offset or fully fund the costs of attending conferences. Recipients in 2016 included:

### Healthcare Service Excellence and National Symposium on HCAHPS Sustainability

#### LONG BEACH, CA

CHI St. Anthony Hospital  
Harney District Hospital  
Lower Umpqua Hospital  
Samaritan North Lincoln Hospital  
St. Charles Madras  
St. Charles Prineville  
Wallowa Memorial Hospital

### National Rural EMS Conference

#### SAN ANTONIO, TX

Harney District Hospital  
Tillamook Regional Medical Center

### Western Region Flex Conference

#### DOVE MOUNTAIN, AZ

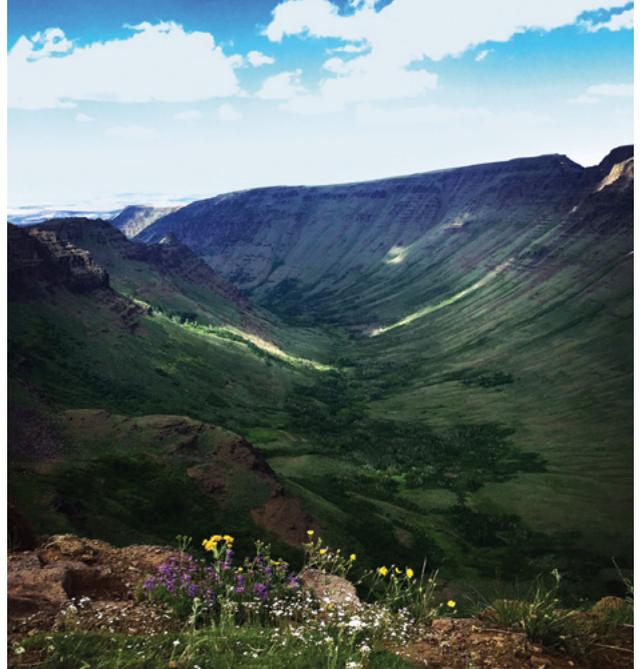
Curry General Hospital

For information on what scholarships are available from ORH during 2017, please visit the [ORH website](#).



## Critical Access Hospital Community Benefit Reporting

The Oregon Health Authority collects, analyzes and publishes Hospital Community Benefit data annually for 60 Oregon hospitals. ORH created [this report](#) in 2016 to break out the community benefit reporting highlights for the Critical Access Hospitals (CAHs). Please contact Meredith Guardino at [guardino@ohsu.edu](mailto:guardino@ohsu.edu) if you have questions on how ORH can help your hospital with Community Benefit reporting and requirements.



### GRANTS AWARDED

CHI St. Anthony Hospital <i>(in partnership with Umatilla and Morrow County Health Departments and Yellowhawk Tribal Health Center)</i>	\$50,000*	Mobile Lactation services
Curry General Hospital	\$20,000*	Improve electronic systems and clinical workflows
Good Shepherd Medical Center	\$5,000*	MBQIP Outpatient Reporting- Top Performers
Grande Ronde Hospital	\$20,000**	TeamSTEPPS
Harney District Hospital	\$20,000*	Audit of Revenue Cycle Operations
Harney, Grant, Morrow and Lake Health Districts	\$80,000**	Lean Training to Outpatient RHCs
Peace Health Cottage Grove Medical Center	\$5,000*	MBQIP Outpatient Reporting- Top Performers
Peace Health Peace Harbor Medical Center	\$20,000**	Developing a Palliative Care Program
Tillamook Regional Medical Center	\$20,000**	Team STEPPS
Salem Health West Valley	\$5,000*	MBQIP Reporting- Overall Top Performer
Samaritan Lebanon Hospital	\$5,000*	MBQIP EDTC Reporting- Top Performers
Samaritan North Lincoln and Samaritan Pacific Hospitals	\$20,000**	Lean Training
	\$10,000*	MBQIP EDTC Reporting- Top Performers
St. Charles Madras and St. Charles Prineville Hospitals	\$20,000*	Heart Failure Nurse Navigation Services
	\$300,000	

**Funding sources:**

\*HRSA Rural Hospital Flexibility Grant Program

\*\*Oregon Rural Healthcare Quality Network

For information on what grants are available from ORH during 2017, please visit the [ORH website](#).



## Rural and Frontier Health Facility Listening Tour

Forty-five rural and frontier healthcare facilities participated in the 2016 ORH Listening Tour, including:

- 14 Critical Access Hospitals
- 2 Type C Rural Hospitals
- 23 Rural Health Clinics
- 1 Rural Clinic (non-RHC)
- 4 Federally Qualified Health Centers
- 1 Tribal Clinic

Thirty-six representatives of 16 stakeholder partner organizations accompanied ORH staff on one or more visits. Facilities discussed their current challenges, ranging from difficulty obtaining specialist referrals to the impact of regulatory requirements and health information technology on their ability to provide patient care. The report highlights the challenges discussed on the tour. The online content includes links to partner efforts to address these issues and is intended to be a living document. Both can be accessed at [www.ohsu.edu/listeningtour](http://www.ohsu.edu/listeningtour).

## Quality Improvement Reporting and Programs

Following an on-site needs assessment at the hospitals, ORH put in place training resources and a performance recognition program to improve quality reporting. This year Oregon saw the largest improvement in the percentage of CAHs reporting outpatient and patient safety measures, with an increase from 72% to 96%.

*Oregon is one of only 7 other states in which 100% of Critical Access Hospitals report Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) data.*

Other highlights of ORH's work during 2016 to support quality improvement:

- Support for 9 CAHs to participate in a Patient and Family Engagement Collaborative
- Creation of an Oregon CAH Quality Reporting Guide
- Sponsorship of a free HCAHPS Breakthrough Leadership webinar series for 13 CAHs
- Development of a CAH-specific Healthcare Provider Influenza Vaccine Tool Kit
- Medicare Beneficiary Quality Improvement Program (MBQIP) and HCAHPS Benchmarking Program which enables CAHs to benchmark their data with other Oregon CAHs of their choice.

For more information on quality improvement assistance, please contact Stacie Rothwell at [rothwels@ohsu.edu](mailto:rothwels@ohsu.edu).

## Small Hospital Improvement Program (SHIP) Grants

Twenty-seven of Oregon's 32 eligible rural hospitals received approximately \$8,000 each during the 2016 SHIP grant cycle. Some of the projects funded are:

- **Asante Ashland Community Hospital: Total Joint Replacement Program staff training to improve the quality of care and reduce unnecessary costs for orthopedics;**
- **Grande Ronde Hospital: Development of an interactive analysis tool for HCAHPS and Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CGCAHPS);**
- **PeaceHealth Cottage Grove Community Medical Center: Process improvement for Medicare Wellness visits.**

The SHIP grant is available to rural hospitals of 49 beds or less. The 2017 grant application cycle has closed. Please contact Program Coordinator Rebecca Dobert at [dobert@ohsu.edu](mailto:dobert@ohsu.edu) for information about applications for the 2018 cycle.

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## Clinical Technical Assistance

ORH provides technical assistance to rural and frontier healthcare clinics including, but not limited to, the Rural Health Clinic (RHC) designation. In 2016, ORH provided technical assistance to 38 of Oregon's clinics and health departments.

For more information on clinic related technical assistance, please visit the [ORH website](#) or contact Stacie Rothwell at [rothwels@ohsu.edu](mailto:rothwels@ohsu.edu).



*For the second year in a row, the Federal Office of Rural Health Policy recognized outstanding work in a Critical Access Hospital. This year Tillamook Regional Medical Center was recognized for its outstanding work in Emergency Medical Service integration. Only five CAHs are recognized throughout the country each year.*

# Policy Development & Advocacy

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The Oregon Office of Rural Health is mandated by the Oregon Legislature to “coordinate statewide efforts for providing health care in rural areas” and “develop enabling legislation to facilitate further development of rural health care delivery systems.”

The obstacles facing health care delivery in rural communities can be as diverse as the communities themselves. Economic factors, cultural and social differences and, in some cases, the isolation of living in remote areas can be impediments to health.

ORH considers it a priority to continually remind policymakers that a rural or frontier health care environment is different than an urban one, that solutions developed for one may not be effective in the other, and that an urban model of health care delivery cannot simply be “scaled down” to fit a rural or frontier community.

Health care transformation at the state and national levels, offer opportunities and challenges for our rural communities. ORH works closely with federal and state legislators and regulatory agencies to ensure that changes in our delivery and payment models take into account the unique challenges facing our rural communities.

## Annual Conferences & HERO Program

### Oregon Rural Health Conference

ORH held the 33rd Oregon Rural Health Conference in 2016. This conference is the largest gathering dedicated to the issues impacting health care in rural Oregon. Over 230 conference attendees exchanged ideas, information and expertise on statewide challenges and successful local solutions. Conference presentations and information can be found on the [ORH website](#).



### HELPING EMS *in* RURAL OREGON

*(Formerly known as the Apple A Day grant program)*

Emergency Medical Services (EMS) are provided by volunteers in much of rural Oregon. Their service requires time off of work and away from their families, in addition to great personal expense for training. ORH started a fundraising campaign to make grant awards to individual volunteers for their out of pocket expenses, and to rural EMS agencies to conduct local trainings. The HERO grant program made \$13,904 awards in 2016.

ORH rebranded the Apple A Day Program in 2016. It is now known as HERO: Helping EMS in Rural Oregon.

*The OHSU Foundation is a 501(c)(3) tax-exempt organization and is the repository for all private grants and charitable donations in support of OHSU. The Taxpayer Identification number is 23-7083114. 100% of donations to the campaign go directly toward the rural volunteer EMS grant program.*



## Get in touch

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