

Enhancing Population Health in Rural Oregon

ORH Community Conversations

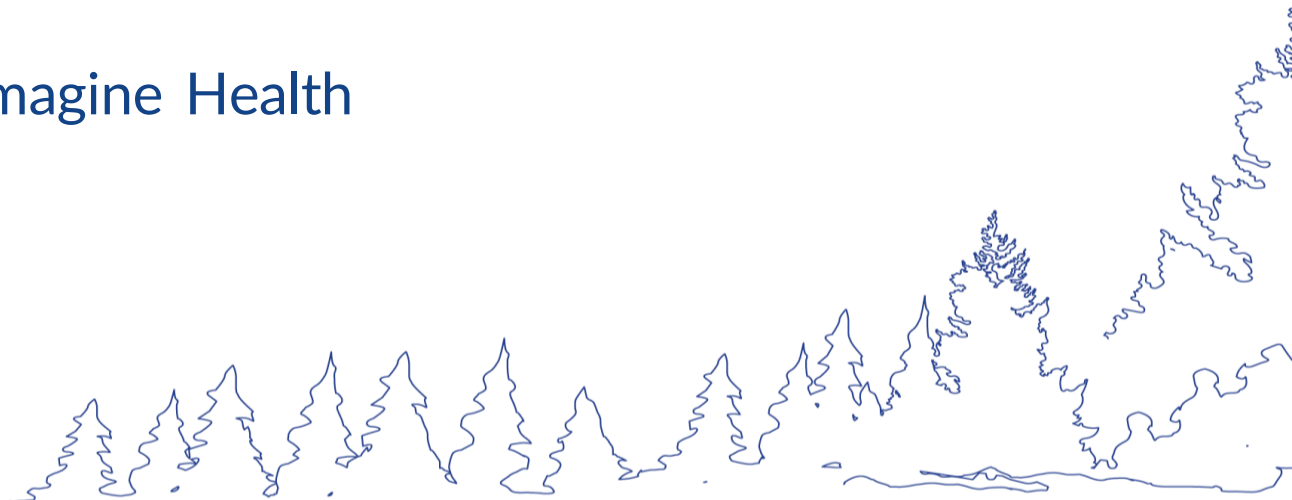
September 2023

The mission of the Oregon Office of Rural Health is to improve the quality, availability and accessibility of health care for rural Oregonians.

The Oregon Office of Rural Health's vision is to serve as a state leader in providing resources, developing innovative strategies and cultivating collaborative partnerships to support Oregon rural communities in achieving optimal health and well-being.

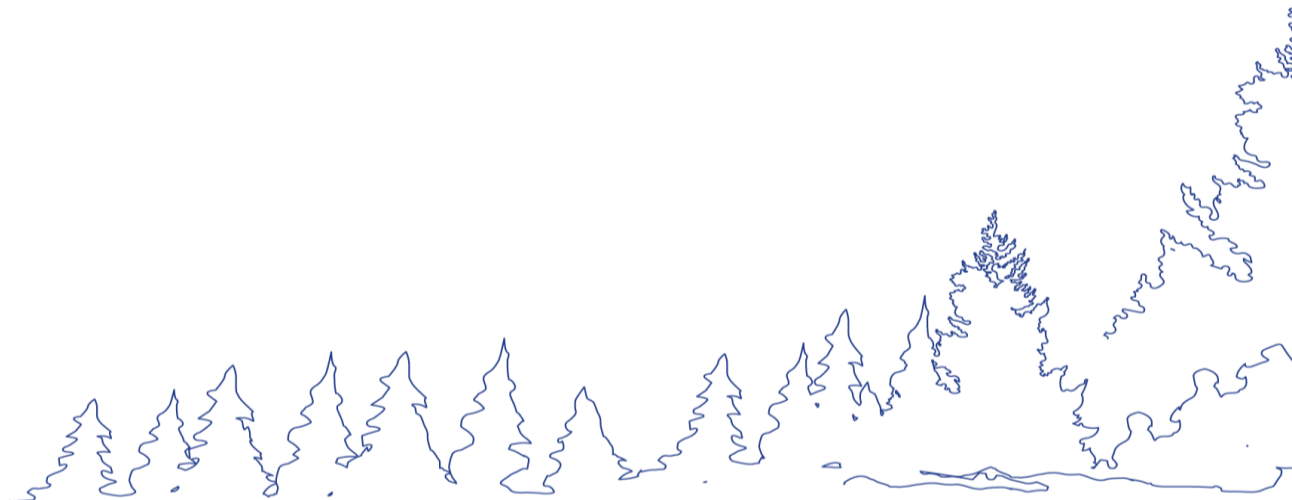
Agenda

- ORH Population Health Initiatives
 - ORH's focus on population health
 - Forum on Rural Population Health & Health Equity
 - Rural Population Health Incubator Program
 - Population Health Webinar Series
 - Community Health Worker (CHW) Training Grant
 - Telehealth + Broadband
- Guest presentation: Alex Topper of Comagine Health



ORH's Focus on Population Health

- Nation wide momentum around social drivers of health, health equity, population health and transition to value-based care
- Creation of Rural Population Health Program Manager Position
- Building, enhancing and combining ORH programs

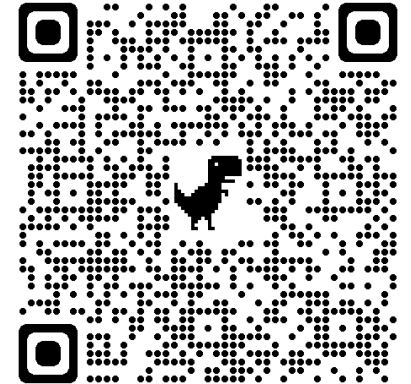


Forum on Rural Population Health + Health Equity

The Forum's mission is to strengthen community health in rural Oregon by creating an event to share knowledge, expertise and resources on population health and health equity innovations and best practices.

OHSU.edu/ORHForum

- Formerly the Forum on Aging in Rural Oregon
- Will be held virtually June 12-13, 2024
- Focus on areas pertaining to:
 - Rural aging
 - Serving historically marginalized populations
 - Population health health care models + value-based care
 - Case studies and successful programs
 - Partnerships in community health
 - Social drivers of health
- Audience: rural hospitals, clinics, public health, CCOs, state/local/tribal government, community-based organizations and anyone invested in community health
- Request for proposals will be released in November 2023



Rural Population Health Incubator Program

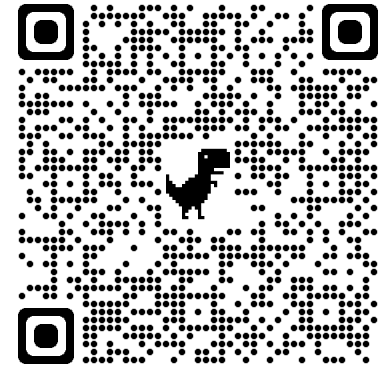
The mission of the incubator program is to strengthen community health in rural Oregon by funding and supporting population health and health equity programs initiated by rural CAHs, RHCs and/or nonprofit organizations.

Program goals:

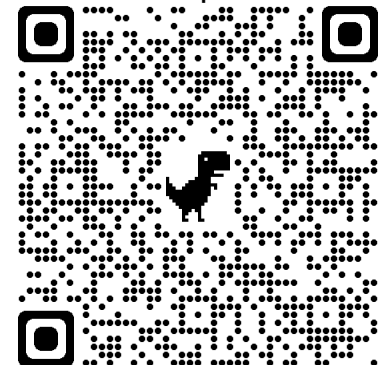
1. ORH will provide rural organizations with funding to create or maintain an innovative program that supports needs around population health, health equity and/or social drivers of health.
2. ORH will prioritize funding for programs that:
 - a. Serve a high needs service area as outlined in ORH's Areas of Unmet Health Care Need Report
 - b. Serve historically marginalized populations
 - c. Address a pressing community health need as identified by the organization's Community Health Needs Assessment or county's Community Health Assessment
 - d. Bring together multiple community partners to address the specific population health need they have identified
3. ORH will provide coaching, mentorship, referrals to experts and other resources to rural grantees.
4. ORH will provide a supportive, collaborative environment for rural grantees to share knowledge and learn from one another.

Coming soon: informational sessions on the grant program
Request for proposals will be released in May 2024

Incubator page:





AUHCN Report:




Population Health Webinar Series

April 3, 12 p.m. | Population Health 101 | Tracy Morton, National Rural Health Resource Center | [Event recording](#) | [Slides](#) 

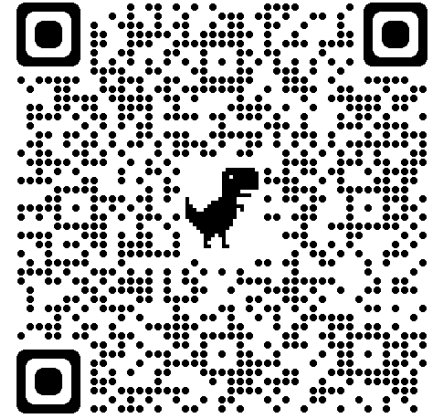
April 25, 12 p.m. | Digging into Community Health Data | James McCormack, Oregon Health & Science University | [Event recording](#) | [Slides](#) 

May 25, 12 p.m. | Community Health Workers: Approaches to Health Equity and Payment Strategies | Anne King, Oregon Health & Science University; Summer Pranti, Moda Health; Iris Bicksler, Pacific Source | [Event recording](#)  | [Slides](#) 

June 22, 12 p.m. | Building Healthy Communities Through Strategic Partnerships | Ashley Hernandez, Ruth Thomas-Squance and Alexis Sims with the Build Healthy Places Network | [Event recording](#) | [Slides](#) 

July 6, 12 p.m. | Setting Up Your Population Health Program | Speakers :Emily Sullivan of Columbia Memorial Hospital, Brooke Pace, Wallowa Memorial Hospital and Paul McGinnis of Lake Health District | [Event recording](#) | [Slides](#) 

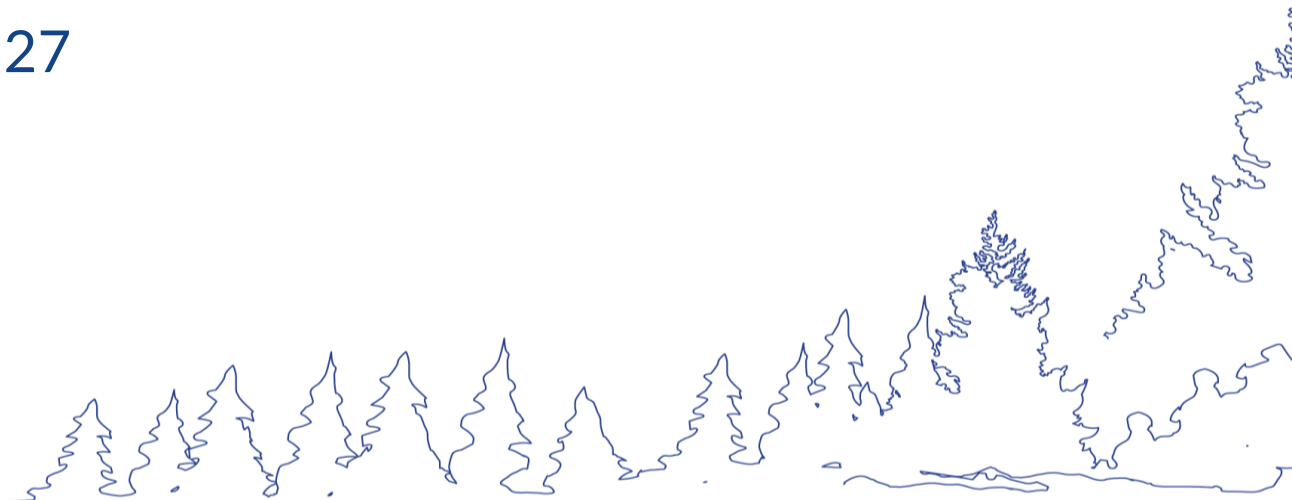
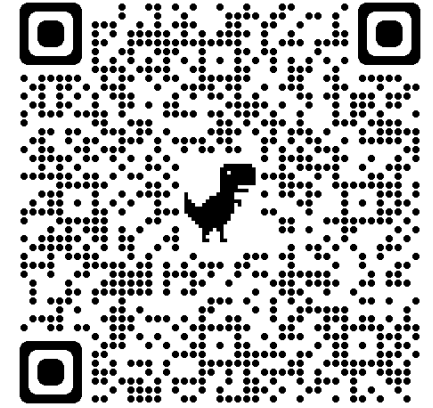
August 9, 12 p.m. | What's Next? Learning From Each Other | Moderated by Terry Hill and Tracy Morton, National Rural Health Resource Center | [Event recording](#)



CHW Training Grant

This is a pilot grant program to fund the training of community health workers (CHWs) for employment at Critical Access Hospitals (CAHs), Rural Health Clinics (RHCs) and/or rural public health departments in Oregon.

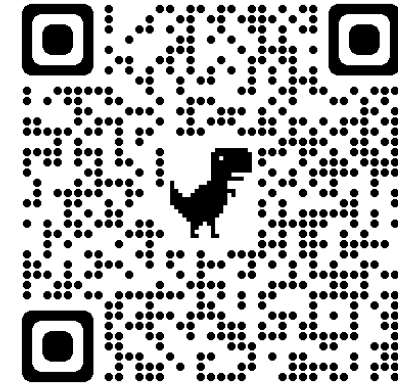
- In 2024, ORH will fund training of 27 CHWs through NEON
- Only RHCs, CAHs and rural public health are eligible for this program
- Sign up for a training spot by October 27



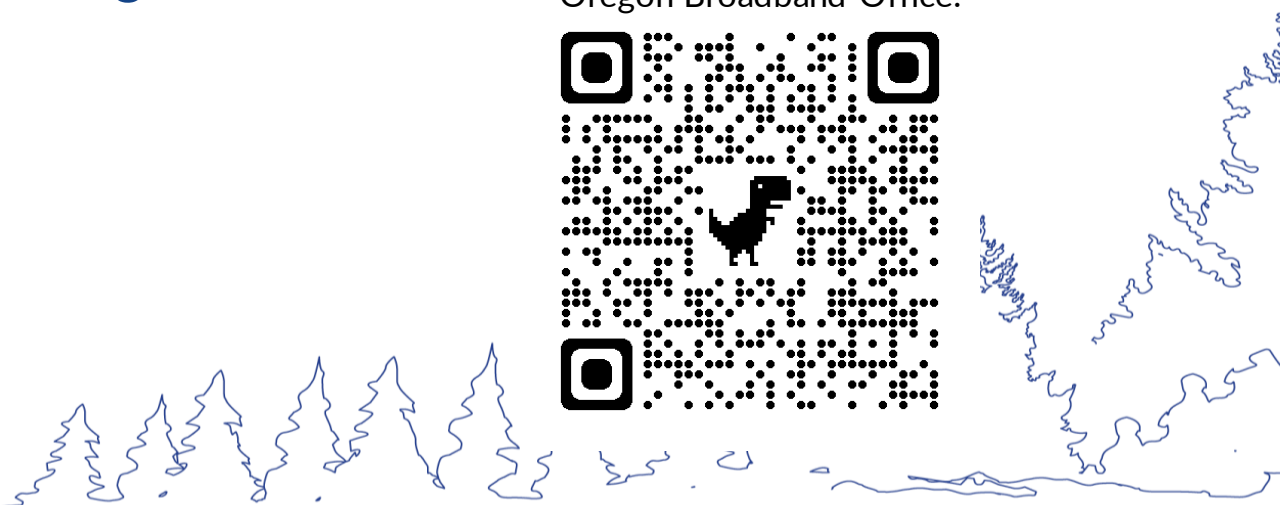
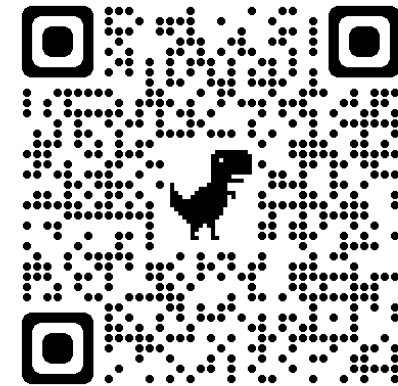
Telehealth + Broadband

- Telehealth technical assistance and resources
- Northwest Regional Telehealth Resource Center (NRTRC)
- Oregon Broadband Advisory Council
- Stay up to date on broadband activity through the Oregon Broadband Office

NRTRC:



Oregon Broadband Office:



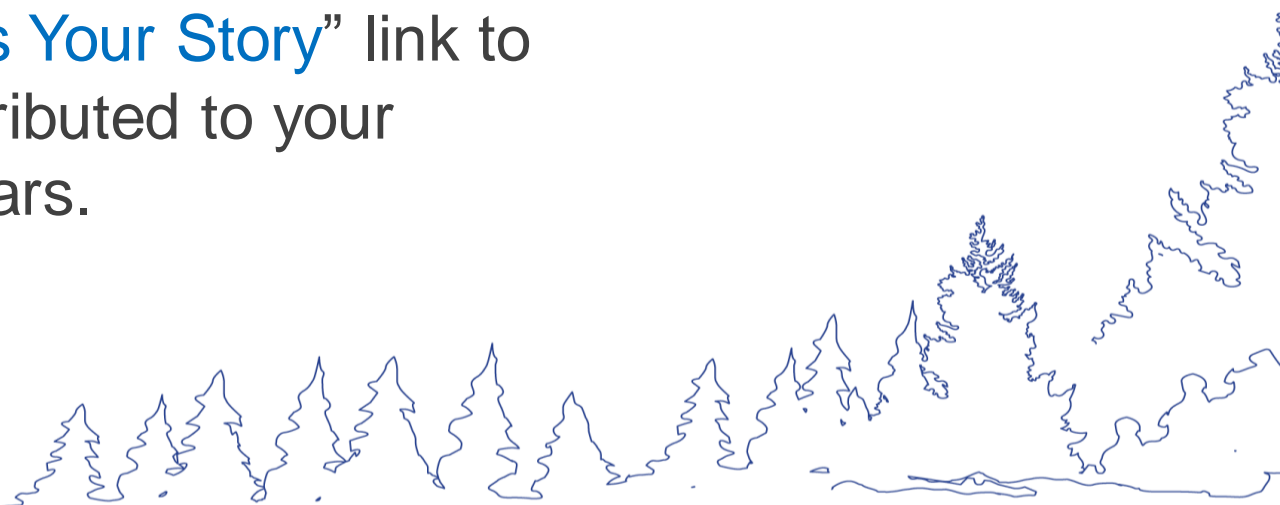
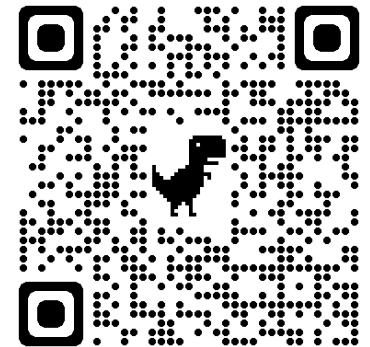
Join the Oregon Rural Health Conference!

October 11-13, Sunriver, OR | 40th Annual Oregon Rural Health Conference

[\(register here\)](#)

ORH Needs Your Rural Health Story!

We are looking for stories from your community to highlight at the ORH Conference. Click the [“Tell Us Your Story”](#) link to submit the great stories that have contributed to your community's health over the last 40 years.

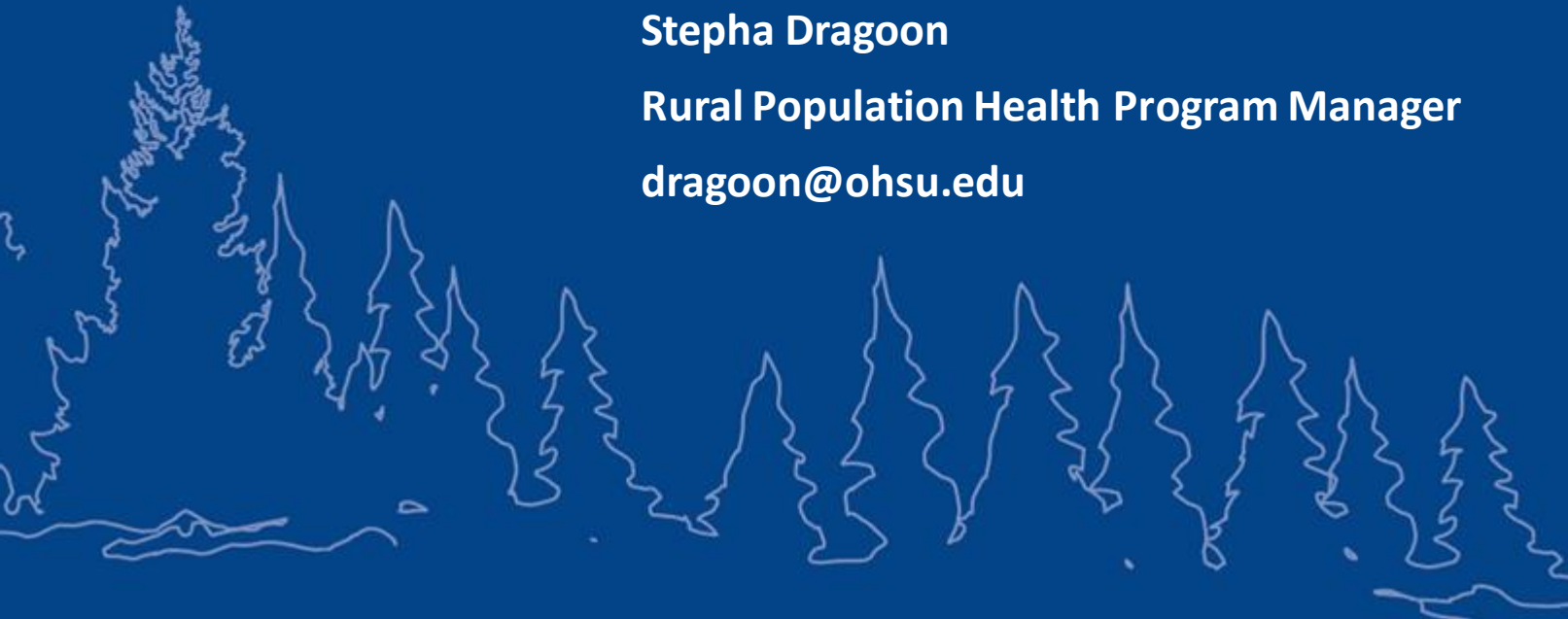


Thank you!

Stepha Dragoon

Rural Population Health Program Manager

dragon@ohsu.edu



How Can Comagine Health Support Your Work in Rural Oregon?

ORH Community Conversations

Thursday, September 28, 2023

Alex Topper, MPH – Improvement Advisor

Portland, OR

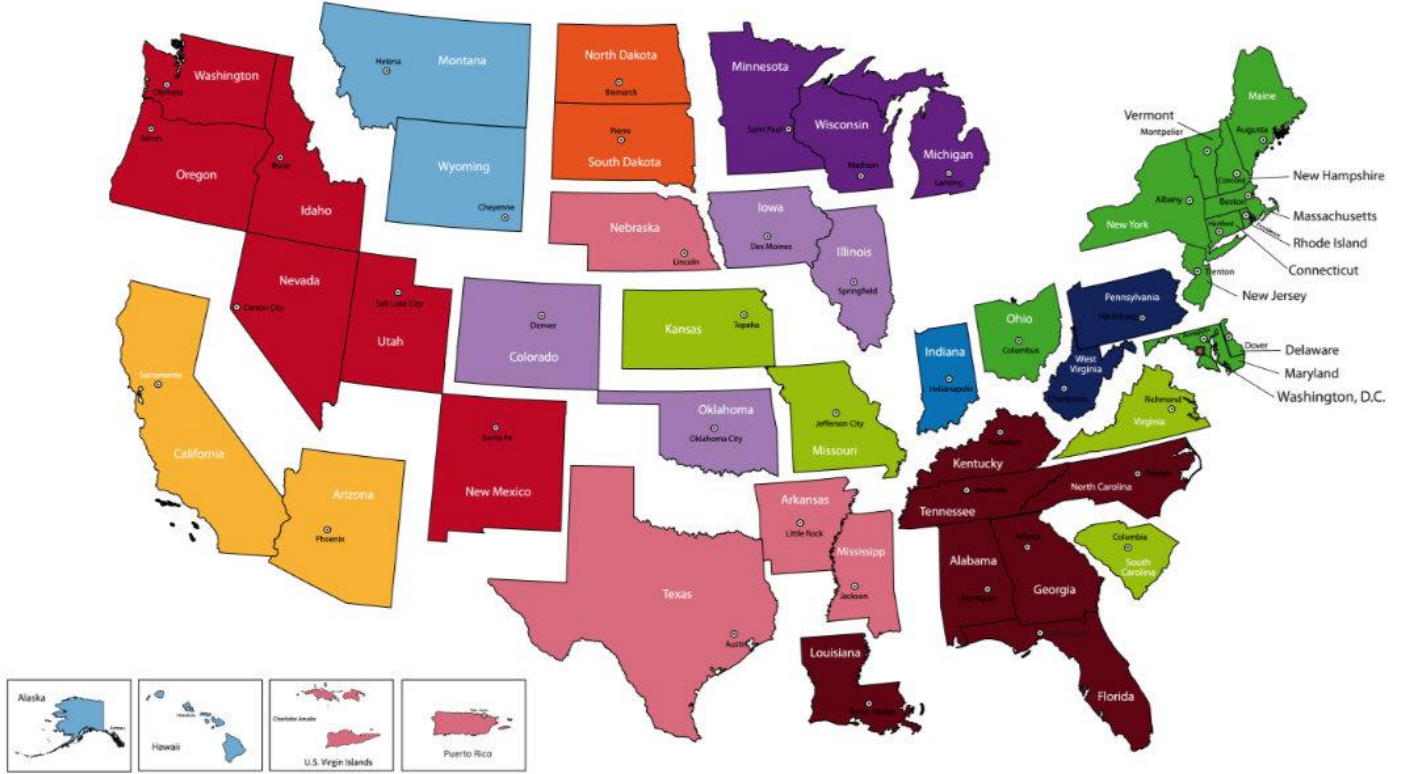
Comagine Health is a national, nonprofit health care consulting firm.

We work collaboratively with patients, providers, payers and other stakeholders to reimagine, redesign and implement sustainable improvements in the health care system.

Comagine Health as the QIN-QIO

- Contracted by the Centers for Medicare and Medicaid Services (CMS) as the **Quality Innovation Network - Quality Improvement Organization**
 - **(QIN-QIO) for:** Idaho, Nevada, New Mexico, Oregon, Utah, and Washington
- Comagine Health provides technical assistance to health care organizations and community partners through:
 - 1:1 meetings
 - Webinars
 - Learning Series/ECHO sessions
 - Sharing best practices
 - Developing provider-facing and patient-facing materials

Quality Innovation Network (QIN) Map



- Alliant Health Solutions**
Alabama, Florida, Georgia, Kentucky, Louisiana, North Carolina, Tennessee
- Comagine**
Idaho, New Mexico, Nevada, Oregon, Utah, Washington
- Health Services Advisory Group**
Arizona, California
- HQI**
Kansas, Missouri, South Carolina, Virginia
- Great Plains Quality Innovation Network**
North Dakota, South Dakota
- Mountain Pacific Quality Health Foundation**
Alaska, Hawaii and U.S. Pacific Territories, Montana, Wyoming
- Qsource**
Indiana
- IPRO**
Connecticut, Washington, D.C., Delaware, Massachusetts, Maryland, Maine, New Hampshire, New Jersey, New York, Ohio, Rhode Island, Vermont
- Quality Insights Quality Innovation Network**
Pennsylvania, West Virginia
- Telligen**
Colorado, Illinois, Iowa, Oklahoma
- Superior Health Quality Alliance**
Michigan, Minnesota, Wisconsin
- TMF**
Arkansas, Mississippi, Nebraska, Puerto Rico, Texas, Virgin Islands

Comagine Projects

- **Care Coordination**
- Emergency Preparedness
- Chronic Disease
 - Diabetes
 - Hypertension
 - Chronic Kidney Disease
- Cardiac Rehabilitation
- Immunizations
- Tobacco Cessation



CMS Measures

Opioids:

- 1.2 Decrease opioid ADEs in high-risk patients, including deaths (by 7%)
 - 1.3 Use community coalitions to implement pain and opioid use best practices (by 20%)
-

Chronic Disease:

- 3.1 Increase % of benes with hypertension that is adequately controlled (15%)
 - 3.2 Increase % of benes who experienced a cardiac event and not participating in cardiac rehab (by 15%)
 - 3.3 Decrease % of benes with diabetes who had a A1c> 9% (by 9%)
 - 3.4 Screen for, diagnose, and manage benes with CKD to slow progression of CKD or prevent ESRD (by 10%)
-

Care Coordination **4.3 Decrease emergency department (ED) visits for super utilizers***

4.4 Decrease hospital utilization for beneficiaries, particularly super utilizers

4.5 Decrease hospital readmissions within 30 days of discharge

COVID Bundle:

- 5.5 Increase the number of care settings with public emergency preparedness plans (by 100%)
-

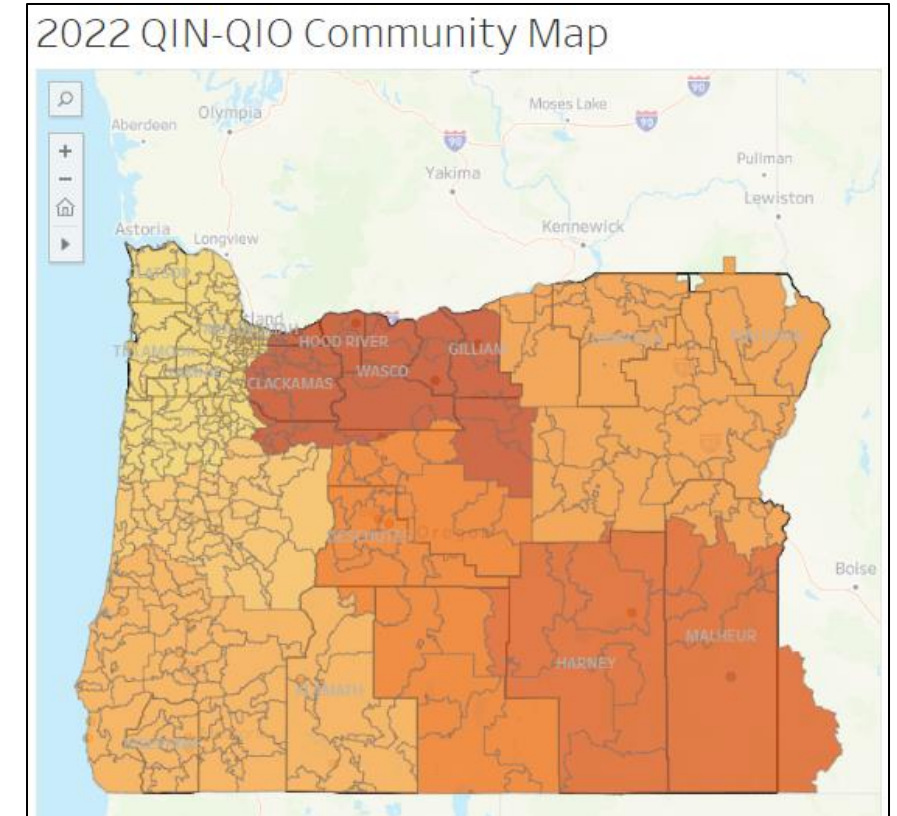
Immunizations:

- 6.5 Increase % of benes who received an Influenza vaccine OR report previous receipt (by 10%)
- 6.6 Increase % of patients 65 years old or greater who receive a pneumococcal vaccine (by 10%)
- 6.7 Increase % of benes who are fully vaccinated against COVID-19 (achieve 95% vax rate)

Hospital Utilization Data - Oregon

Data from our six-state region indicates that:

- About **69.9%*** of Medicare beneficiaries are utilizing the hospital per year (through emergency department visits, observation stays, and inpatient discharges)
- About **16.4%*** of Medicare beneficiaries are readmitted within 30 days of discharge
- Super-utilizers visit the emergency department about **3.6 times per year**



*Data from Comagine Health

Care Coordination Interventions

- Examples of projects we are working on:
 - CHW Workforce Training and Capacity Building
 - Learning Events and Learning Series for Care Coordination, Chronic Disease, Immunizations
 - Program Support for Community-based Organizations
 - Health Promotion Materials
 - Learning Collaboratives
 - Tabling and presenting at conferences

Comagine Patient-facing Educational Materials



Do You Have Medicare?

Have You Had Your Free Annual Wellness Visit?

There is No Co-Pay or Deductible*

What is an Annual Wellness Visit?


- NOT a physical exam, but a one-on-one discussion
- An opportunity to reflect back over the year and create a wellness plan
- A free service* to maximize your wellness, so you can keep doing what you love to do



*You must have had Medicare Part B coverage for more than 12 months and not had a Medicare Initial Physical Exam or Annual Wellness Visit within the last year. If other services are provided or lab work is ordered during the visit, those will be billed at the normal rate. Your AWW is still free.

Schedule Your Annual Wellness Visit Today!




Bring your medications, family history and your health and wellness goals.



Patient Guide

How to Choose Between the Doctor's Office, Urgent Care and the Emergency Room (ER)

When you're feeling sick or have an injury, there are several places you can go for medical care: a doctor's office, an urgent care center, or the ER. Here's a quick guide to help you know where to go.

 Doctor's Office	 Urgent Care or Retail Health Clinic	 Emergency Room (ER)
For non-emergency situations <ul style="list-style-type: none">• Your doctor knows your health history, including your medications and chronic conditions• Lower co-pay than a trip to the ER• Shorter wait times• Your doctor can refer you to a specialist or other medical professionals• For those on dialysis: Contact your dialysis facility before going to the hospital or ER (contact your primary care provider if the issue is unrelated to ESRD)	If you can't reach your doctor or need care outside of regular office hours <ul style="list-style-type: none">• Walk-in clinics can be found in many large pharmacies and retail stores• Treat simple conditions, such as cold, flu, ear infections and skin conditions• Staffed by nurse practitioners and physician assistants• Physicians on staff can provide care for a greater range of conditions, including performing x-rays	For urgent, acute, and life-threatening conditions <ul style="list-style-type: none">• If you have a health emergency, call 911 or go to the ER right away• Do not visit the ER for routine care or minor illness. The other options will save you time and money, and clear the way for patients in need of emergency treatment• For those on dialysis: Contact your dialysis facility after discharge from the hospital or ER and to reschedule any missed dialysis treatments

- This guide is for educational purposes only.
- Always contact your doctor or nurse line to help you decide where to go for care. Telephone numbers should be listed on the back of your insurance card.
- No matter where you go for care be sure to bring a current list of medications that you are taking.

This material was originally created by QSource Network Programs.

Reimagining health care,
together.

comagine.org



Helping Patients Navigate Hospital Discharge

A Learning Event for Community Health Workers: Session 1 of 2

This event is presented by Comagine Health, a Medicare Quality Innovation Network-Quality Improvement Organization under contract with the Centers for Medicare & Medicaid Services (CMS).

Community Health Workers can help patients, families and the health care system save money by reducing the frequency of emergency room visits, hospitalizations, readmissions and Nursing Home placements. Comagine Health invites you to participate in part one of a two-part virtual learning series. This series will teach Community Health Workers, Home Health Workers and other health care professionals how to guide patients through the complicated health care system and how to connect patients with health care and social services after they are discharged from the hospital.

Date: Wednesday, March 15, 2023
Time: 11 a.m. – 12 p.m. PST / 12 p.m. – 1 p.m. MST / 1 p.m. – 2 p.m. CST / 2 p.m. – 3 p.m. EST

About the Speaker

Robert has served as Manager of the Buckeye Fire Department's Community Paramedicine Program since 2017. He has over 22 years' experience as a Paramedic and member of the fire service and is a former City Councilmember. Robert is a proud native of Buckeye, Arizona.



Host: Robert Garza
Community Paramedicine Manager
Buckeye Fire Department (AZ)

Register Now!

Visit
<https://comagine.org/events/2465>
for the registration link

Learning Objectives

Participants will learn how to:

- Build relationships with new patients.
- Help patients understand hospital discharge instructions.
- Help patients manage prescription medications.
- Evaluate the home environment and eliminate safety hazards.
- Perform a Social Needs Assessment and connect patients to resources.



Helping Patients Navigate Hospital Discharge

A Learning Event for Community Health Workers: Session 2 of 2

This event is presented by Comagine Health, a Medicare Quality Innovation Network-Quality Improvement Organization under contract with the Centers for Medicare & Medicaid Services (CMS).

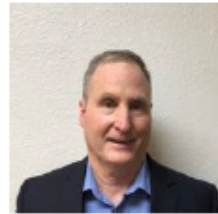
Community Health Workers (CHWs) can help patients, families and the health care system save money by reducing the frequency of emergency room visits, hospitalizations, readmissions and nursing home placements. Comagine Health invites you to participate in session two of a two-part virtual learning series. During this interactive session, we will discuss the role of CHWs in supporting patients who are discharged from the hospital from before, during and after discharge. CHWs, Home Health Workers and other health care professionals will also have the opportunity to ask questions to our panel of experts.

Date: Tuesday, April 18, 2023
Time: 11 a.m. – 12 p.m. PST / 12 p.m. – 1 p.m. MST / 1 p.m. – 2 p.m. CST / 2 p.m. – 3 p.m. EST

Register Now!

For the registration link, visit
https://comaginehealth.zoom.us/webinar/register/WN_85ZtcyTQ26DFEUSGFwpsA

Panelists:



Glenn Blankenship, MSW, LMSW
Hospital Social Worker & Case Manager
Saint Alphonsus Medical Center Ontario, OR



Alisa N. Howard
CHW Instructor & Consultant
Owner/Co-founder, Minority Health Consultants
Co-founder, The CHW Mentorship Network



Robert Garza
Community Paramedicine Manager
Buckeye Fire Department, AZ

Learning Objectives

Participants will learn about:

- How CHW services can complement existing Care Coordination activities
- Ways to advocate for a sustainable solution for CHWs to address hospital utilization
- Workforce development needs for CHWs

Continuing Education (CE) Credits

Comagine Health is accredited by the New Mexico Department of Health and the Nevada Certification Board to provide continuing education for Community Health Workers in those states. Comagine Health designates this Live Event for 1.0 CE credits.

Food for Thought

How can we support you and your organization with reducing readmissions, hospital utilization, and emergency department visits in your community?



Thank you!

Alex Topper, MPH – Improvement Advisor

Atopper@comagine.org

Comagine Health

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