



THE UNIVERSITY OF ARIZONA
MEL & ENID ZUCKERMAN COLLEGE OF PUBLIC HEALTH
Center for Rural Health

Improving Access to Quality Medical Care Webinar Series

Presented by

Arizona Telemedicine Program, Southwest Telehealth
Resource Center, Arizona Rural Health Association, the
Arizona Center for Rural Health and the National Rural
Health Association



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Welcome

- SWTRC region
- Rural Health Association Members
- Fellow HRSA Grantees
- All other participants



Land Acknowledgement

We respectfully acknowledge the University of Arizona is on the land and territories of Indigenous peoples. Today, Arizona is home to 22 federally recognized tribes, with Tucson being home to the Tohono O'odham Nation and the Pascua Yaqui Tribe. Committed to diversity and inclusion, the University strives to build sustainable relationships with sovereign Native Nations and Indigenous communities through education offerings, partnerships, and community service.



The **Arizona Rural Health Association** & the **Southwest Telehealth Resource Center** welcomes you to this free webinar on the implementation & practice of telemedicine.

The practice & deliver of healthcare is changing, with an emphasis on **improving quality, safety, efficiency, & access to care.**

Telemedicine can help you achieve these goals!





Webinar Tips & Notes

- Mute your phone &/or computer microphone
- Time is reserved at the end for Q&A
- Please fill out the post-webinar survey
- Webinar is being recorded
- The recording and webinar recordings can be found on our website

<http://www.telemedicine.arizona.edu/distant-education/upcoming-workshops>



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“2021 Mid-Year Rural Health Policy Roundup”



Alan Morgan
Chief Executive Officer
*National Rural Health
Association (NRHA)*





NRHA
Your voice. Louder.

**Our mission is to provide leadership
on rural health issues.**



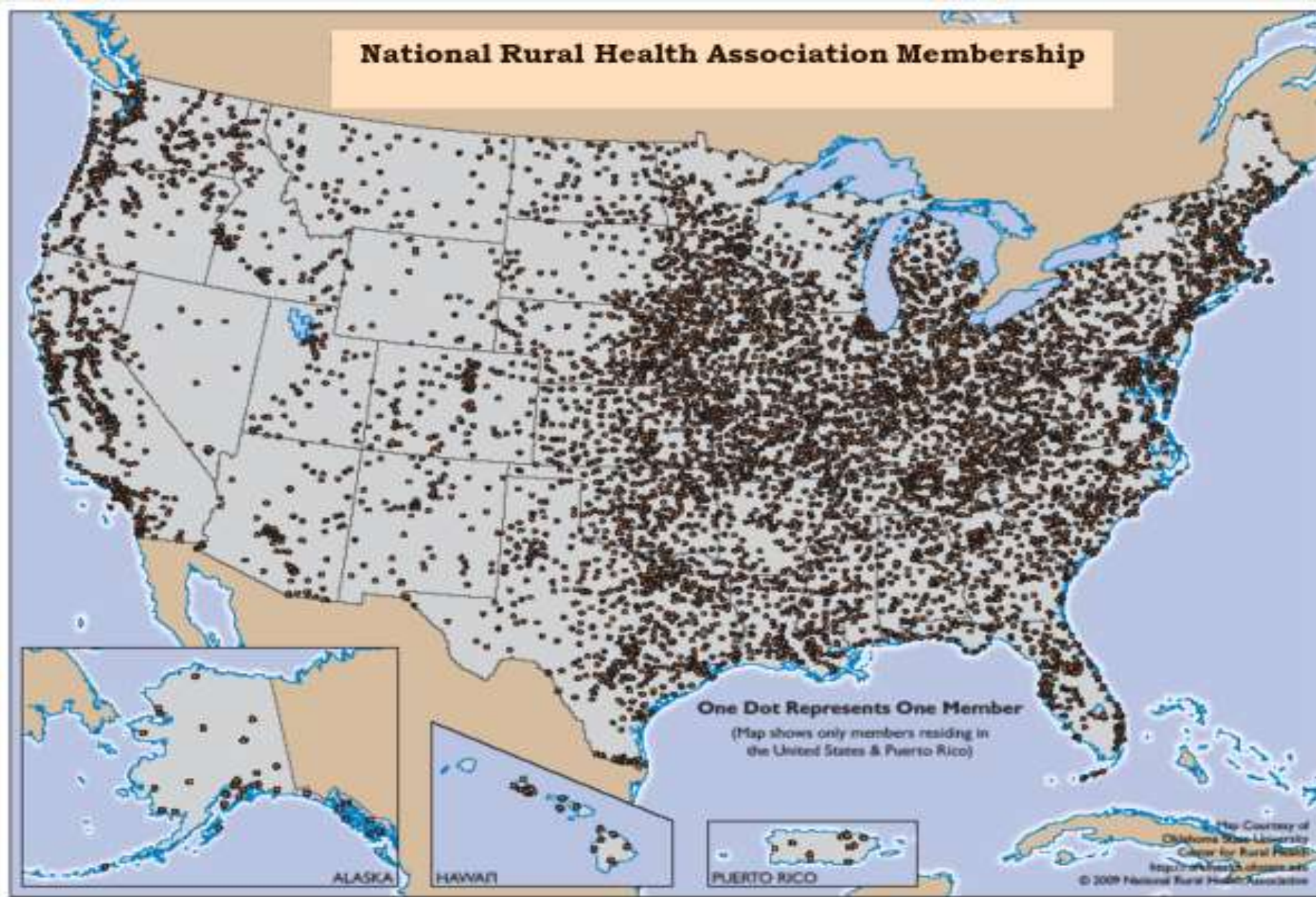
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The State of Rural America

- **Workforce Shortages**
- **Vulnerable Populations**
- **Chronic Poverty**



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Destination NRHA

Plan now to attend these 2022 events.



Policy Institute

Feb. 8-10, 2022

Washington, DC

Annual Conference

May 10-13, 2022

Albuquerque, NM

Rural Hospital Innovation Summit

May 10-13, 2022

Albuquerque, NM

Visit RuralHealthWeb.org
for details and discounts.



2021: An unprecedented year (continued)

- Unprecedented challenges to an already fragile rural health safety net
- Impact of the pandemic today and tomorrow
- Unprecedented NRHA advocacy and funding victories
- Rural health inequality and racial injustice focus
- New 117th Congress and Biden Administration
- Innovation continues



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The Rural Landscape

Fragile Rural Health Safety Net Pre-COVID-19

- Vulnerable populations
- Systemic workforce shortages
- Scattered populations with inherent access to care issues
- Limited resources for providers
- Inadequate Medicare, Medicaid and private insurance coverage
- Lack of Medicaid expansion and high uninsured populations
- Rural provider closures



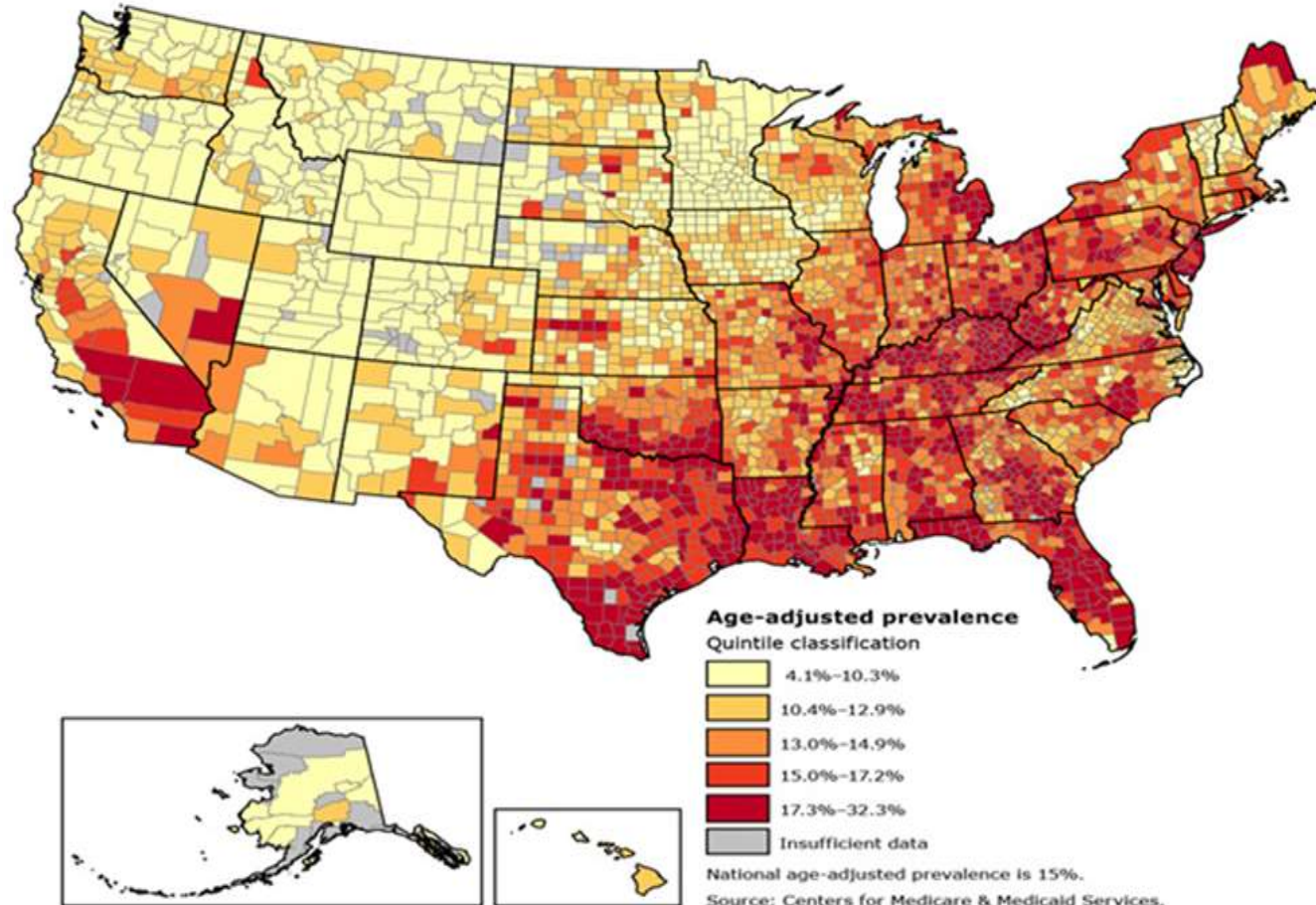
Rural has an Older, Sicker and Poorer Population

- The median age of adults living in rural areas is greater than those living in urban:
 - Rural: 51 years
 - Urban: 45 Years
- 18.4% of rural residents are age 65+, whereas its 14.5% in urban
- **Rural areas have higher rates of several health risk factors/conditions:**
 - **Obesity**
 - **Diabetes**
 - **Smoking**

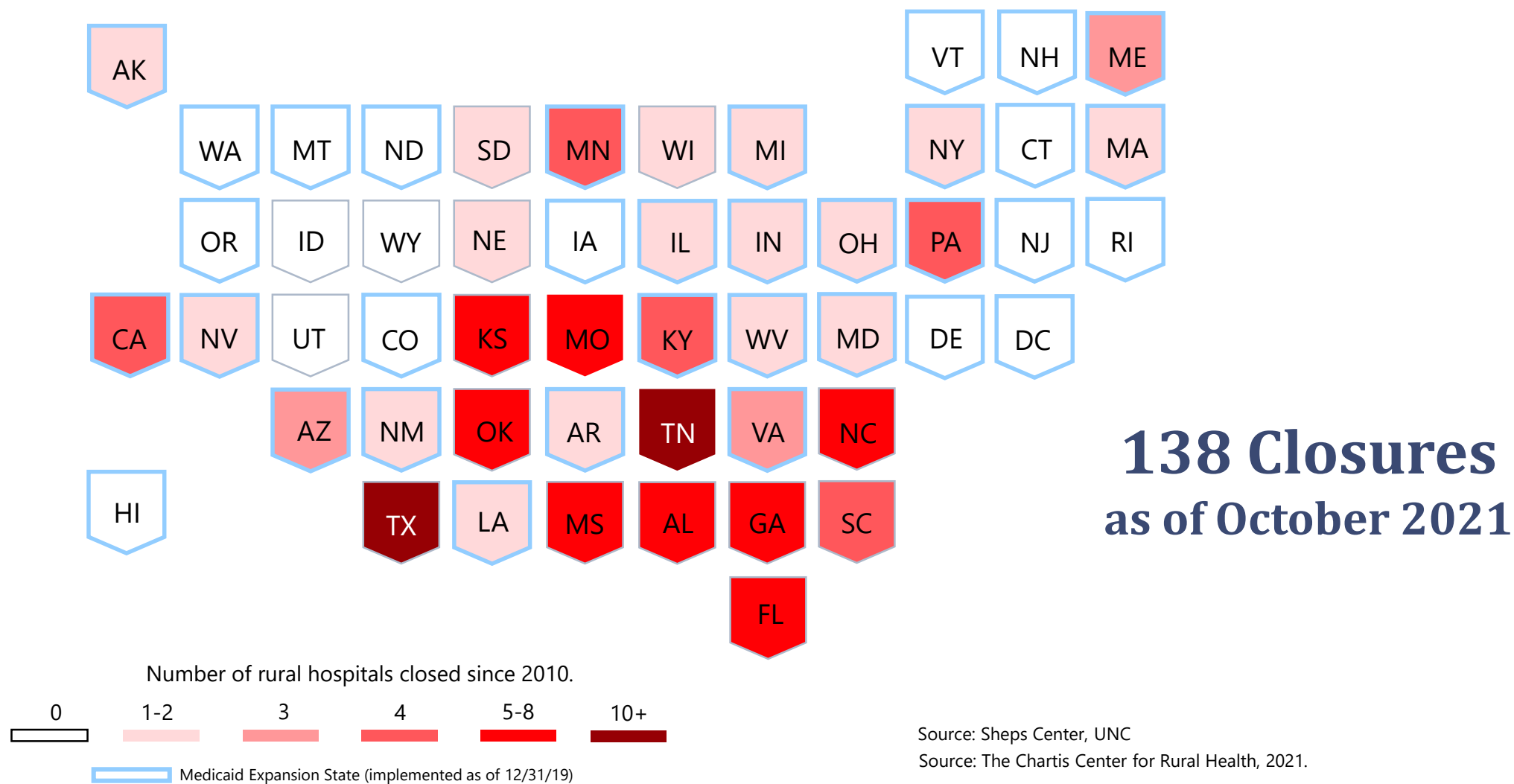


Prevalence of Medicare Patients with 6 or more Chronic Conditions

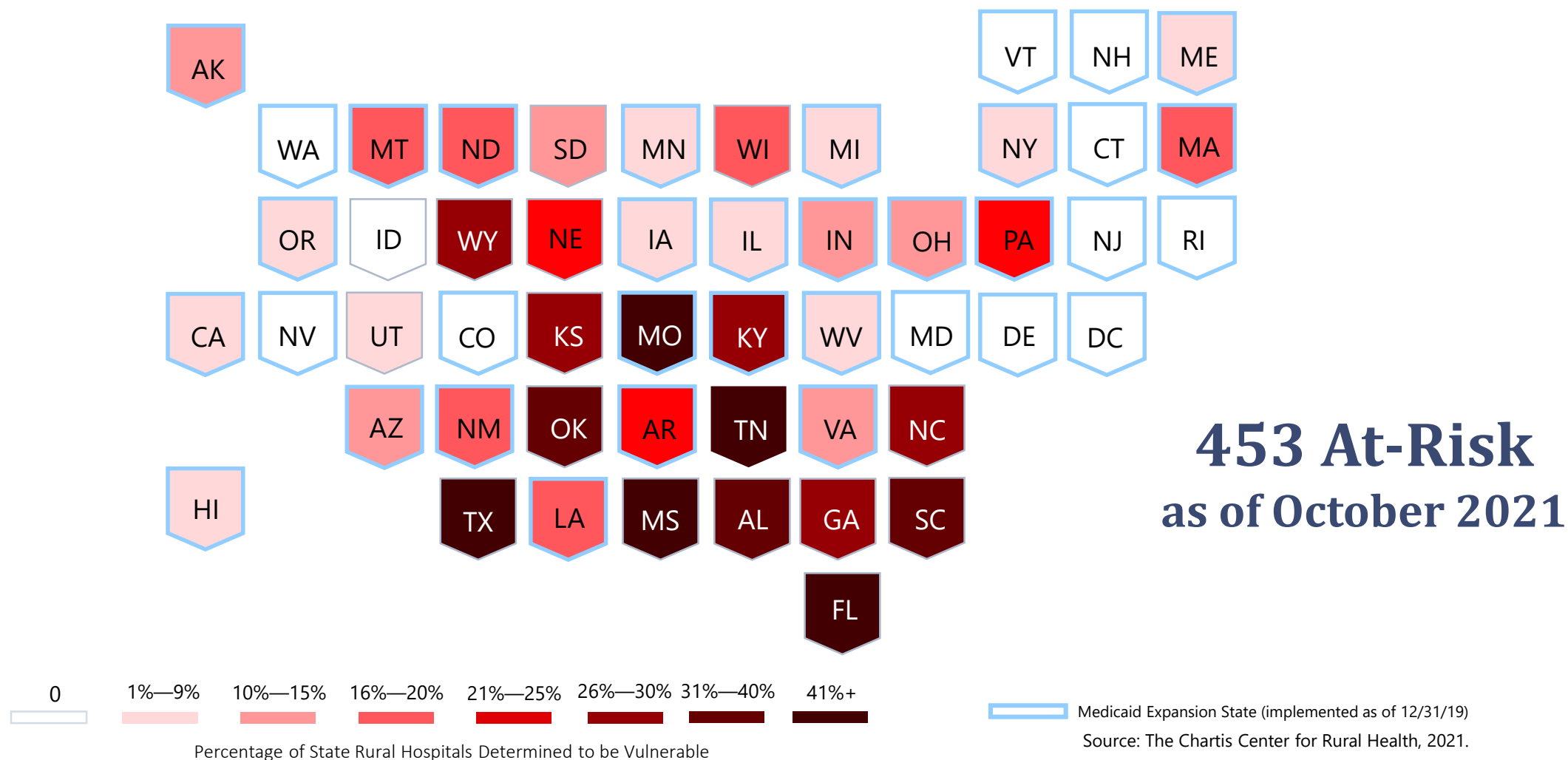
The Prevalence of Medicare Fee-for-Service Beneficiaries 65 Years or Older With 6 or More Chronic Conditions, by County, 2012



Rural Hospital Closures

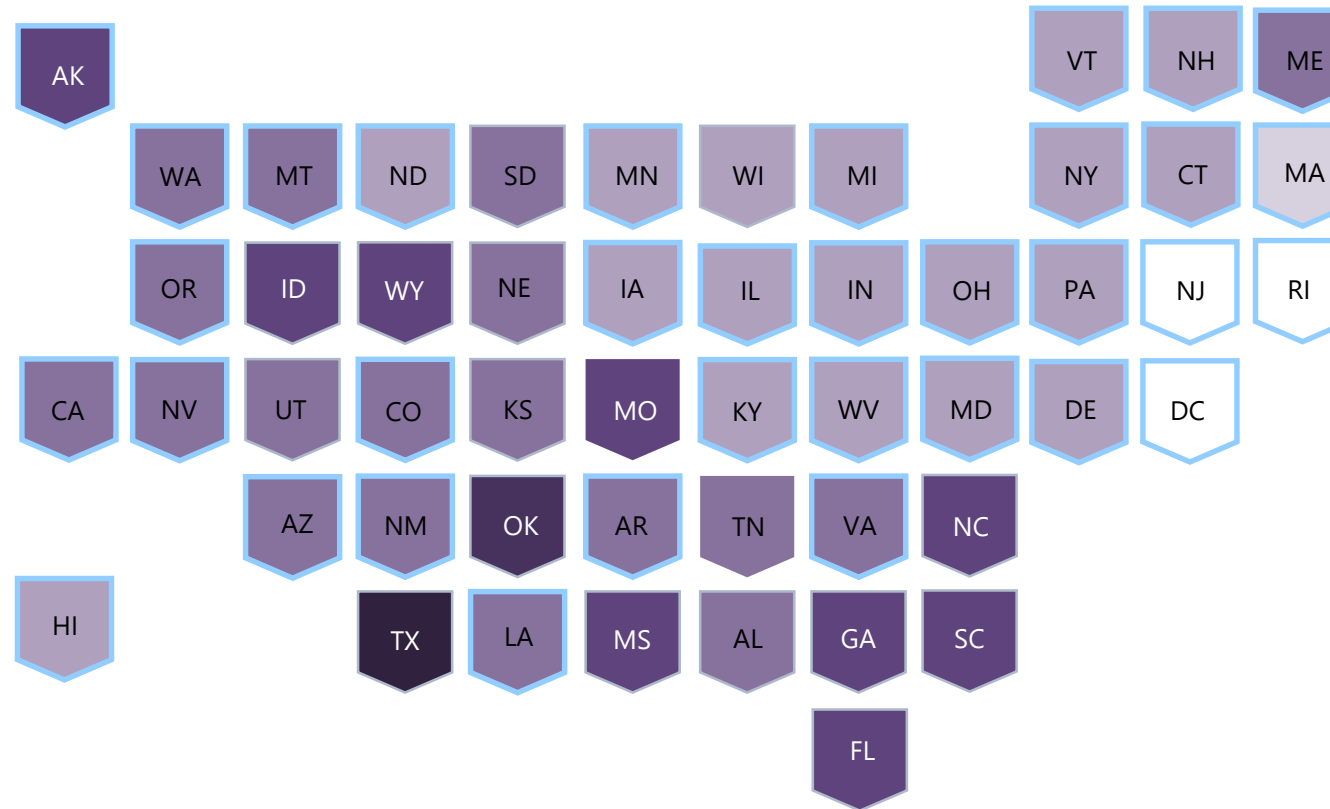


Rural Hospitals Vulnerable to Closure

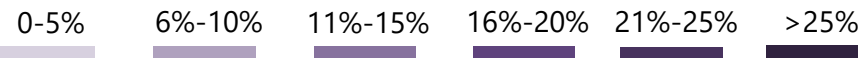


Rural Population Disparity

Uninsured Adults



Percentage of population served by rural hospitals that is adults under age 65 without health insurance.



Medicaid Expansion State (implemented as of 12/31/19)

Source: The Chartis Center for Rural Health, 2021.

Population Health Disparity

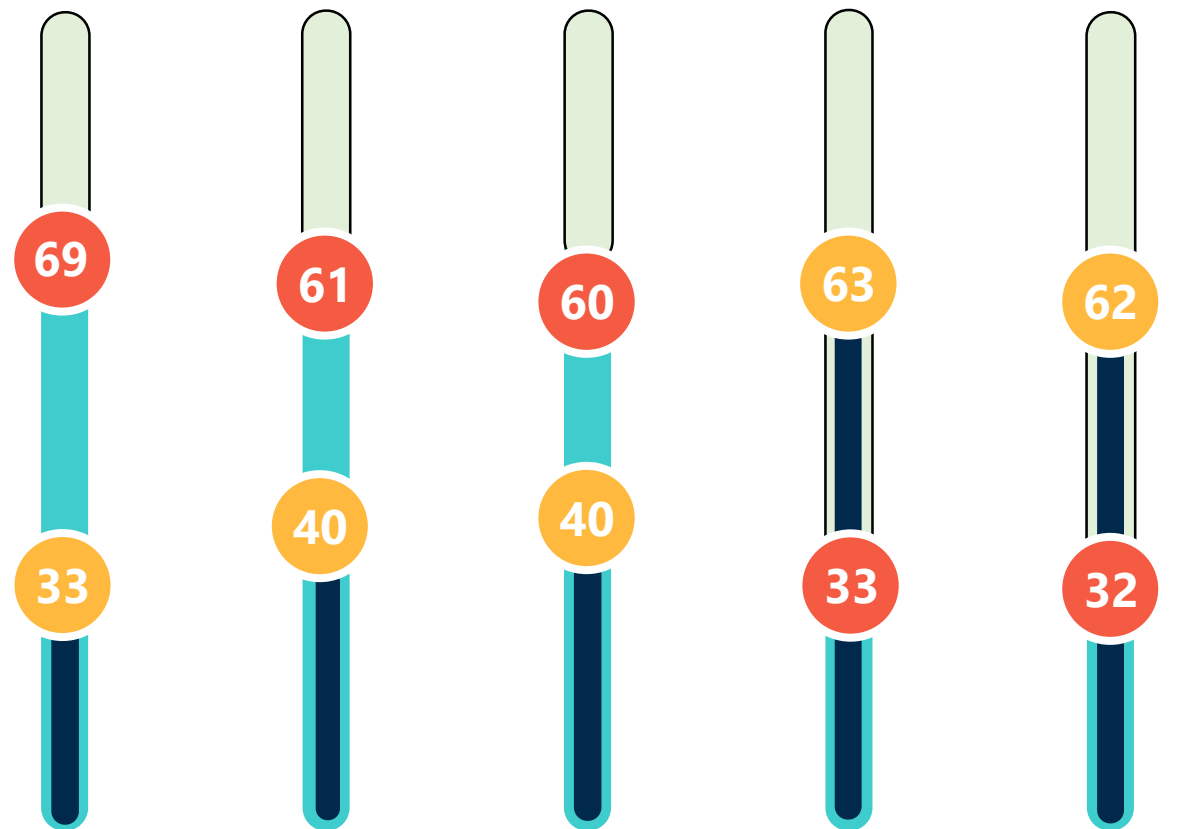
Percentile Ranking



Rural



Urban



Over 65

Premature
Death

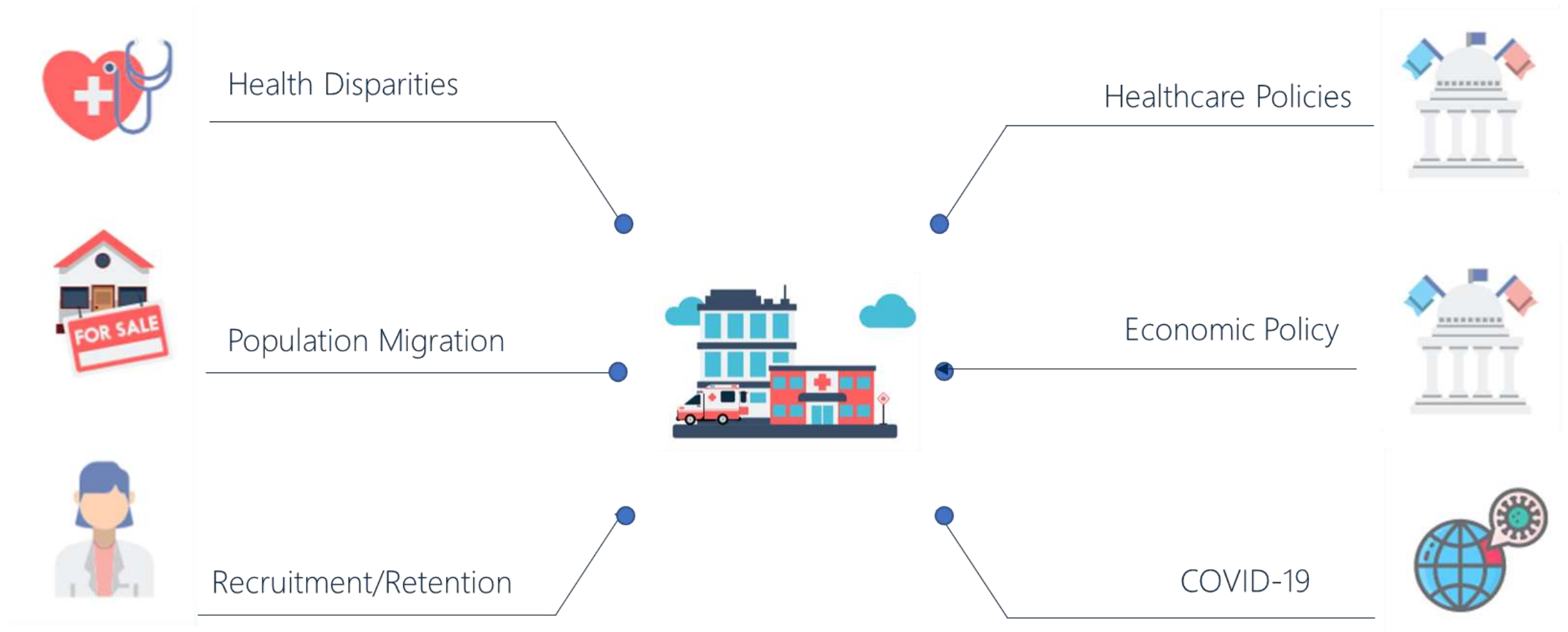
Uninsured
Children

Access to
Primary Care

Access to
Mental Health

Source: The Chartis Center for Rural Health, 2021.

Rural Hospitals: Convergence of Multiple Pressure Points





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Addressing COVID-19

COVID-19 – A Rural Story

Adults Uninsured



CORONAVIRUS

Covid is killing rural Americans at twice the rate of people in urban areas

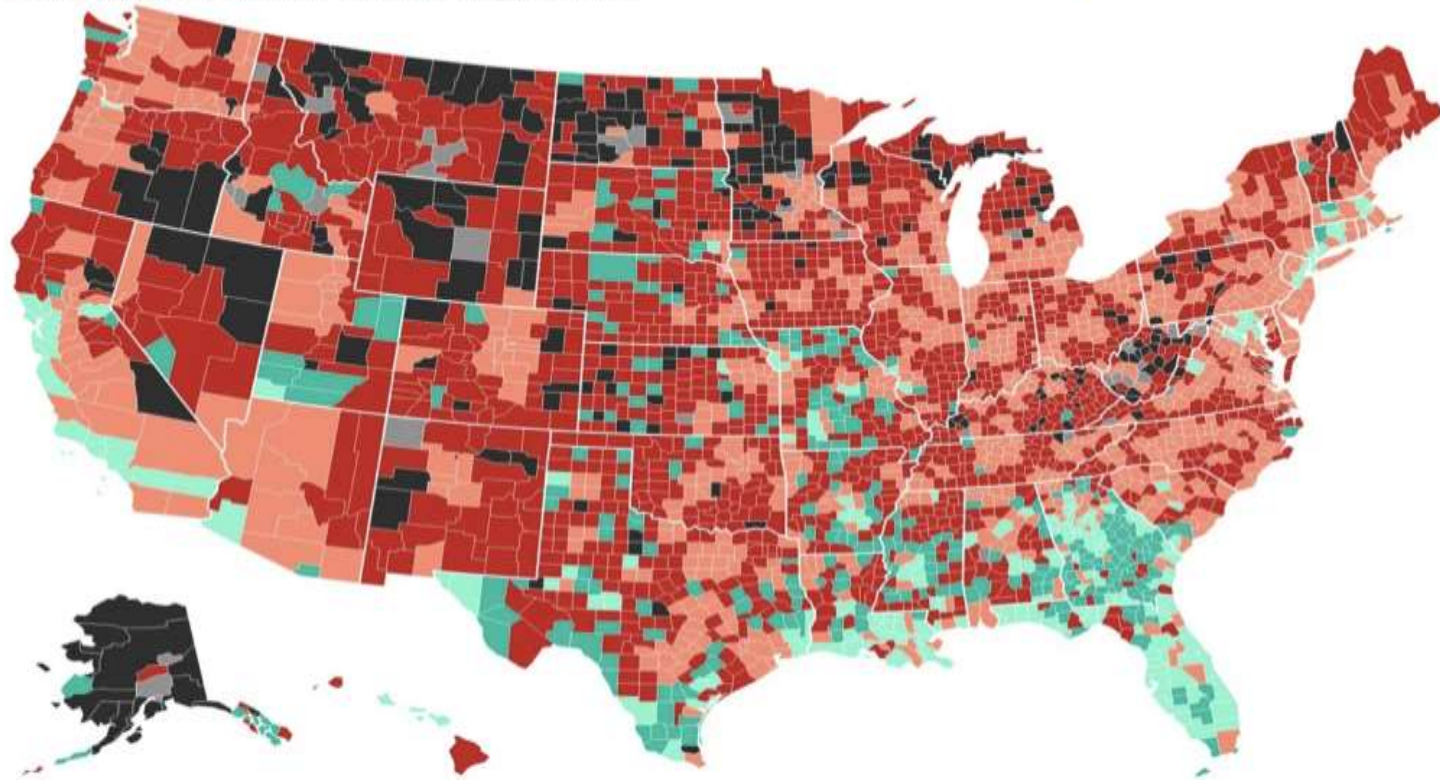
The pandemic is devastating rural America, where lower vaccination rates are compounding the already limited medical care.

COVID-19 New Infection Rates

Rural and urban infection rates over a seven-day period, Sunday, October 10, through Saturday, October 16

Rate of New Cases

Nonmetro (rural), less than 100 cases per 100k Metro, less than 100 cases per 100k Nonmetro, 100 to 500 cases per 100,000 Metro, 100 to 500 cases per 100,000
Nonmetro, over 500 cases per 100,000 Metro, over 500 cases per 100,000



* Data: Public Health Service, Division of Field Epidemiology, CDC. Data is provided with permission.

Rural Infection Rate Falls but Remains 80% Higher than Metro Counties'

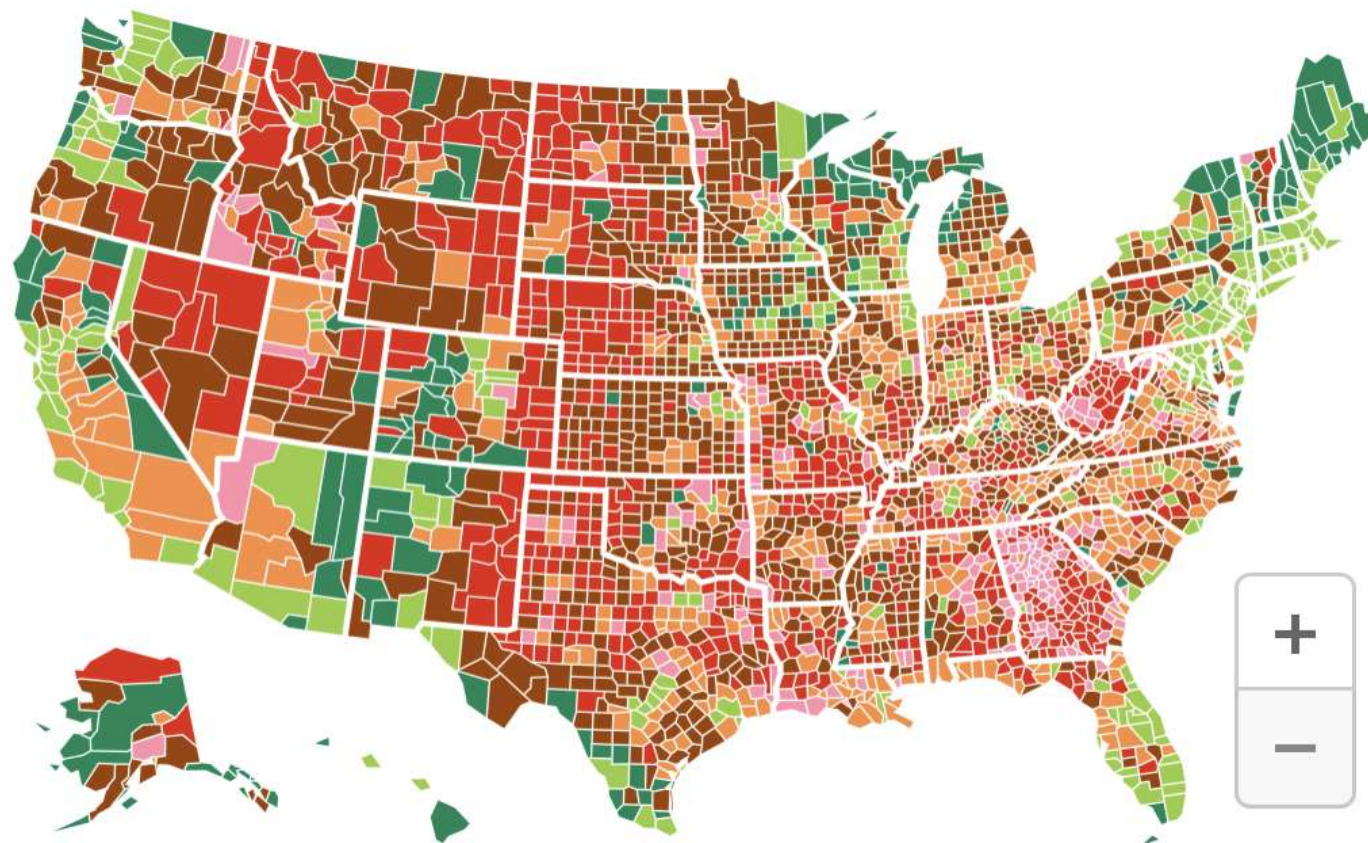
October 22, 2021

July 25-31, 2021

Source: [Daily Yonder COVID-19 Dashboard](#), 2021.

COVID-19 Rural Vaccination Rates

■ Rural, Average or Better ■ Metro, Average or Better
■ Rural, Low ■ Metro, Low ■ Rural, Very Low ■ Metro, Very Low



HHS Secretary Extends PHE & Distributes COVID-19 Funds

Renewal of Determination That A Public Health Emergency Exists

As a result of the continued consequences of the Coronavirus Disease 2019 (COVID-19) pandemic, on this date and after consultation with public health officials as necessary, I, Xavier Becerra, Secretary of Health and Human Services, pursuant to the authority vested in me under section 319 of the Public Health Service Act, do hereby renew, effective July 20, 2021, the January 31, 2020, determination by former Secretary Alex M. Azar II, that he previously renewed on April 21, 2020, July 23, 2020, October 2, 2020, and January 7, 2021, and that I renewed on April 15, 2021, that a public health emergency exists and has existed since January 27, 2020, nationwide.

July 19, 2021

Date

/s/

Xavier Becerra

\$100 million for rural health clinics (RHC) for vaccine outreach

\$398 million for small rural hospitals for COVID-19 testing and mitigation

\$103 million to reduce burnout & promote mental health for the health workforce

\$144 million for HRSA Health Center Program look-alikes to respond to and mitigate the spread of COVID-19

Rural Vaccine Confidence: Key Messages

- Sharing **THE FACTS**: *safe, effective, free of charge, development*
- Protecting **LOCAL BUSINESSES** while strengthening economy: *local healthcare works, keeping workers safe, stay open*
- Protecting **YOURSELF**: *hospitalizations/death, personal choice*

NRHA: COVID-19 Vaccine Talking Points



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NRHA COVID-19 Outreach Toolkit

Objectives

Promote the benefit of COVID-19 vaccination in rural America

Increase rural residents' confidence in the COVID-19 vaccines

Empower rural leadership from three key sectors to support vaccination activities in their communities

Stakeholders

Rural Healthcare Leaders: hospitals, outpatient clinics, community health workers, public health officials

Rural Faith Leaders

Rural Agriculture Leaders

Features

Talking points for community leaders

Fillable templates including op-eds, posters, social media, PSAs

Community guides and assessments

FAQs, Fact Sheets

Data and survey findings



COVID-19 Resources

- [NRHA COVID-19 Vaccine Resources](#)
- [NRHA COVID-19 Rural Health Provision Summary](#)
- [NRHA COVID-19 Technical Assistance Center](#)
- [NRHA COVID-19 Resources Page](#)
- [We Can Do This COVID-19 Public Education Campaign](#)



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Updates from Congress

COVID-19 Relief Legislation & Administrative Action: NRHA Advocacy

- Public Health Emergency Declaration
- Coronavirus Preparedness and Response Supplemental Appropriations Act
- Families First Coronavirus Response Act
- Coronavirus Aid, Relief, and Economic Security (CARES) Act
- Paycheck Protection Program and Health Care Enhancement Act
- Paycheck Protection Program Flexibility Act
- Consolidated Appropriations Act (CAA), 2021
- American Rescue Plan Act
- Medicare sequestration relief



The Bipartisan Infrastructure Package

- Congress passed the \$1.2 trillion bipartisan infrastructure package.
- Key rural provisions:
 - \$65 billion for broadband connectivity buildout, with significant mention of rural.
 - \$110 billion for roads, bridges, and major transportation projects.
 - \$55 billion for clean drinking water investments.
 - \$21 billion in environmental remediation for Superfund sites.
 - \$7.5 billion to build out a national network of electric vehicle chargers with a focus on rural and hard-to-reach communities.
- Concern: Extends Medicare sequestration for an additional year, until 2031.



FY 2022 Appropriations: Continuing Resolution

- House Appropriations Committee released their FY 2022 appropriations proposals over the summer.
- Senate Appropriations leadership released numbers in October.
- Four corners negotiations occurring on a top-line spending agreement.
- The House of Representatives passed a CR to extend government funding at its current level until December 3, 2021.



NRHA's Build Back Better Framework Requests

1. Improve telehealth services in rural America by making CARES Act flexibilities permanent.
2. Invest in rural workforce, including for health care.
3. Maternal health support.
4. Rural health clinic modernization.



**Urge Congress to Invest in
Rural Health Care
Infrastructure**

[NRHA infrastructure request document](#)

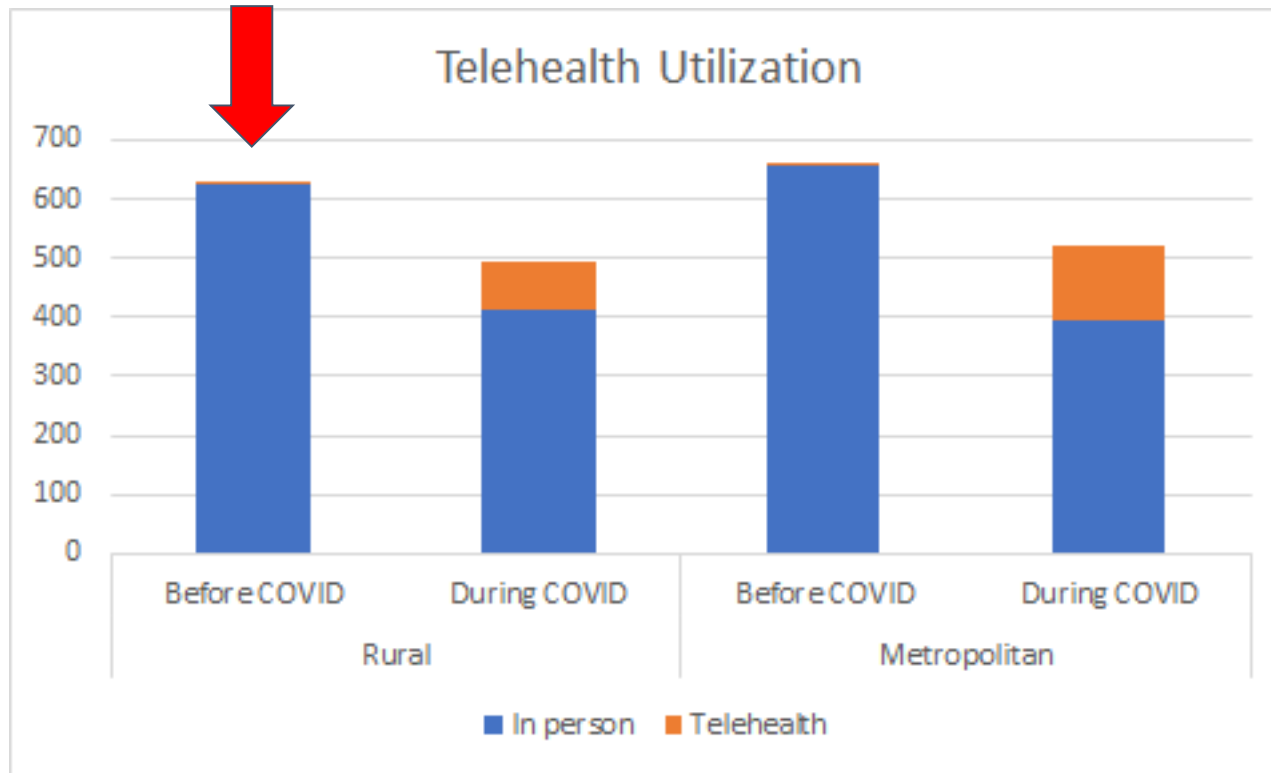
Telehealth Flexibilities

- Through CARES Act and the Administration's 1135 Waiver Authority, telehealth flexibilities under the Medicare program have been significantly expanded.
- Rural health clinics (RHC) and federally qualified health centers (FQHC) were afforded distant-site provider status through the PHE.
- NRHA is working with Congress to ensure these flexibilities are continued beyond the duration of the PHE.
- NRHA supported legislation: the CONNECT Act; the Telehealth Modernization Act; the Protecting Rural Telehealth Access Act



Pre COVID

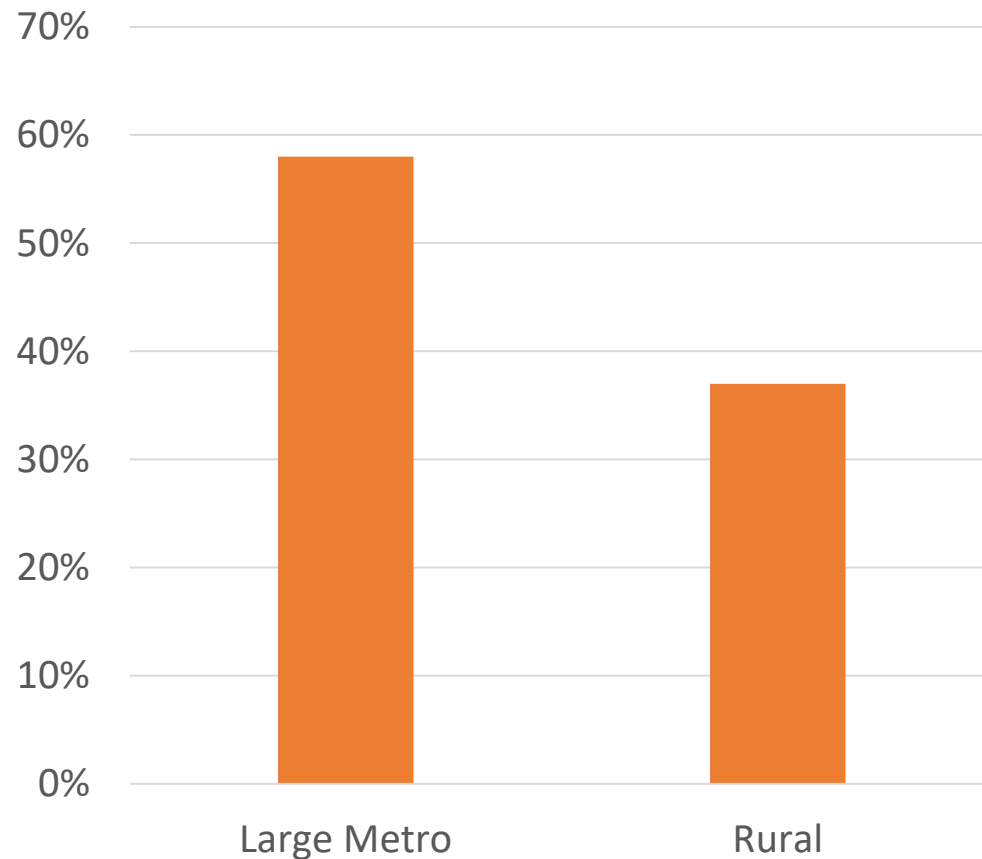
- Low utilization



Why?

- Regulation
- Infrastructure (and cost)
- Reimbursement

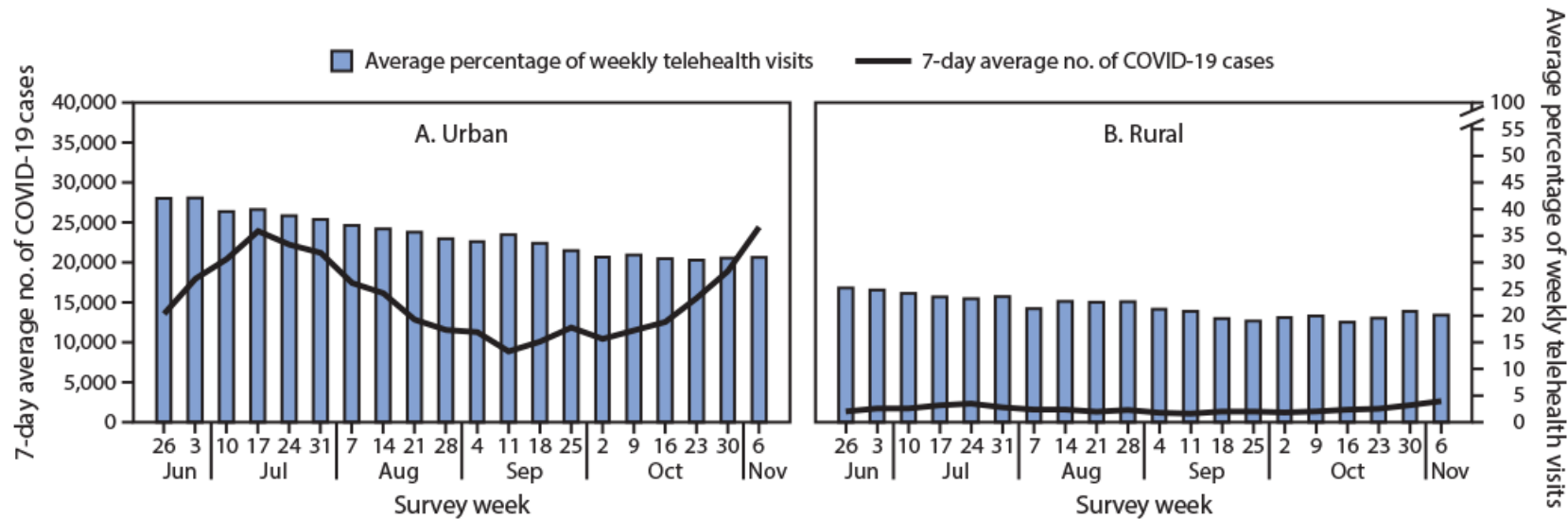
Disparities in fraction of Medicare patients who used telemedicine



Josh Gray, STAT News, Medicare data

2021 Rural vs. Urban

- Cohort study of 36 million Americans with private insurance
- 0.3% of contacts in 2019 to 23.6% of all contacts in 2020 (March-June)
- This represents a 79x increase
- Rural-urban disparity



CMS Center for Innovation

OLDER MODELS

- Frontier Extended Stay Clinic (FESC)
- Frontier Community Health Integration Project (F-CHIP)
- Rural Community Hospital Demonstration Program

NEWER MODELS

- Global Budget Model
 - Sen. Bob Casey (D-PA)
- 24/7 ER Model with Cost-Based Reimbursement
 - Community Outpatient Hospital
 - REACH ACT

Other Advocacy Items

- Rural hospital sustainability
 - REH designation; reinstatement of necessary-provider status for CAHs; elimination of the 96-hour rule for CAHs.
- Graduate Medical Education
 - Rural Physician Workforce Production Act
- Continuation of telehealth flexibilities
- Behavioral health and substance use disorder assistance
- Rural health clinic modernization
 - Creation of reporting requirements for provider-based RHCs in exchange for eliminating the cap they're subject to





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Advocate With Us!

NRHA's Legislative Tracker

Legislative Tracker

NRHA is tracking rural health legislation in Congress to advance quality of life across rural America.

NRHA's legislative tracker enables you to view the rural health bills in Congress the association is monitoring, including those we endorse and oppose. Bills are searchable and categorized by topic area. By clicking on a bill, you can find its summary, review cosponsors, and stay up to date on congressional actions.

Through activities such as NRHA's annual [Rural Health Policy Institute](#) and [ongoing grassroots campaigns](#), NRHA members actively participate in advocacy efforts to advance needed rural health legislation.

For further information or to recommend bills for the legislative tracker, [contact NRHA's government affairs team](#).

Find Legislation

Federal



Enter Keywords

Search

Hospitals & Health Systems

[H.R. 1639: Rural Hospital Closure Relief Act of 2021](#) | 117th Congress (2021-2022)



[H.R. 1887: To amend title XVIII of the Social Security Act to rebase the calculation of payments for sole community hospitals and Medicare-dependent hospitals, and for other purposes.](#) | 117th Congress (2021-2022)



[H.R. 2454: To amend title XVIII to strengthen ambulance services furnished under part B of the Medicare program.](#) | 117th Congress (2021-2022)



[S. 644: Rural Hospital Closure Relief Act of 2021](#) | 117th Congress (2021-2022)



[S. 999: Save Rural Hospitals Act of 2021](#) | 117th Congress (2021-2022)



Help Us Advocate for Rural Health

**Urge Congress to Protect
Rural Providers**

**Urge Congress to Invest in
Rural Health Care
Infrastructure**

**Urge Congress to Invest in
Rural Health**

NRHA is drafting advocacy campaigns for the future of the rural health clinic program and more. Be on the lookout!





NRHA
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amorgan@nrharural.org

@amorganrural (TWITTER)



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<https://telemedicine.arizona.edu/webinars/previous>



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www.surveymonkey.com/r/SWTRCWebinarSurvey

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