

**2020**



# **CREATING 20/20 VISION**

## Empowering Flexibility in Rural

**FLEX PROGRAM VIRTUAL REVERSE SITE VISIT**

**AUGUST  
4<sup>TH</sup> - 6<sup>TH</sup>**

**VIRTUAL CONFERENCE • AUGUST 4-6, 2020**

This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number UB1RH24206, Information Services to Rural Hospital Flexibility Program Grantees, \$1,205,000 (0% financed with nongovernmental sources). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

# Welcome

## **CREATING 20/20 VISION:** Empowering Flexibility in Rural

The focus of the Federal Office of Rural Health Policy's (FORHP) 2020 Flex Program Virtual Reverse Site Visit (RSV) is the importance of flexibility and adaptability in today's rapidly changing health care environment. The purpose of this event is to provide state Medicare Rural Hospital Flexibility (Flex) Programs with a collaborative learning environment to make connections, share best practices, and gather lessons learned to empower and support state Flex Program and critical access hospital (CAH) flexibility. Through content and discussions, participants will be able to create clarity, or a 20/20 vision, for improving and strengthening rural health care.

## **FLEX PROGRAM RSV LEARNING OBJECTIVES**

*Upon conclusion of the Flex Program RSV, participants will be able to:*

- Replicate successful state Flex Program models for empowering flexibility in today's rapidly changing environment
- Determine what 20/20 vision looks like for improving and strengthening rural health
- Strengthen the leadership of your state Flex Program in the Core Competencies for State Flex Program Excellence

Flex Program  
Reverse Site Visit

**DAY 1**

Tuesday, August 4<sup>th</sup>

(All Central Time Zone)

## **WELCOME:** Federal Office of Rural Health Policy

11:00 a.m. – 11:30 a.m. (C.D.T)

» *Tori Leach, Flex Program Coordinator // Tom Morris, MPA, Associate Administrator for Rural Health Policy, Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration*

## **KEYNOTE SPEAKER:** Achieving Health Equity in Rural America

11:30 a.m. – 12:15 p.m. (C.D.T)



**Cara James**

*PhD, President and CEO, Grantmakers in Health (GIH)*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Name at least two disparities within rural communities
- Identify two drivers of health disparities
- Identify one resource that can be used to help reduce disparities

Break • 12:15 p.m. – 12:25 p.m. (C.D.T)

Breakout Session 1 • 12:25 p.m. – 1:10 p.m. (C.D.T)

## **1A |** Administering Federal Rural State Health Grant Programs from State, Non-Profit, and University Settings

- » *Stephanie Nantz, MPA, Assistant Director of Operations, North Carolina Office of Rural Health*
- » *Sarah Craig, MHA, CRCA, Director of Hospital System Innovation, South Carolina Office of Rural Health*
- » *Kayla Combs, MHA, Rural Project Manager/Flex Coordinator, Kentucky Office of Rural Health*
- » *Chris Salyers, DHSc, Education and Services Director, National Organization of State Offices of Rural Health (NOSORH)*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Compare best practices and lessons learned for administering and integrating efforts across Flex, Small Rural Hospital Improvement Grant Program (SHIP), and State Office of Rural Health (SORH) programs from state government, nonprofit, and university settings
- Identify innovative models of care implemented by CAHs
- Apply various approaches to support CAHs facing challenges

## 1B | Transitioning to Value-Based Models with Flex Program Support

» *Jennifer Edwards, MBA, Rural Health Systems Manager and Deputy Director, Pennsylvania Office of Rural Health*

» *Stephanie Sayegh, MA, Health Program Manager, Flex and SHIP Coordinator, Idaho Bureau of Rural Health & Primary Care*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Identify the need for value-based care
- Conclude projects progress and impact
- Apply ways for Flex Programs to step into the value-based care arena

## 1C | Assessing Emergency Medical Services (EMS) Need and Identifying Impactful Activities

» *Rebecca Dobert, CRHCP, Field Services Program Manager, Oregon Office of Rural Health*

» *Michelle Hoffman, Rural Hospital Program Coordinator, South Dakota Office of Rural Health*

» *Marty Link, Director of EMS and Trauma, South Dakota Department of Health*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Recall two state Flex Programs' needs assessment examples
- Recognize ways to replicate similar methods in their Flex Program work
- Describe how information gathered empowered clear decision-making for future activities

Break • 1:10 p.m. – 1:20 p.m. (C.D.T)

## SMALL GROUP DISCUSSIONS:

1:20 p.m. - 2:30 p.m. (C.D.T)

## Managing the State Flex Program During COVID-19

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Connect with Flex Program peers in small group discussions to share challenges and strategies of managing the state Flex Program during the pandemic
- Recognize resources, initiatives or tactics to implement supporting program management and project execution

Flex Program  
Reverse Site Visit

**DAY 2**

Wednesday, August 5<sup>th</sup>

(All Central Time Zone)

## WELCOME: Federal Office of Rural Health Policy

11:00 a.m. – 11:15 a.m. (C.D.T)

- » *Kristin Martinsen, Director, Hospital State Division, Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration*

## UPDATES: Federal Rural Health Policy and Regulatory Update

11:15 a.m. – 12:15 p.m. (C.D.T)

- » *John Supplitt, MPA, MBA, Senior Director, American Hospital Association*
- » *Brock Slabach, MPH, FACHE, Senior Vice-President, National Rural Health Association*
- » *Kerri Cornejo, Policy Coordinator, Federal Office of Rural Health Policy, Health Resources and Administration*
- » *Moderated by Sally Buck, MS, CEO, National Rural Health Resource Center*

## Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Identify opportunities and mitigate challenges for rural safety net providers in the current state of health care policy and regulations with the everchanging environment

Break • 12:15 p.m. – 12:25 p.m. (C.D.T)

Breakout Session 2 • 12:25 p.m. – 1:10 p.m. (C.D.T)

## 2A | Fostering Community Engagement for Improved Health Outcomes

- » *Jill Bullock, Associate Director, and Joyce Hospodar, MBA, MPA, Senior Advisor, Rural Program, Arizona Center for Rural Health*
- » *Megan Lahr, MPH, Research Fellow, Rural Health Research Center, University of Minnesota School of Public Health, Flex Monitoring Team*
- » *John Gale, MS, Research Associate, Maine Rural Health Research Center, University of Southern Maine, Flex Monitoring Team*

## Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Interpret how Arizona Center for Rural Health (AzCrH) leveraged federal grant funds, and their process for forming the Weaver Mountains Health Initiative
- Assemble local and regional organizations to improve health care access
- Replicate various state Flex Program/CAH community projects, and apply current tools and resources to assist and encourage CAHs to undertake substantive community engagement efforts to address social determinants of health

## 2B | Building a Rural Community-Based Palliative Care Program

- » *Jody Ward, MS, RN, APHN, Senior Project Coordinator, University of North Dakota Center for Rural Health*
- » *Kathryn Miller, Rural Hospitals & Clinics Program Manager, Wisconsin Office of Rural Health*
- » *Pat Justis, MA, Executive Director, Rural Health/Office of Community Health Systems, Washington State Department of Health*
- » *Karla Weng, MPH, CPHQ, Senior Program Manager, Stratis Health*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Identify key components of palliative care and relevance in rural settings
- Outline a model for supporting development of palliative care services in rural communities
- Discuss lessons learned from implementation across multiple states

## 2C | Swing Bed Patient Experience

- » *Angie Charlet, DBA, MHA, MBA, RN, Senior Director Quality, Education, and Compliance, Illinois Critical Access Hospital Network (ICAHN)*
- » *Susan Runyan, MHCL, Consultant, Kansas Hospital Education and Research Foundation (KHERF)*
- » *Krista Eylar, Director of Nursing, Holton Community Hospital*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Identify specific measures to capture patient experience
- Create a swing bed patient survey to enhance the overall program
- Determine patient needs and improvement opportunities to enhance care transitions
- Identify pros and cons of pilot project using tablet versus paper surveys

Break • 1:10 p.m. – 1:20 p.m. (C.D.T)



## SMALL GROUP DISCUSSIONS:

1:20 p.m. - 2:30 p.m. (C.D.T)

## Technical Assistance Strategies to Support System-Affiliated Critical Access Hospitals

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Participate in a consensus workshop to determine Flex Program technical assistance (TA) strategies to provide relevant TA to system-affiliated, managed, or owned CAHs
- Adapt the identified strategies to your Flex Program's work plan to support similar facilities in your state

Flex Program  
Reverse Site Visit  
**END OF DAY 2**

Flex Program  
Reverse Site Visit

**DAY 3**

Thursday, August 6<sup>th</sup>

(All Central Time Zone)

## **WELCOME:** Federal Office of Rural Health Policy Welcome and MBQIP Awards

11:00 a.m. – 11:15 a.m. (C.D.T)

» *Natalia Vargas, MPH, Flex Project Officer, Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration*

Break • 11:15 a.m. – 11:25 a.m. (C.D.T)

Breakout Session 3 • 11:25 a.m. – 12:10 p.m. (C.D.T)

### **3A |** Using Processes and Tools to Simplify MBQIP

» *Margaret Brockman, MSN, RN, Administrator, Nebraska State Office of Rural Health*

» *Jossy Rogers, MPA, Director of Population Health, Nebraska Health Information Initiative*

» *Renee Towne, MOT, EdD, Director of Quality Programs, KPI Ninja*

» *Angie Charlet, DBA, MHA, MBA, RN, Senior Director Quality, Education, and Compliance, Illinois Critical Access Hospital Network (ICAHN)*

#### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Identify emerging capabilities, documents, and resources used to identify, aggregate, report, and analyze quality performance
- Create a one-stop shop for resources on education and marketing of current outcomes
- Identify new and quick tool for quality reporting of MBQIP measures, and new models of care to enhance overall CAH performance

### **3B |** Supporting Rural Provider Financial Pressure During the Pandemic

» *Ralph Llewellyn, CPA, Partner-in-Charge of Critical Access Hospitals, Eide Bailly*

#### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Recognize the financial pressures facing critical access hospitals and other rural providers during COVID-19 response
- Describe the purpose and elements of the Rural Health Care Providers COVID Funding Resource Tool
- Give examples of actions a state Flex Program could take to support the financial stability of their rural providers during the pandemic

## 3C | How CAHs and Rural Health Clinics (RHCs) Address Mental Health and Substance Use in Their Communities

» *John Gale, MS, Research Associate, Maine Rural Health Research Center, University of Southern Maine, Flex Monitoring Team*

» *Darren Vicenti, MD, Chief Medical Officer, Hopi Health Care Center*

» *Kanesha Quanimptewa, CHR,CNA, Community Health Representative, Hopi Tribe Community Health Representative (CHR) Program*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Replicate strategies and frameworks that CAHs and RHCs can use to address mental health and substance use issues
- Examine opioid prescription reduction and successful outcomes from the Hopi Tribal Departments, Law Enforcement, and Hopi Substance Abuse Prevention Center collaboration

Break • 12:10 p.m. – 12:20 p.m. (C.D.T)

Breakout Session 4 • 12:20 p.m. – 1:05 p.m. (C.D.T)

## 4A | Rural Hospital Closures – What has been and will be the role of the Flex Program?

» *Lara Brooks, MS, Rural Health Analyst, Oklahoma Office of Rural Health*

» *Bree Watzak, PharmD, BCPS, Director of Technical Assistance, Texas A&M Center for Optimizing Rural Health*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Differentiate roles peer programs have had with pre- and post-closure facilities
- Identify innovative models that have been implemented in other states
- Compare state-wide approaches to the rural hospital closure situation

## 4B | Use of Financial Data in the CAH Measurement and Performance Assessment System (CAHMPAS)

» *George Pink, PHD, Investigator, University of North Carolina – Chapel Hill, Flex Monitoring Team*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Navigate the financial portal of the CAHMPAS system
- Access and manipulate CAH data related to financial measures

## 4C | MBQIP 101

» *Sarah Brinkman, MBA, MA, CPHQ, Program Manager, Robyn Carlson, RHIA, CPHQ, Quality Reporting Specialist, Stratis Health, Rural Quality Improvement Technical Assistance (RQITA)*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Recognize the purpose and importance of CAH and state Flex Program participation in MBQIP
- Differentiate the roles of various players in implementing MBQIP, including FORHP, state Flex Programs, the Rural Quality Improvement Technical Assistance (RQITA) team and more
- Identify MBQIP resources and available support

Break • 1:05 p.m. – 1:15 p.m. (C.D.T)

## CLOSING KEYNOTE

Seeing 2020:  
Experimentation, Innovation,  
Opportunity

1:15 p.m. – 2:15 p.m. (C.D.T)



**Craig Deao**  
*MHA, Managing Director, Studer Group*

» *Terry Hill, MPA, Senior Advisor for Rural Health Leadership and Policy, National Rural Health Resource Center*

### Learning Objectives:

Upon conclusion of this session, participants will be able to:

- Identify at least one “silver lining” in the current pandemic
- Describe the evidence-based leadership components that produce sustainable excellence
- Adapt their leadership actions in a time of crisis, modelling, vision, understanding, courage, and adaptability

## FORHP

### Closing Remarks and Calico Quality Leadership Award Presentation

2:15 p.m. – 2:45 p.m. (C.D.T)

» *Kristin Martinsen, Director, Hospital State Division // Tori Leach, Flex Program Coordinator // Natalia Vargas, MPH, Flex Project Officer // Laura Seifert, MPH, Flex Project Officer, Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration // Tahleah Chappel, MS, Flex Project Officer*

» *Terry Hill, MPA, Senior Advisor for Rural Health Leadership and Policy, National Rural Health Resource Center*

# Flex Program Reverse Site Visit END OF DAY 3

*Thank You for Attending Our  
Virtual Conference*



# PLANNING COMMITTEE

*Thank you to the Planning Committee for all of their insight and guidance*

Sarah Brinkman, RQITA

Lara Brooks, Oklahoma

Jill Bullock, Arizona

Marcy Cameron, Colorado

Kayla Combs, Kentucky

Laura Fischer, Illinois

Danielle Kunkel, Washington

Megan Lahr, Flex Monitoring Team

Tori Leach, FORHP

Kristi Martinsen, FORHP

Kathryn Miller, Wisconsin

Stephen Njenga, Missouri

Natalia Vargas, FORHP



# **CREATING 20/20 VISION**

Empowering Flexibility in Rural

**FLEX PROGRAM VIRTUAL REVERSE SITE VISIT**

**AUGUST  
4<sup>TH</sup> - 6<sup>TH</sup>**

*Thank you for attending our*  
**VIRTUAL CONFERENCE**