



FORHP Efforts to Encourage Education and Training in Rural Communities

The 2021 RTT Collaborative Annual Meeting

April 9, 2021

Tom Morris
Associate Administrator
Federal Office of Rural Health Policy (FORHP)

Sheena Johnson
Policy Research Division
Federal Office of Rural Health Policy (FORHP)

Vision: Healthy Communities, Healthy People



Agenda

- Overview of HRSA & FORHP
- Evolution of FORHP Health Workforce Programs
- Medicare GME Provisions in Recent Legislation
- Resources



HHS, HRSA & FORHP

HHS.gov U.S. Department of Health & Human Services

I'm looking for...

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WHAT YOU NEED TO KNOW WHEN YOU'RE FULLY VACCINATED

People who are fully vaccinated can start to do some things they stopped doing because of the pandemic.

[Learn More](#)



Coronavirus (COVID-19)






HHS | MARCH 12, 2021 **Fact Sheet: The American Rescue Plan Reduces Health Care Costs, Expands Access to Insurance Coverage and Addresses Health Care Disparities**

ASPR | MARCH 12, 2021 **Biden Administration Takes Action Through HHS to Increase Number of Vaccinators**

HHS | MARCH 11, 2021 **Biden Administration to Expand COVID-19 Vaccine Program to 900 Community Health Centers**

Top Tasks & Priorities

Public Health
Contagious (COVID-19) Disease Prevention
Smoking Prevention
Physical Fitness & Nutrition
HIV/AIDS Prevention

Human Services
Help for Families
Head Start Center Locator
Poverty Guidelines
Adoption/Foster Care
Childcare

Healthcare
Health Insurance Reform
Drug Pricing
Value-Based Care
HHS and COVID-19
Medicaid & Medicare

Inside HHS
FY2020 Annual Financial Report
Latest News Releases
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Get reimbursed for COVID-19 testing and treatment of uninsured individuals. [Learn more >](#)

HRSA

Health Resources & Services Administration

Grants Loans & Scholarships Data Warehouse Training & TA Hub About HRSA

Step Up for Kidney Health

Celebrate National Kidney Month – sign up as an organ, eye, or tissue donor.

Find a Health Center

Find a health center near you for primary health care, telehealth services, and COVID-19 testing sites.

[Find a Health Center](#)

Funding Opportunities

Scholarships & Loan Repayment

Grants

HRSA Program Areas

- Health Centers
- Health Workforce
- HIV/AIDS & Ryan White
- Maternal & Child Health
- National Health Service Corps
- Organ Donation & Transplantation
- Federal Office of Rural Health Policy
- 340B Drug Pricing
- Injury Compensation
- data.HRSA.gov
- American Indian/Alaskan Native
- Poison Help

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HRSA

Health Resources & Services Administration

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Federal Office of Rural Health Policy

Coronavirus Important Information From the Federal Office of Rural Health Policy

[News & Announcements](#)
[Rural Communities Critical Response Program \(RCORP\) - Implementation](#) - Applications due March 12
[Evidence-Based Telehealth Grant Program](#) - Applications due April 2
[RCORP - Praxysstimulants Support](#) - Applications due April 12

Find Funding

Find upcoming and recent funding opportunities, and learn more about FORHP programs.

[Rural Health Policy](#)
 FORHP prepares regular policy announcements focusing on the impact regulations may have on rural communities.
 Updated: February 22, 2021

Rural Hospital Programs

More information on FORHP Rural Hospital programs, including the Medicare Rural Hospital Grant and Small Rural Hospital Transitions Project (SRHT).

[Rural Community Programs](#)
 More information on FORHP programs focused on increasing rural communities' access to care.

Telehealth Programs

FORHP resources and funded programs for the promotion of health care delivery, education, and health information services through telehealth technologies.

[Rural Health Research and Policy Programs](#)
 Learn more about FORHP research programs and access research results through the Rural Health Research Gateway.



The Federal Office of Rural Health Policy

 Social Security

SEARCH MENU LANGUAGES SIGN IN / UP

Compilation Of The Social Security Laws

OFFICE OF RURAL HEALTH POLICY

Sec. 711. [42 U.S.C. 912] (a) There shall be established in the Department of Health and Human Services (in this section referred to as the "Department") an Office of Rural Health Policy (in this section referred to as the "Office"). The Office shall be headed by a Director, who shall advise the Secretary on the effects of current policies and proposed statutory, regulatory, administrative, and budgetary changes in the programs established under titles XVIII and XIX on the financial viability of small rural hospitals, the ability of rural areas (and rural hospitals in particular) to attract and retain physicians and other health professionals, and access to (and the quality of) health care in rural areas.

(b) In addition to advising the Secretary with respect to the matters specified in subsection (a), the Director, through the Office, shall—

- (1) oversee compliance with the requirements of section 1102(b) of this Act and section 4403 of the Omnibus Budget Reconciliation Act of 1987^[21] (as such section pertains to rural health issues),
- (2) establish and maintain a clearinghouse for collecting and disseminating information on—
 - (A) rural health care issues, including rural mental health, rural infant mortality prevention, and rural occupational safety and preventive health promotion,
 - (B) research findings relating to rural health care, and
 - (C) innovative approaches to the delivery of health care in rural area, including programs providing community-based mental health services, pre-natal and infant care services, and rural occupational safety and preventive health education and promotion,
- (3) coordinate the activities within the Department that relate to rural health care,
- (4) provide information to the Secretary and others in the Department with respect to the activities, of other Federal departments and agencies, that relate to rural health care, including activities relating to rural mental health, rural infant mortality, and rural occupational safety and preventive health promotion, and
- (5) administer grants, cooperative agreements, and contracts to provide technical assistance and other activities as necessary to support activities related to improving health care in rural areas.

^[21] See Vol. II, P.L. 100-203, §4403.



The Federal Office of Rural Health Policy

Organizational Structure

The Federal Office of Rural Health Policy provides policy support to the Office of the Secretary and administers a number of rural health grant programs that focus on the development of rural health networks, black lung clinics, telehealth, and the opioid crisis.



Community Based Division (CBD)

Black Lung, Care Coordination, Network Development and Planning, Quality Improvement, Outreach



Hospital State Division (HSD)

State Offices of Rural Health, Flex and Small Rural Hospital Improvement Programs, Rural QI TA, Small Rural Hospital Transitions



Office for the Advancement of Telehealth (OAT)

Telehealth Resource Centers, Network Grants, Licensure Portability, Rural Child Poverty, Rural Veterans Health Access



Policy Research Division (PRD)

Rural Health Research Centers, Rural Health Value, Rural Policy Analysis, RHC Policy and Clinical Assessment



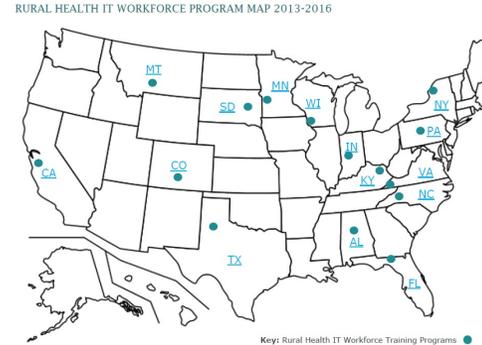
Rural Strategic Initiatives Division (RSID)

Rural Community Opioids Response Programs (Planning, Implementation, MAT Expansion) and Cooperative Agreements

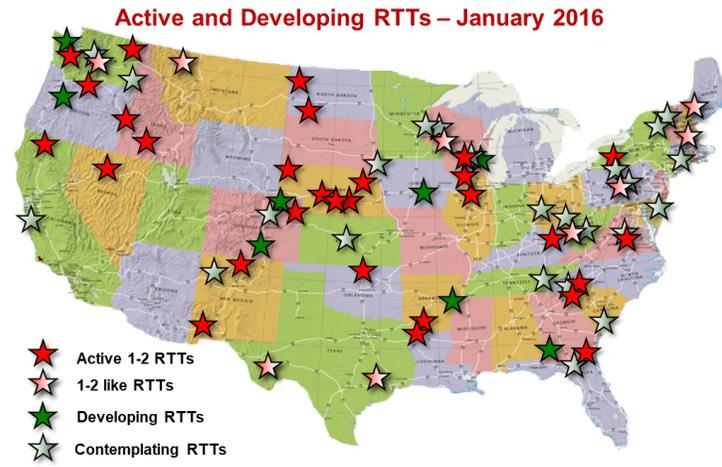


Evolution of FORHP Health Workforce Programs

[Rural Health Workforce Development Program \(2010-2013\)](#) – supported 20 initiatives to develop innovative, community-based, clinical health training and educational programs to recruit, retain, and train health professionals for rural practice.



[Rural Health IT Workforce Program \(2013-2016\)](#) – supported formal rural health networks across 15 states that focus on activities related to recruitment, education, training, and retention of health information technology specialists.



RTT Technical Assistance Program – Updated 1-16-2016, Randall Longenecker, Senior Project Advisor

[Rural Training Track Technical Assistance \(RTT-TA\) Program \(2010 -2016\)](#) – consortium that helped support communities, providers and institutions interested in developing RTTs, as well as others interested in rural physician workforce issues.

Later, would become the RTT Collaborative in 2012 and precursor to the Rural Residency Planning and Development Program.

Rural Residency Planning & Development (RRPD) Program

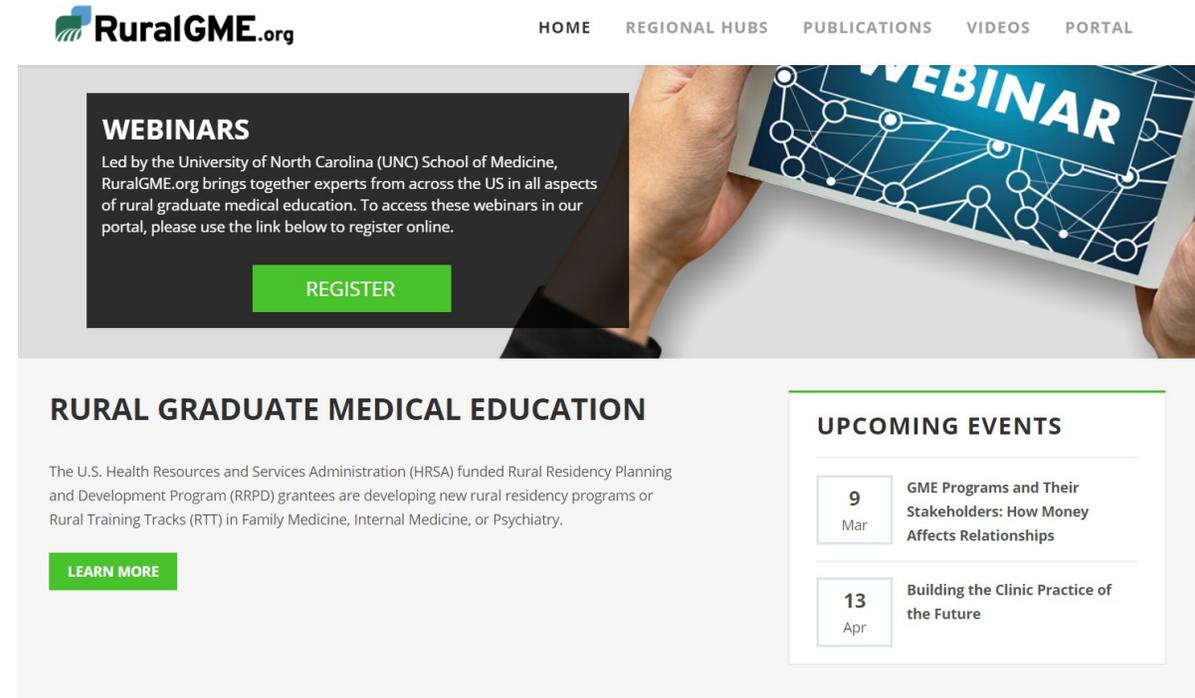


Evolution of FORHP Health Workforce Programs (cont.)

Rural Residency Planning and Development (RRPD) Program

FY18 RRPD Technical Assistance (RRPD-TA) Program

- **FORHP and BHW cross-bureau collaboration.**
- Consortium led by the University of North Carolina (UNC) at Chapel Hill consist of **experts in all aspects of rural residency development** and structured into 3 regional hubs (central, eastern, and western).
- Established the RRPD-TA Center in anticipation of the FY19 RRPD grant program and provided resources to RRPD applicants.
- Focus on providing technical assistance, resources and tools to RRPD award recipients including **accreditation, financing, faculty development, and resident recruitment and training** (e.g., webinars, annual meeting, TA advisors).
- **Website:** <https://www.ruralgme.org/>

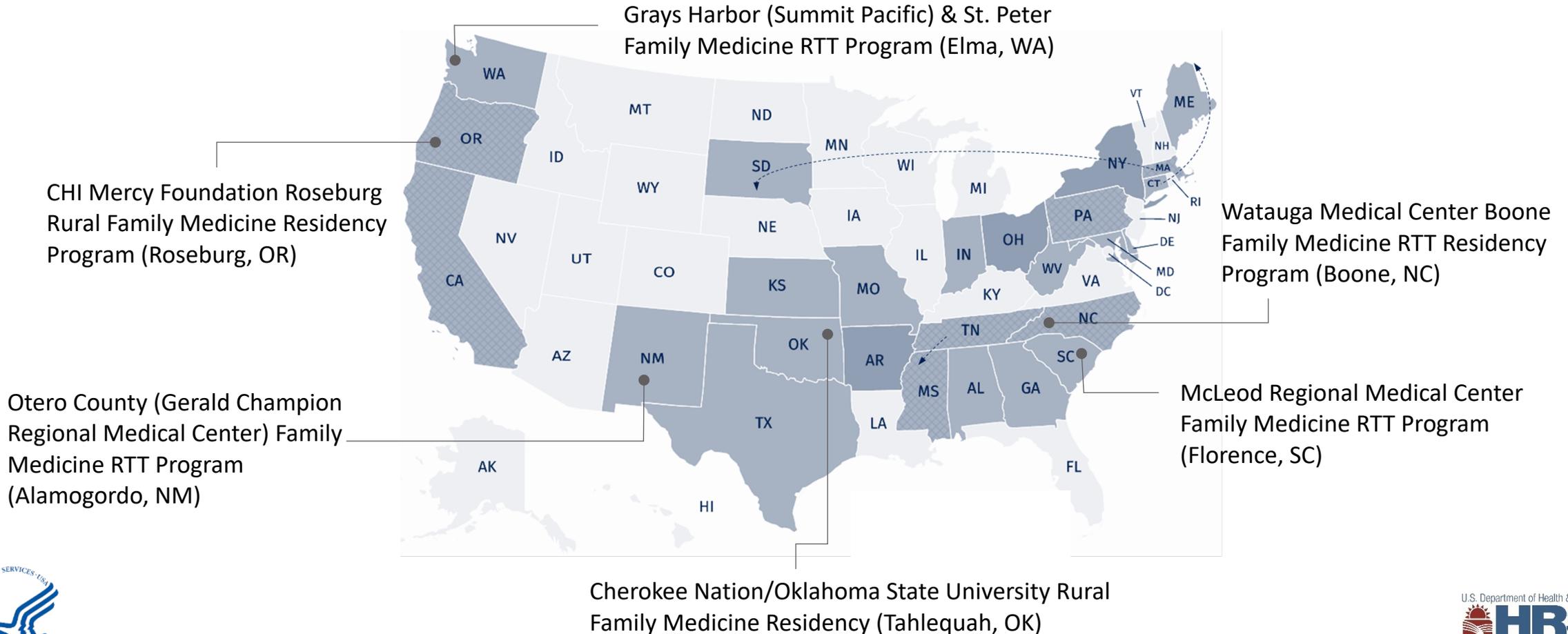


The screenshot shows the RuralGME.org website. At the top, there is a navigation menu with links for HOME, REGIONAL HUBS, PUBLICATIONS, VIDEOS, and PORTAL. The main content area features a 'WEBINARS' section with a green 'REGISTER' button. Below this is a section for 'RURAL GRADUATE MEDICAL EDUCATION' with a 'LEARN MORE' button. On the right side, there is a 'UPCOMING EVENTS' section listing two events: 'GME Programs and Their Stakeholders: How Money Affects Relationships' on March 9th and 'Building the Clinic Practice of the Future' on April 13th.

Evolution of FORHP Health Workforce Programs (cont.)

Rural Residency Planning and Development (RRPD) Program

Six award recipients matriculated over 30 residents in AY 2020 and more are expected to start this fall 2021.



Medicare GME Provisions in Recent Legislation

Promoting the Growth of Graduate Medical Education Programs



Sec. 126 Distribution of
Additional Residency Positions



Sec. 127 Promoting Rural
Hospital GME Funding
Opportunity



Sec. 131 New Medical
Residency Training Programs
after hosting Resident Rotators
for Short Durations

Consolidated Appropriations Act, 2021 (H.R.133)

<https://www.congress.gov/116/bills/hr133/BILLS-116hr133enr.pdf>



Implications for New Rural Residency Programs

- Favorable for expanding the “universe” of rural residency training (e.g. RRPD);
- Promotes greater collaboration between rural and urban hospitals to address rural physician workforce needs;
- Promotes greater flexibility for residency programs in other specialty areas to establish RTTs; and
- Eliminates payment barriers for rural hospitals involved in RTTs to qualify and receive Medicare GME funding.



Resources

Rural Health Research Gateway – Workforce Research

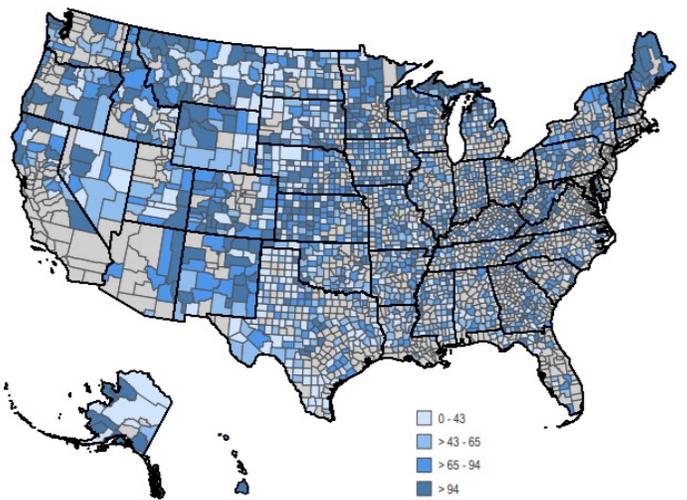
Policy Brief #167 • June 2020



Supply and Distribution of the Primary Care Workforce in Rural America: 2019

**Primary care is the provision of integrated, accessible health care services by clinicians who are accountable for addressing a majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community.*¹*

Figure 1: Primary Care Physicians* in U.S. Counties per 100,000 Population



Data Source: National Plan and Provider Enumeration System (NPPES) National Provider Identifier (NPI), April 2019
*Family Physicians, General Internists, General Pediatricians

<https://www.ruralhealthresearch.org>

Table 1: Primary Care Providers per 100,000 Population in U.S. Counties by Urban Influence Category

	Family Physician Provider/100,000 Pop (Count)	Internal Medicine Provider/100,000 Pop (Count)	Pediatrician Provider/100,000 Pop (Count)	Nurse Practitioner Provider/100,000 Pop (Count)	Physician Assistant* Provider/100,000 Pop (Count)
U.S.	42.5 (139,969)	45.4 (149,446)	21.1 (69,334)	68.3 (224,806)	40.6 (133,699)
Metropolitan	41.7 (118,099)	49.6 (140,513)	23.1 (65,339)	69.5 (196,776)	42.5 (120,343)
Non-Metro	47.4 (21,870)	19.4 (8,933)	8.7 (3,995)	60.8 (28,030)	29.0 (13,356)
Micropolitan	46.2 (12,680)	24.4 (6,684)	11.2 (3,075)	64.6 (17,724)	32.3 (8,856)
Non-core	49.2 (9,190)	12.0 (2,249)	4.9 (920)	55.2 (10,306)	24.1 (4,500)

Data Sources: National Plan and Provider Enumeration System (NPPES) National Provider Identifier (NPI) data, April 2019, the U.S. Department of Agriculture Economic Research Service (ERS) Urban Influence Codes, 2013, and the 2019 Claritas U.S. population data.
*Data is for all PAs because PA specialty could not be determined using NPPES taxonomy codes. See "Data and Methods" section for details.

Table 2: U.S. Counties Without Primary Care Providers by Urban Influence Category

	Counties without Family Physicians Provider (Percent)	Counties without Internal Medicine Provider (Percent)	Counties without Pediatrician Provider (Percent)	Counties without Nurse Practitioner Provider (Percent)	Counties without Physician Assistant* Provider (Percent)
U.S. (3,135 counties)	179 (6%)	892 (29%)	1,298 (43%)	158 (5%)	543 (18%)
Metropolitan (1,164 counties)	22 (1%)	159 (5%)	235 (8%)	19 (1%)	116 (4%)
Non-Metro (1,971 counties)	157 (5%)	733 (24%)	1,063 (35%)	139 (5%)	427 (14%)
Micropolitan (640 counties)	23 (1%)	78 (3%)	127 (4%)	18 (1%)	60 (2%)
Non-core (1,331 counties)	134 (4%)	655 (22%)	936 (31%)	121 (4%)	367 (12%)

Data Sources: National Plan and Provider Enumeration System (NPPES) National Provider Identifier (NPI) data, April 2019, the U.S. Department of Agriculture Economic Research Service (ERS) Urban Influence Codes, 2013, and the 2019 Claritas U.S. population data.
*Data is for all PAs because PA specialty could not be determined using NPPES taxonomy codes. See "Data and Methods" section for details.



Resources

Rural Health Information Hub (RHIfhub)

Topic Guides

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Rural Healthcare Workforce

Maintaining the healthcare workforce is fundamental to providing access to quality healthcare in rural areas. Rural healthcare facilities must employ enough healthcare professionals to meet the needs of the community. They must have proper licensure, adequate education and training, and cultural competency skills. Equally important, optimizing how health professionals are used and enhancing coordination among them helps ensure that patients are getting the best care possible.

Strategies can include:

- Using interprofessional teams to provide coordinated and efficient care for patients and to extend the reach of each provider
- Ensuring that all professionals are fully utilizing their skill sets and working at the top of their license; that is, practicing to the full extent of their training and allowed scope of practice.
- Removing state and federal barriers to professional practice, where appropriate
- Changing policy to allow alternative provider types, once evidence shows they can provide quality care

Funding Opportunities

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Rural Healthcare Workforce – Funding & Opportunities

For additional funding options, please see RHIfhub's [Online Library: Funding & Opportunities](#)

Sort By: [Date](#) | [Name](#) Hide Inactive Funding

[Narrow by type](#) [Narrow by geography](#) [Narrow by topic](#)

Indian Health Service Loan Repayment Program

Loan repayment for undergraduate and graduate health professional educational loans in return for full-time clinical service in Indian Health Service programs.

Geographic coverage: Nationwide

Application Deadline: Aug 15, 2019

Sponsors: Indian Health Service, U.S. Department of Health and Human Services

NIDDK Education Program Grants (R25 Clinical Trial Not Allowed)

Grants to support educational activities that complement and/or enhance the training of a workforce to meet the nation's biomedical, behavioral and clinical research needs. Institutions are encouraged to diversify their student and faculty populations to enhance the participation of individuals from groups identified as underrepresented in the biomedical, clinical, behavioral and social sciences.

Models and Innovations

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Rural Healthcare Workforce – Models and Innovations

These stories feature model programs and successful rural projects that can serve as a source of ideas and provide lessons others have learned. Some of the projects or programs may no longer be active. Read about the [criteria and evidence-base](#) for programs included.

Sort By: [Date](#) | [Name](#)

[Narrow by geography](#) [Narrow by topic](#)

Promising Examples

High Plains Community Health Center Care Teams

Updated/reviewed February 2019

- **Need:** Meeting health care demands in a region with a limited number of physicians, where recruiting additional providers is considered impractical.
- **Intervention:** Using the additional support of health coaches, implementation of care teams consisting of 3 medical assistants to support each provider.
- **Results:** More patients seen per provider hour, with improved patient outcomes and clinic cost savings.



<https://www.ruralhealthinfo.org/>



Resources

The National Rural Recruitment and Retention Network (3RNet)

- State-Level resource for job seekers and employers
- Tools for enhancing retention
<https://www.3rnet.org/>

3RNet Healthcare Jobs Across the Nation

Login Register

For Healthcare Professionals For Employers Members About Us 800-787-2512

Welcome to 3RNet
We are a national nonprofit network of members committed to matching healthcare professionals with rural and underserved jobs. [Register now for FREE.](#)

Search Job Opportunities

<< Any Profession >>

Select State(s)

Search Now Register Now

Finding jobs on 3RNet is as easy as ...

- 1 Search Jobs**
Jobs available in every state! Search dozens of specialties and professions. Start now!
- 2 Register**
Free 3RNet registration gets you: full job details such as compensation and contact information; email notifications on new jobs that meet your needs.
- 3 Get Answers**
3RNet members can provide: additional unbiased information on jobs, loan repayment programs, and J1 Visa Waivers.

Register today!

- Receive email notifications for new jobs
- View full job details
- Access compensation information
- Save jobs to your profile
- Get contact information
- Obtain individualized help

Employers learn more

<https://www.3rnet.org/>



Resources

Rural Prep



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WHAT WE DO



Conduct research to improve education and training for rural primary care practice.

Recently published in the Journal of Rural Health: [Pipelines to Pathways: Medical School Commitment to Producing a Rural Workforce](#)

- Collaborative for Rural Primary care, Research, Education and Practice (Rural PREP)
- Focus on improving and sustaining rural health through community engagement and research in rural primary care health professions education.
- Funded by HRSA's BHW, Academic Units for Primary Care Training and Enhancement (AU-PCTE) grant program.

<https://ruralprep.org/>



FORHP Weekly Announcements

- Rural-focused Funding Opportunities
- Policy and Regulatory Developments Affecting Rural Providers and Communities
- Rural Research findings
- Policy updates from a Rural Perspective

To sign up: Email Michelle Daniels at mdaniels@hrsa.gov



Announcements from the Federal Office of Rural Health Policy

August 1, 2019

What's New

New Rural Quality Grants Awarded. The Federal Office of Rural Health Policy (FORHP) is pleased to announce over \$6.3M has been awarded to 32 rural community healthcare organizations for the new competitive funding cycle of the Small Health Care Provider Quality Improvement (Rural Quality) Program. The Rural Quality Program is a three-year grant program designed to provide support to rural primary care providers for the implementation of activities that address improvements to the quality and delivery of rural health care services in the primary care setting using evidence-based models. Quality improvement activities that address the integration of behavioral health into the primary care setting, value-based care, and patient centered medical homes are also encouraged by the program. Additional program objectives include: improved health outcomes for patients; enhanced chronic disease management; and better engagement with patients and their caregivers.

Improving the Health of Rural Communities Through Collaboration – Thursday, August 15 at 1:00 pm ET. This webinar introduces a new resource, *A Guide for Rural Healthcare Collaboration and Coordination*. Hear how rural hospitals, community health centers, local public health



Contact Information

Tom Morris
TMorris@HRSA.gov



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www.HRSA.gov



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