2026 Oregon Rural Health Conference Presentation Slides

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OPPORTUNITY Just knock.

The Rural Front Line: Strengthening EMS Recruitment and Retention and Expanding Mobile Integrated Health in Oregon
October 8, 2026

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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.

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Who We Are

- Mission
  - The mission of the Oregon Office of Rural Health (ORH) is to improve the **quality**, **availability** and **accessibility** of health care for rural Oregonians.
- Vision
  - ORH'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.



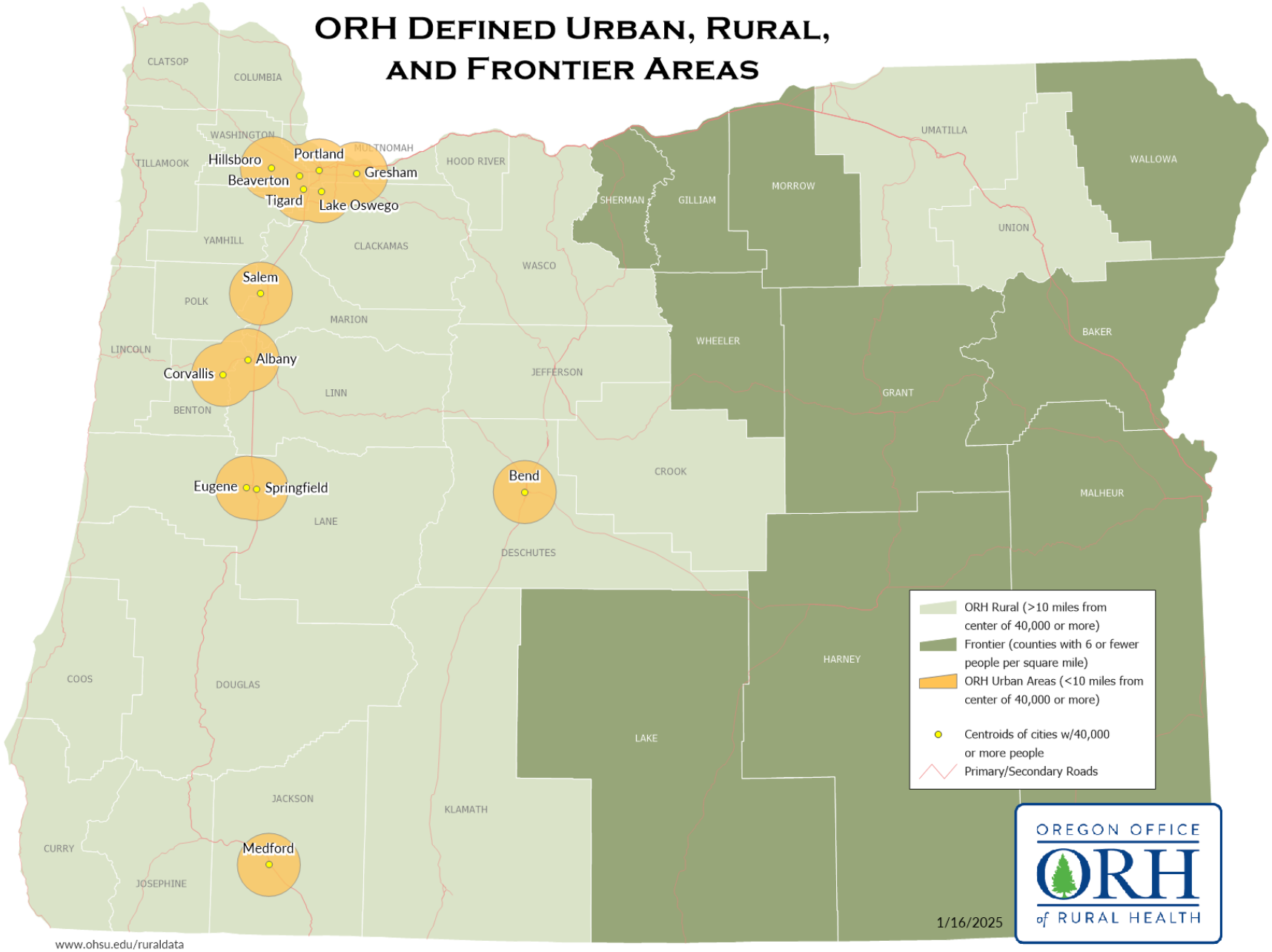


What ORH Does

- Coordinate rural health activities and support rural partnerships
- Provide technical assistance, educational programming and grants to rural health care facilities
  - Critical Access Hospitals (CAHs)
  - Rural Health Clinics (RHCs)
  - EMS/Mobile integrated health (MIH)
  - Population health
  - Public health
- Health care community-level data
- Health care workforce recruitment and retention support for Oregon's underserved communities

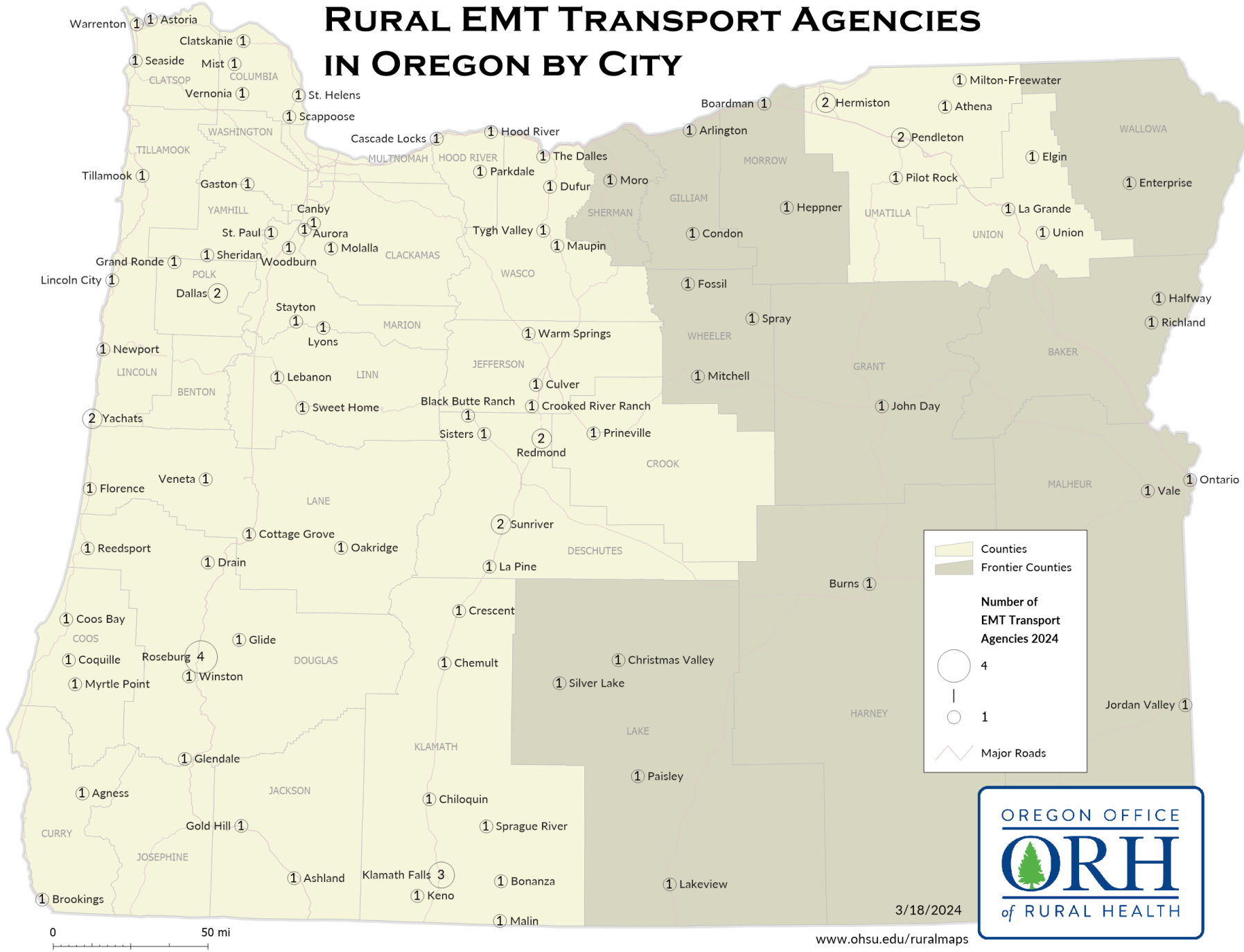
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ORH Defined Urban, Rural, and Frontier Areas

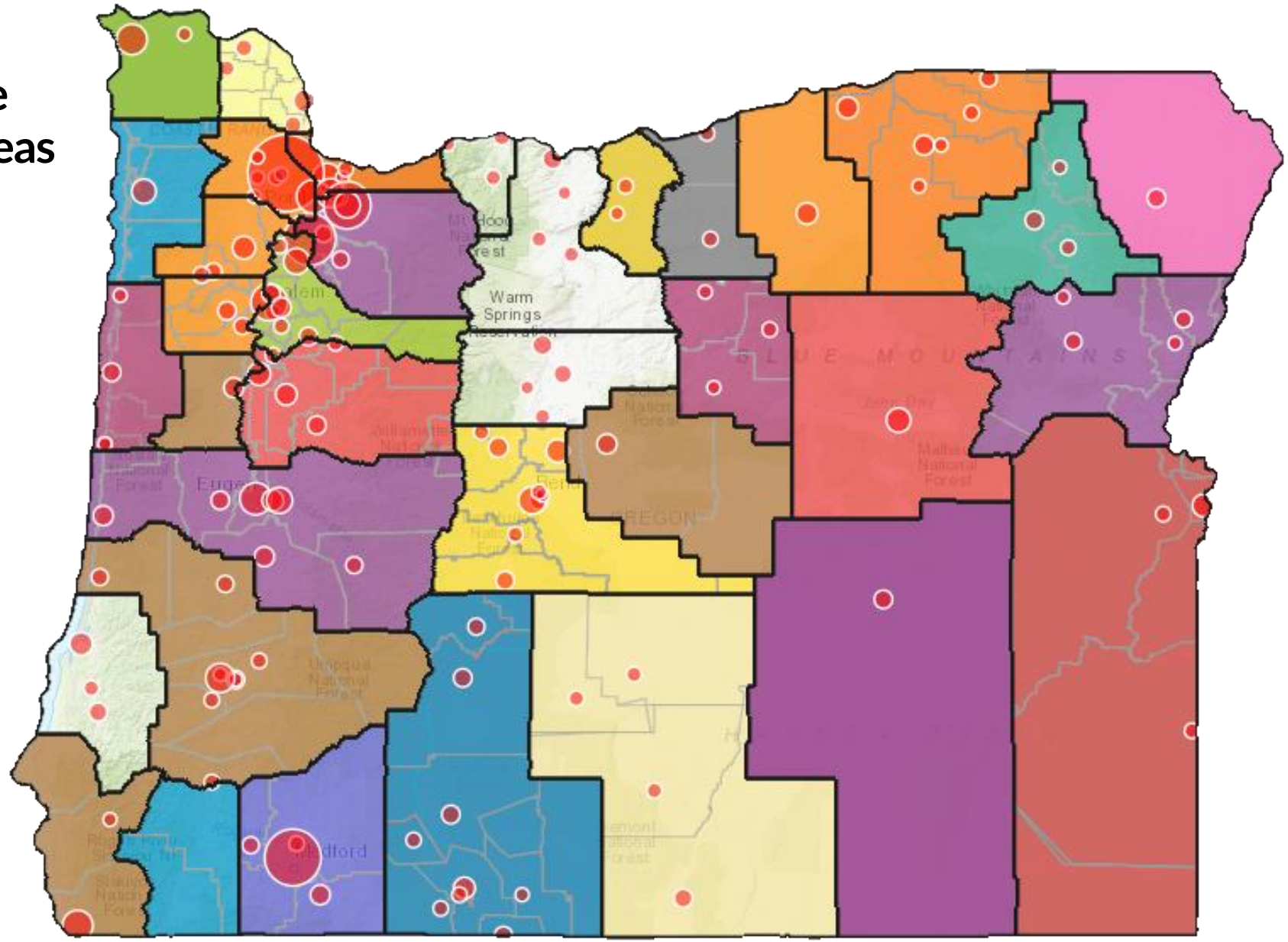


www.ohsu.edu/ruraldata

Rural EMT Transport Agencies in Oregon by City



Oregon Ambulance Service Areas



Legend

OREGON_AMBULANCE_SERVICE_AREAS - County Sources

- Linn
- Columbia
- Marion
- Clackamas
- Polk
- Washington
- Umatilla
- Benton
- Clatsop
- Lake
- Multnomah
- Sherman
- Wallowa
- Lincoln
- Harney
- Tillamook
- Lane
- Deschutes
- Klamath
- Malheur
- Crook
- Morrow
- Douglas

Licensed Ambulance Services (Ground)

Number of Ambulances

- > 48
- 35
- 25
- 15
- < 1
- Other

Legend

ASA - Created by OHA from ASA description

- Columbia
- Lake
- Malheur
- Baker
- Washington
- Klamath
- Yamhill
- Crook
- Deschutes
- Curry
- Union
- Wheeler
- Gilliam
- Grant
- Josephine
- Clatsop
- Harney
- Multnomah
- Sherman
- Wallowa
- Umatilla
- Jackson

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ORH History Supporting Rural/Remote EMS Agencies



Oregon Rural Volunteer EMS Provider Tax Credit

Helping EMS in Rural Oregon (HERO Program)



Partnered Rural Hospital/EMS Agency Simulations

Equipment Grants



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2024 Oregon Rural EMS Workforce Recruitment and Retention Needs Assessment

Top EMS resource needs (from survey and interview data)

- **Equipment (87.1%)**
  - High demand for ambulances, command vehicles, AEDs and cardiac equipment
  - 86% of agencies must **fundraise** to purchase essential equipment
- **Workforce recruitment (65%) and retention (64%)**
  - Only 18% of agencies reported **adequate staffing** for all emergency calls
  - **Barriers to recruitment** include long hours, training requirements and reliance on an aging volunteer pool
- **Retention-Specific Issues**
  - Heavy reliance on **volunteers** (57.2% in Oregon)
  - Volunteers often face **training access barriers** and financial strain (e.g., travel and tuition costs)
  - Retention hampered by **scheduling conflicts**, burnout and lack of accessible continuing education
  - Some agencies offer support (e.g., flexibility, career track opportunities), but most rely on **non-monetary incentives,** such as small tokens of appreciation

2024 Oregon Rural EMS Workforce Recruitment and Retention Needs Assessment *(continued)*

- **EMS staff training (65%)**
  - Training is often not locally available and costly
  - No hybrid (virtual/in-person) EMT courses; travel distances can exceed 2.5 hours one way
- **Billing and coding challenges (65%)**
  - Lack of staff training and resources to optimize reimbursement
  - Often managed by EMS personnel as a secondary duty, especially in volunteer-led agencies

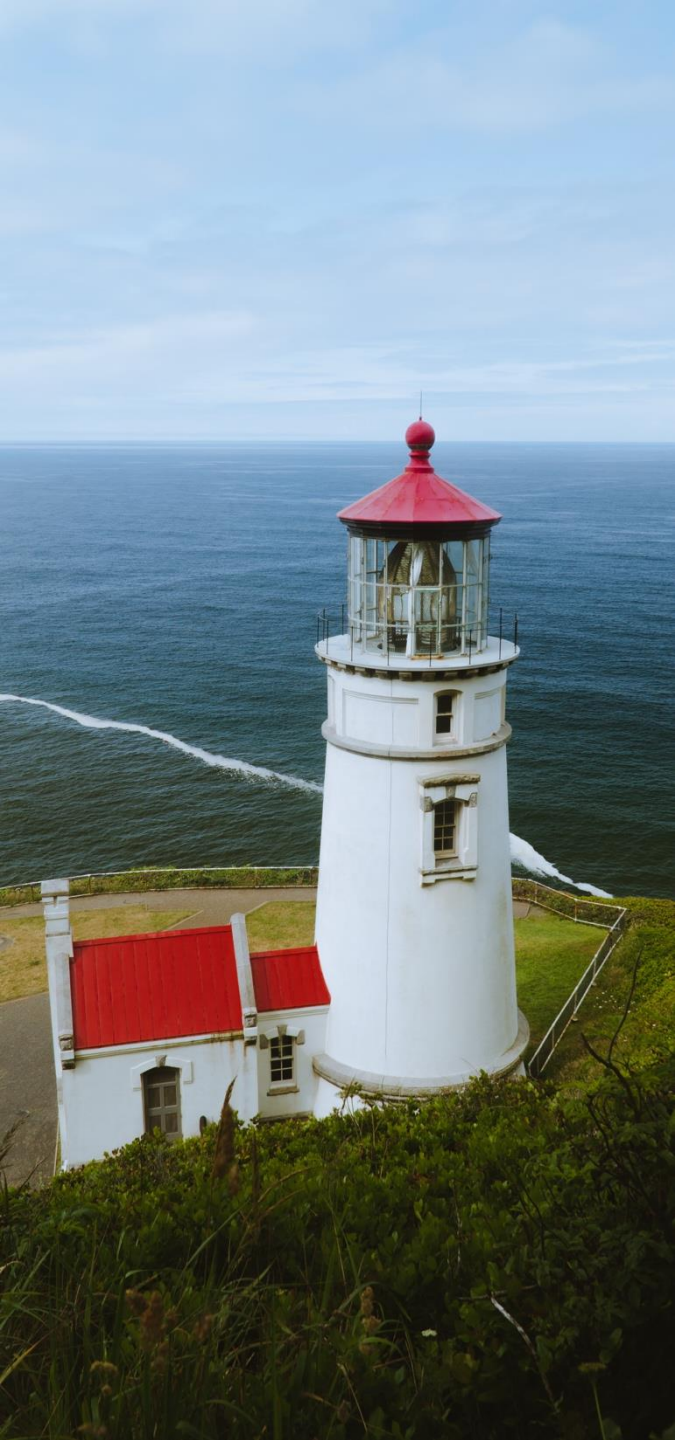

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Rural EMS Workforce and Recruitment Initiatives
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Medicare Rural Hospital Flexibility (Flex) Program EMS Supplement Grant

- Five-year grant from the Federal Office of Rural Health Policy
  - Sept.1, 2024 – Aug. 31, 2029, pending congressional approval of funds on a yearly basis
- Focus on EMS workforce recruitment and retention
  - EMS responder certification education and student barrier removal
  - HERO agency training grants
  - EMS staff and personnel training and support
  - Agency education and training for responder peer support, stress, burnout
  - Dual EMS job board (paid and volunteer)
  - Support EMS conference attendance

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EMS Recruitment and Retention, FY24 & FY25

- **Scholarships for Rural EMS Training and Certification**:
  - EMT (16), AEMT (7), EMT-Intermediate (4), and Paramedic (14), for a total of 41 EMS Education Scholarships ~ *Quick peek into FY26: 12 so far*
- **Student Barrier Removal**: Students Assisted: 11
- Three **EMR**-specific training courses funded, resulting in 33 new responders
- Helping EMS in Rural Oregon (HERO): Agencies Awarded: 14
- **Leadership** development/topics: Five total webinars, 52 attended; cohort
- **Billing and Coding** education: Eight total webinars, 136 attended; cohort
- Four agency representatives attended the **NW Peer Support Conference**
- **EMS conference scholarships** provided for three rural attendees

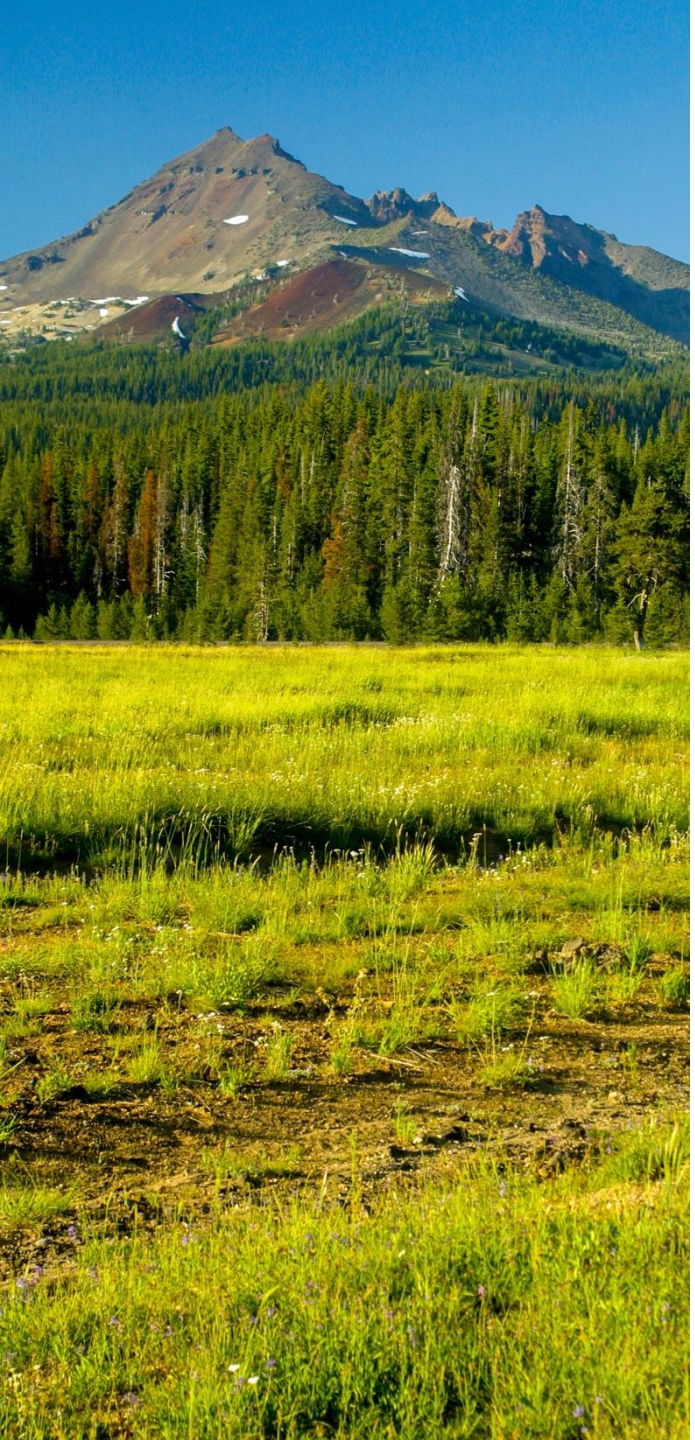
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EMS Recruitment and Retention, FY24 & FY25 *(continued)*

- **Community Colleges**: Supported two community college EMT/AEMT programs for 18 students, and one remote county's community college received an award for EMS textbooks
- **Special projects**:
  - Difficult airway course for two rural agencies: 33 attendees

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EMS Recruitment and Retention, FY24 & FY25 *(continued)*

- **New development**: Rural Oregon EMS-MIH SharePoint site
  - For agencies only – you must be added to the group site to enter
  - Safe space to share challenges, seek assistance, post questions or needs
  - EMS Equipment cohort for sourcing, group purchasing, passing forward
  - The group itself will guide its growth and additional features

- Explore high school students' career pathway utilizing EMR courses

- **In Progress**:
  - EMS dual job boards (paid and volunteer)
  - Expanding the peer workgroups and cohorts: EMS equipment acquisition and human resources

One additional item

- Community Paramedic (CP-C) training: scholarships for five students

You can learn more about all program offerings on ORH's website.

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Rural Mobile Integrated Health Program



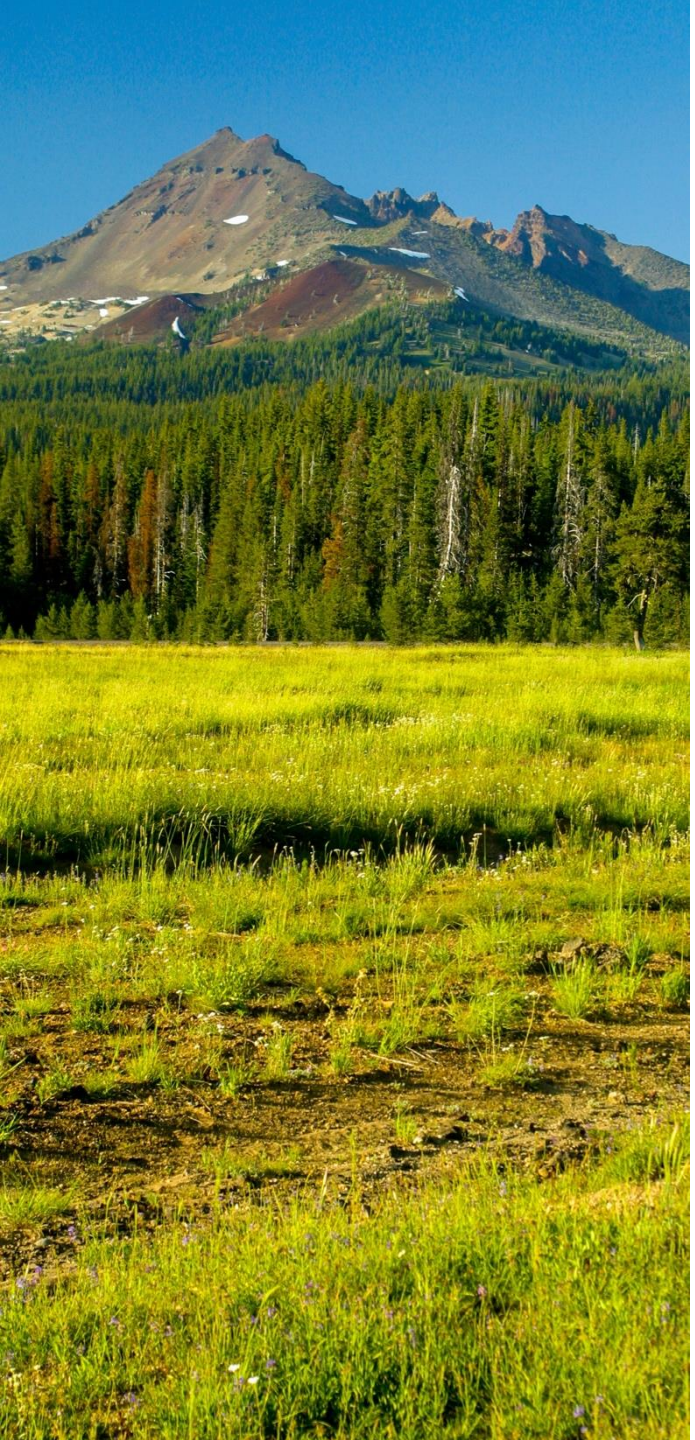
What is Mobile Integrated Health?

Mobile Integrated Health (MIH) is a patient-centered care delivery model that brings coordinated health and social services directly to patients outside of traditional hospital or clinic settings.

Examples:

- Follow-up after emergency department visits or hospital discharge
- Supporting patients with chronic disease management
- Performing medication reviews and reconciliation
- Providing patient education
- Connecting patients to primary care and community resources
- Addressing social drivers of health (transportation, food access, etc.)
- Providing care coordination

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Challenges MIH Addresses

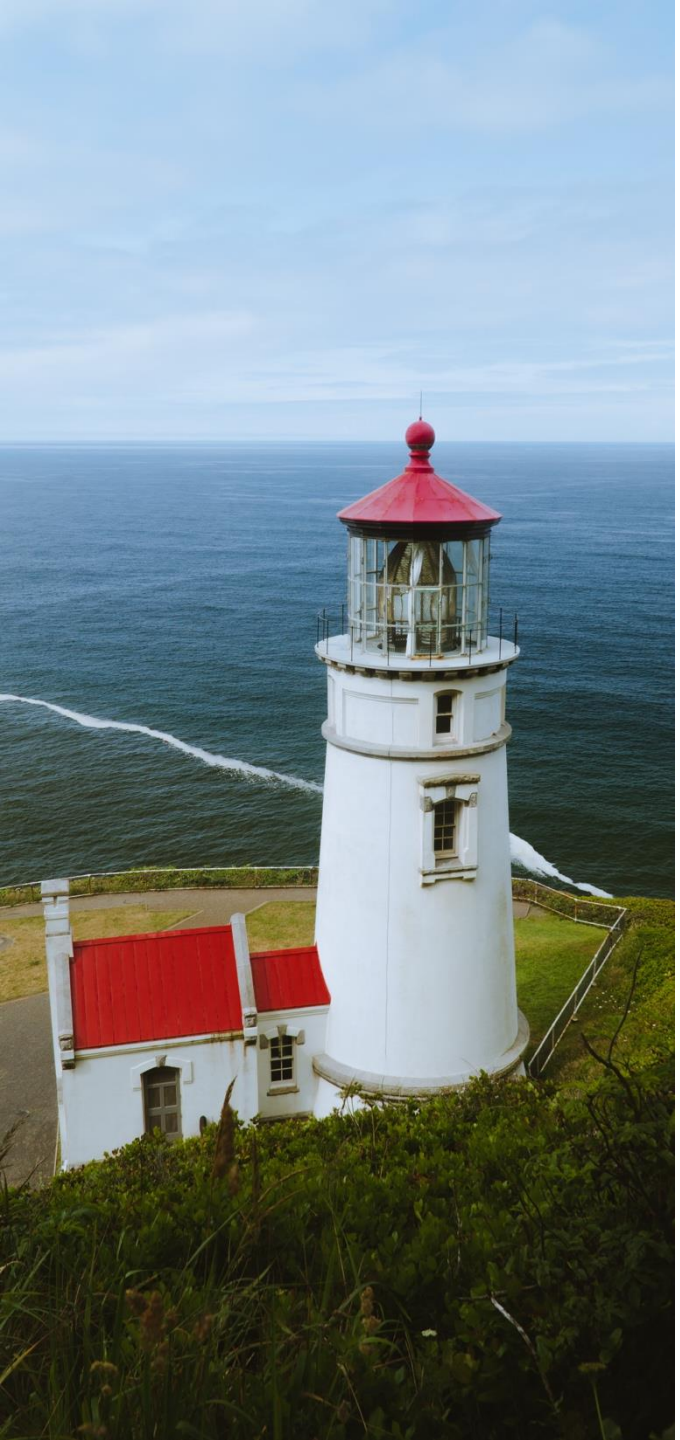
Patient Specific Needs and Access to Care

- Complex chronic disease management and/or care coordination needs
- Long travel distances to healthcare services
- Limited availability of local primary, preventive and specialty care

System Level

- Increasing healthcare costs
- Healthcare workforce shortages
- EMS and emergency department capacity
- 911 and emergency department utilization for non-emergent needs
- Hospital readmissions

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Why MIH?

- **Patients**
  - Improve access to health services and health outcomes
  - Greater continuity of care
  - Patient empowerment in care planning

- **EMS and healthcare organizations**
  - Reduce non-emergency 911 calls and emergency department visits
  - Support EMS retention by reducing burnout
  - Strengthen partnerships and cross-sector collaboration

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MIH Programs in Oregon

- MIH programs in Oregon are diverse and locally specific
- No state licensing requirements specific to MIH programs or MIH personnel in Oregon
- Program structure, services provided and clinical scope of practice determined by each program's medical director
- Staffing models vary based on a program's goals, patient population and community needs

No two MIH programs in Oregon look exactly alike







Funding MIH Programs in Oregon

Funding models vary across the state:

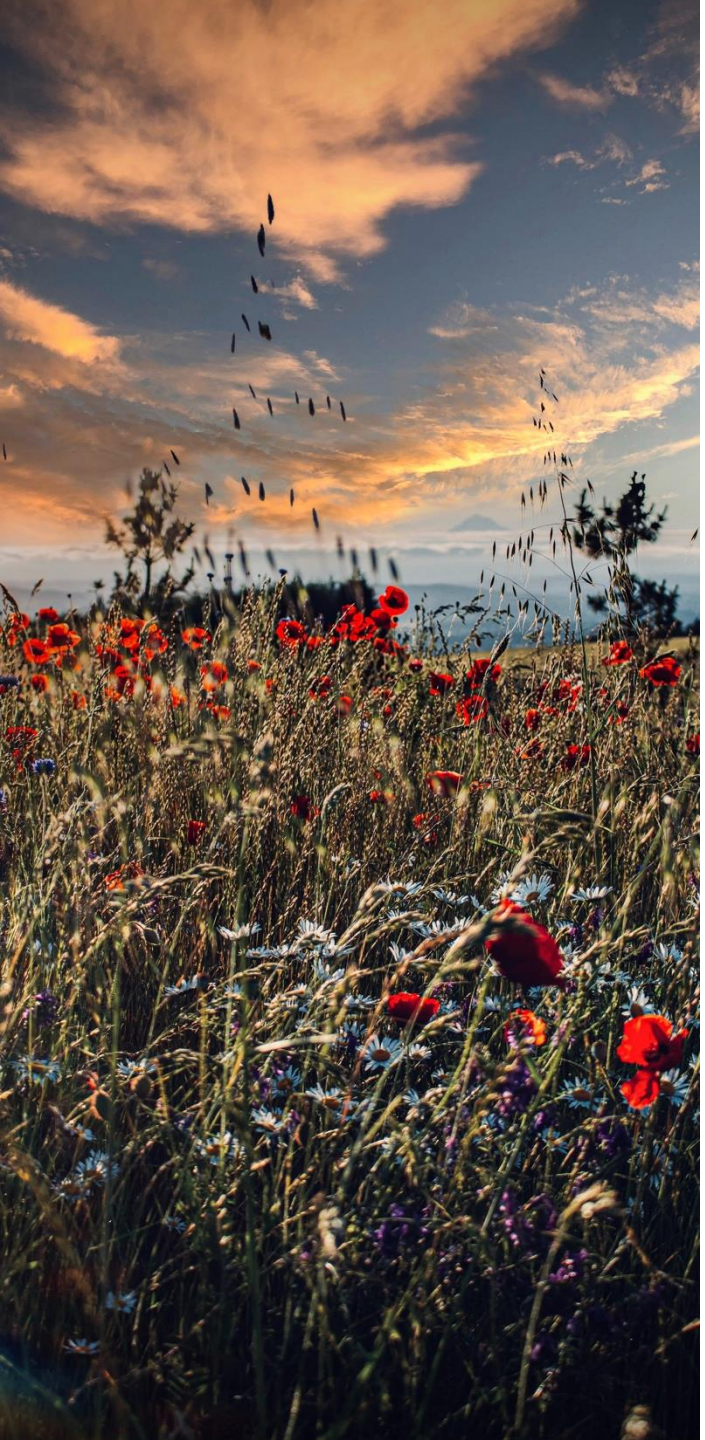
- Federal, state and other grants
- Hospital partnerships and contracts
- Coordinated Care Organization (CCO) contracts
- Local organization or agency support

Oregon MIH Coalition

- **Mission**: to foster collaboration, share best practices and advocate for policies that enable the growth of MIH in Oregon
- **Brings together** healthcare providers, emergency services and community partners to improve access to quality care, reduce healthcare costs and enhance patient outcomes
- **Pursuing legislation** that would allow community paramedics to bill for eligible services



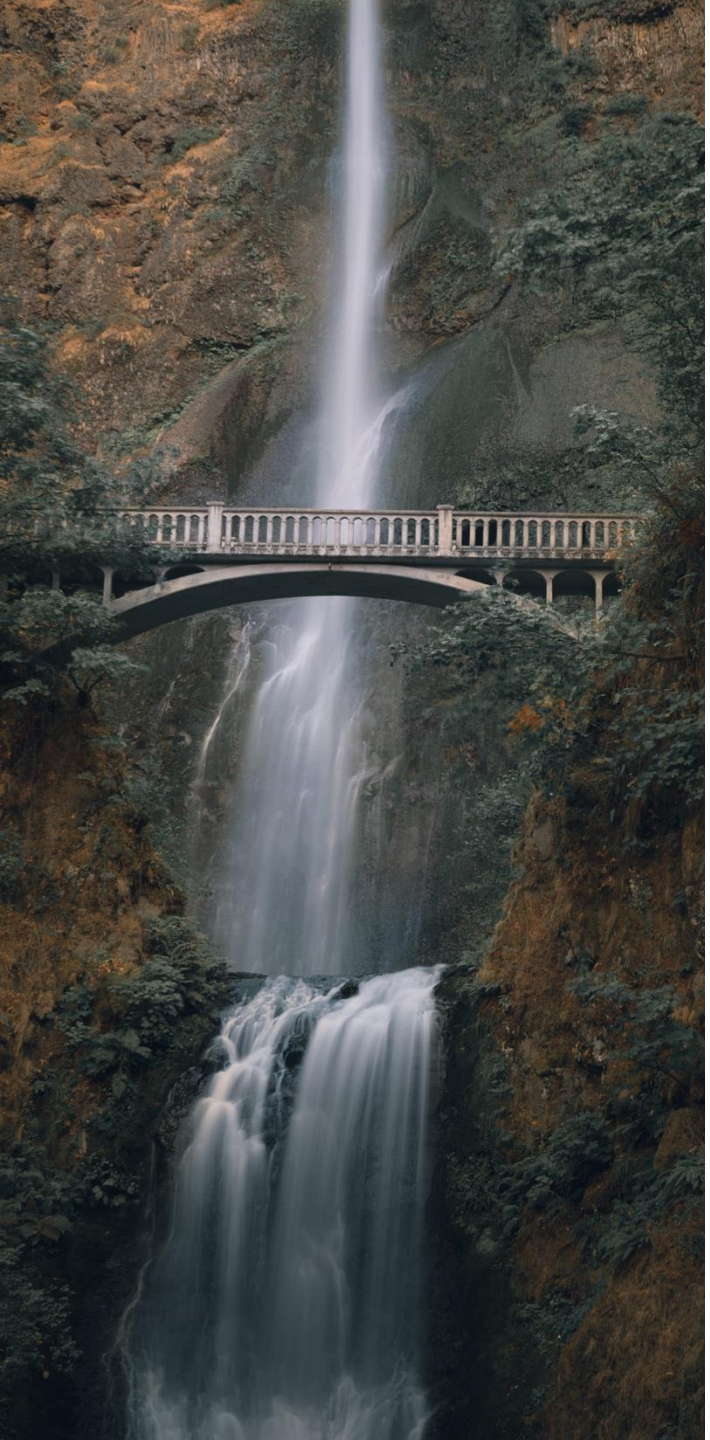
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ORH Rural MIH Program

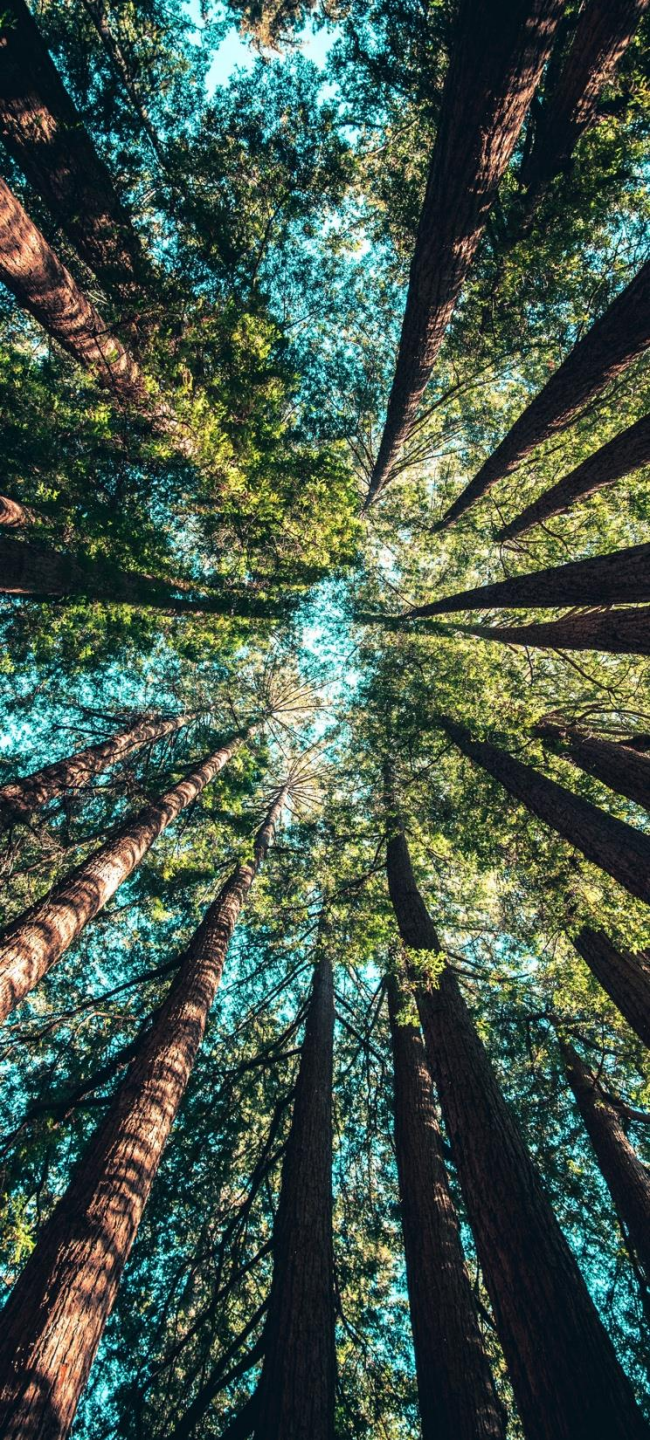
- **HRSA Rural Health Care Services Outreach Grant**
  - Four-year grant from the Federal Office of Rural Health Policy
  - August 1, 2025 – July 31, 2029
  - Focuses on expanding MIH programs in rural areas
  - Includes:
    - Developing and MIH-specific resources and technical assistance
    - Launching a pilot MIH program in Wheeler County

- **RHTP Catalyst Award**
  - Two-year grant from the Oregon Health Authority
  - July 1, 2026 – October 30, 2027
  - Focuses on establishing two new MIH programs and expanding the pilot MIH program in Wheeler County



Year 1 Program Impacts

- **Rural MIH program network**
  - 17 members representing rural clinic, EMS agency, public health and MIH experts
  - 7 meetings held
  - Strategic plan developed
- **Wheeler County MIH pilot**
  - MIH Community Health Worker hired
- **MIH toolkit**
  - Resources and platform identified
- **Scholarships awarded:**
  - Community Paramedic training: 6
  - Conference: 8
  - Student barrier removal: 1



MIH Resources and Opportunities

Available through ORH:

- Scholarships for community paramedic training
- Individual technical assistance for rural agencies/organizations interested in establishing and/or expanding MIH programs
- MIH learning collaborative and rural MIH peer meetups (coming soon)
- MIH toolkit (coming soon)

Additional resources:

- ORH Rural MIH Program
- Oregon Mobile Integrated Healthcare Coalition
- Community Paramedicine Topic Guide
- Rural MIH and Community Paramedicine Models
- The National Association of Emergency Medical Technicians (NAEMT) MIH-CP Toolkit
- MIH Success Stories

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Questions?

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Thank you!

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