RTT Technical Assistance Program Update

RTT Collaborative Annual Meeting

May 28, 2015
Madison, Wisconsin

Dan Mareck, MD
Chief Medical Officer

U.S. Department of Health and Human Services
Health Resources and Services Administration
Federal Office of Rural Health Policy

Presentation Overview

- Selected FORHP Update
- Status of the RTT-TA Program
- President's FY16 Budget
- ACA and Workforce
- A Few Rural Resources

Role of the Federal Office of Rural Health Policy

- Voice for Rural within HHS including Policy Review
- Supports Rural Health Research
- Supports Rural Health Grant Programs

FORHP Structure

Hospital State Division (HSD):

- Supports SORHs and administers the Medicare Rural Hospital Flexibility Program (Flex) and SHIP grants
- Supports TA and quality for small rural hospitals including critical access hospitals

Community Based Division (CBD):

- Direct support of community organizations for health service delivery and health networks

Office for the Advancement of Telehealth (OAT):

- Provides funding for telehealth grants and resource centers

Policy Research Division:

- Coordinates policy review of regulations impacting rural providers and beneficiaries; Funds Rural Health Research Centers and staffs NACRHHS committee

FORHP Budget FY 2015

Rural Health Policy Development	$9 million
Rural Health Outreach	$57 million
Rural Hospital Flexibility	$41 million
State Offices of Rural Health	$10 million
Telehealth	$14 million
Radiogenic Diseases	$2 million
Black Lung	$7 million

How FORHP Programs Support Rural Hospitals

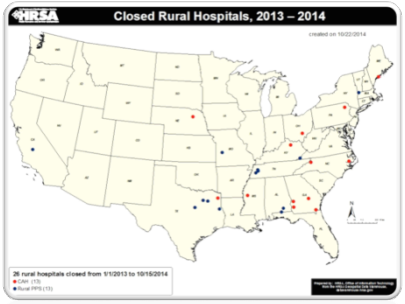
- Flex
- SHIP
- Small Health Care Provider QI

- Regulation Review
- Research and Analysis
- Flex Monitoring Team
- National Advisory Committee on Rural Health & Human Services

- State Office of Rural Health
- Technical Assistance & Services Center
- Rural Assistance Center
- RHC TA Series
- Rural Health Value and Rural Hospital Transitions

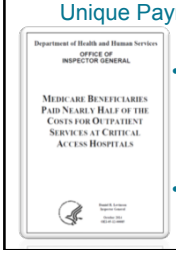
- ACA Outreach and Enrollment
- Outreach, Network and Quality Grants
- Telehealth Networks

Assessing Rural Hospital Risk

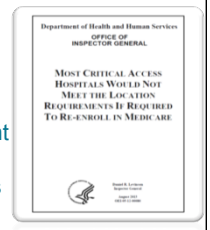


Regulatory Environment for CAHs

- Continued Focus on CAH's Unique Payment Status at

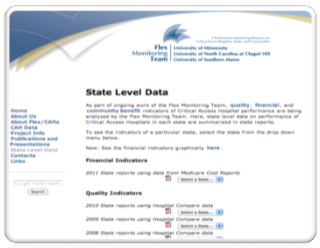


- Medicare Payment Updates, Other Regulatory Issues
- FORHP Role … Providing Context



Flex Monitoring Team

Studies and Data on Critical Access Hospital Issues and State Flex Programs



http://www.flexmonitoring.org/indicators.shtml

Quality Tools for Small & Rural Hospitals

For More Information:

https://www.ruralcenter.org/tasc/mbqip
http://www.ahrq.gov/professionals/index.html
http://www.ruralhealthresearch.org/topics/critical-access-hospitals

FORHP Provides Staff Support

National Advisory Committee on Rural Health & Human Services

- Advises the Secretary of HHS on Rural Issues
- Policy Briefs and Recommendations Available Online

http://www.hrsa.gov/advisorycommittees/rural/publications/index.html

Research

- Research Centers
  - The only Federal research program entirely dedicated to producing policy-relevant research on health care and population health in rural areas
  - Help policy-makers better understand the problems that rural communities face
  - Analyze the implications of Federal and State policy options
  - Communicate research results to policy-makers and others who may take action

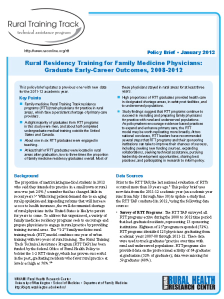
Resources

Policy and Research

http://www.ruralhealthresearch.org/

Policy Briefs Available

Patterson DG, Longenecker R, Schmitz D, Phillips Jr RL, Skillman SM, Doescher MP. *Policy Brief: Rural Residency Training for Family Medicine Physicians: Graduate Early-Career Outcomes, 2008-2012*. Seattle, WA: WWAMI Rural Health Research Center, University of Washington; 2013.



FORHP Workforce Interventions

- Rural Workforce Charge in the President's Budgets' beginning in FY10 for the "Improving Rural Health Care Initiative"
- Focus Areas
  - Expanding Rural Residency Training
  - Pilot grant for rural training experiences
  - Partnering with Other Federal Partners
    - Enhance work of the Rural Recruitment and Retention Network

Rural Training Track Technical Assistance Program

- Current 3-year cooperative agreement with NRHA began in FY 2013
- Year 3 of funding begins Sept. 1, 2015
- RTT Collaborative (Sustainability)
  - Developed 501(c)(3) to enhance/enlarge focus to include other models of rural medical student and residency training

RTT TAP Objectives

- Sustain established family medicine residency RTTs.
- Assist in the development of new RTTs.
- Increase the number of students who match to RTTs.
- Build an evidence base of RTT program characteristics and graduate outcomes.

Rural Training Track Technical Assistance Program

"A consortium of organizations and individuals committed to sustaining RTTs as a strategy in rural medical education"

NRHA

RAC Rural Assistance Center

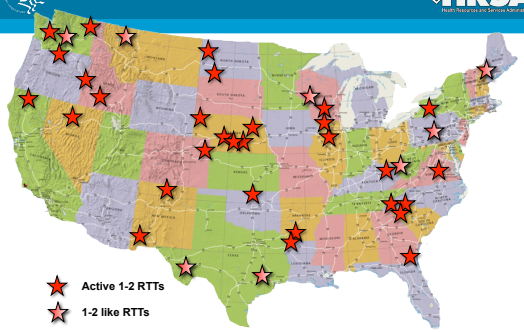
Rural Training Track technical assistance program

The linked image can

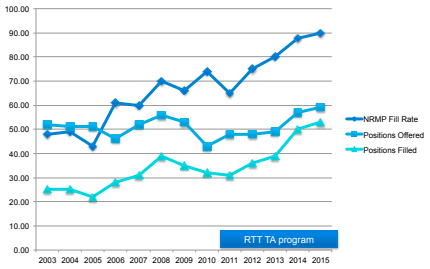
RURAL HEALTH RESEARCH CENTER

ROBERT GRAHAM CENTER

Funded and implemented in cooperation with Federal Office of Rural Health Policy



30 (38) Active 1-2 RTTs as of January 2015
RTT Technical Assistance Program – Updated 3-2-2015, Randall Longenecker, Senior Project Advisor



Source: Personal communication from Randall Longenecker MD, Senior Project Advisor, the RTT Technical Assistance Program, April 2, 2015

Workforce

- President's 2016 Budget
  - Re-Thinking Residency Training
  - Expansion of the NHSC
- Other FORHP Investments
  - Recruitment and Retention
  - Health IT Training
  - Allied Health

President's Budget FY 2016

- Modernizing Graduate Medical Education
- Expanding the National Health Service Corps (NHSC)
- Extending Enhanced Medicaid Primary Care Payments
- Other provisions include $4 million to fund a new Rural Physician Training Grant program

http://www.hhs.gov/budget/fy2016/fy-2016-budget-in-brief.pdf

HRSA Rural Workforce Initiative Examples

- Teaching Health Centers
- National Health Service Corps (NHSC)
  - CAH Pilot
- Nurse Corps
- State Loan Repayment Program (SLRP)

ACA Coverage to Care

- If you're a provider, staff, or someone helping people who are new to insurance, there are a few resources to address topics such as:
  - What it means to have health insurance
  - How to find a provider
  - When and where to seek health services
  - Why prevention is important
- Resources: http://marketplace.cms.gov/help-us/c2c.html
  - A Roadmap to Better Care and Healthier You
    - http://marketplace.cms.gov/help-us/c2c-roadmap.pdf
  - A Roadmap to Better Care and Healthier You (Spanish)
  - Discussion Guides for Community Partners
  - Your Roadmap to Health (poster)
  - Your Roadmap to Health (poster in Spanish)
  - Provider Newsletter

ACA and Community Health Centers

- $11 billion provided through 2015 to expand network and increase number of patients
- $9.5 billion will create new health center sites in underserved areas and expand services at existing sites
- $1.5 billion will support construction and renovation
- Includes $200 million to expand services at School-Based Health Centers

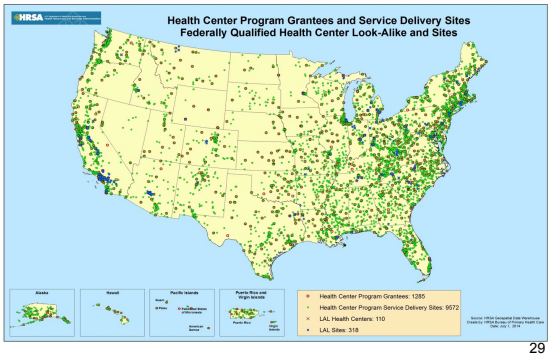
Community Health Center Program

- Serves more than 20 million patients annually
- Utilizes coordinated patient-centered health care home model
- Since 2009 health centers have added more than 25,300 new full-time positions, increasing their employment to more than 138,000 staff nationwide

Health Center Program Increase Access - Calendar Year 2013

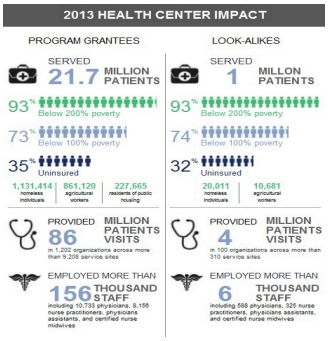
28

Health Center Program Increase Access - National Presence



29

Health Center Program Increase Access - Calendar Year 2013



30

ACA and National Health Service Corps

Authorizes and appropriates $1.5 billion for the NHSC through 2015
FY2011: $290 million
FY2012: $295 million
FY2013: $300 million
FY2014: $305 million
FY2015: $310 million

New Flexibilities
Establishes permanent half-time service opportunities of 2- and 4-year contracts for the Loan Repayment Program

NHSC participants may now receive up to 20 percent service credit for teaching (and up to 50 percent in Teaching Health Centers)

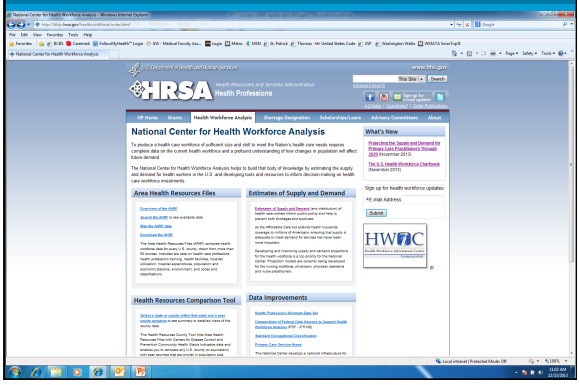
ACA and National Health Service Corps

- Nearly 10,000 NHSC clinicians are providing care to more than 10.4 million people who live in rural, urban and frontier communities
- Additional 1,000+ students, residents and health providers preparing to go into practice receive support through scholarships and the Students to Service Loan Repayment program
- www.nhsc.hrsa.gov

H.R.2 - Medicare Access and CHIP Reauthorization Act of 2015

- Medicare portion of the Act permanently repeals the Sustainable Growth Rate (SGR)
- Children's Health Insurance Program (CHIP) receives a 2-year funding extension through FY 2017
- NHSC funded at $310 million per year through FY 2017, maintaining the program at the FY 2015 level
- Teaching Health Centers will receive $60 million per year through FY 2017 (an increase from $46 million per year)

Resources for Rural



- **Web-Based Services**
  http://www.raconline.org
- **Electronic Updates; Subscribe on Web site**
- **Customized Assistance; Phone: 1.800.270.1898**
  E-mail: info@raconline.org
- **All services are free!**

http://cph.uiowa.edu/ruralhealthvalue/

National Rural Health Association

- Annual Policy Institute
- State Rural Health Association Support
- Rural Medical Educators
- Rural Public Health Series

http://www.ruralhealthweb.org/

www.nosorh.org

VHA Office of Rural Health (ORH)

- The VA Office of Rural Health (ORH) was created by Congress in 2006 under Public Law 109-461, Section 212
- Mission: Improve **access** and **quality** of care for rural and highly rural Veterans
- Works across VA and with external partners to develop policies, best practices and lessons learned to improve care and services for rural and highly rural Veterans

ORH Vision

The VHA Office of Rural Health collaborates with other VA and non-VA entities to improve healthcare for all rural Veterans. We are committed to honoring service by empowering health and well-being.

For additional information, please contact:

Gina L. Capra, MPA
Director, Office of Rural Health
Gina.Capra@va.gov
Thomas F. Klobucar, PhD
Deputy Director, Office of Rural Health
Thomas.Klobucar@va.gov
Visit our website:
www.ruralhealth.va.gov

VHA Office of Rural Health
90K Street, NE Room 700 -
Washington, DC 20002
Phone: 202.632.8615

ORH
VHA Office of Rural Health

Contact Information

Dan Mareck, MD
Chief Medical Officer
U.S. Department of Health and Human Services
Health Resources and Services Administration
Federal Office of Rural Health Policy

dmareck@hrsa.gov
www.hrsa.gov/ruralhealth

301-594-4198