



March 2016 Newsletter

ORH is Running to Support Rural EMS!

The staff of the Oregon Office of Rural Health is teaming up (go Team Rural!) to run in the upcoming Glow XC Fun Run in Dexter, Oregon to raise money for the Apple A Day Campaign — and we want you to be a part of it.

All proceeds from the Glow XC run go to the Apple A Day Rural Volunteer EMS grant program. If you have supported the Apple A Day Campaign in the past through the Annual Dinner & Auction, you can now support us through the Glow XC Fun Run.

If you have not supported the Apple A Day Campaign in the past, now is your chance!

How can you support Rural Volunteer EMTs and the Glow XC run?

- Sign up as a runner and come join the fun. [Go to the website](#) and you can sign up as an individual runner or you and your friends can create a team.
- Support a runner or a team. [Go to the website](#) and donate to the runner or team of your choice. (Don't forget to look for Team Rural and help the ORH staff reach their goal!)
- [Share the link](#) with your friends and family and ask them to support Apple A Day and the good work being done by rural, volunteer EMS providers.

The ORH will not be holding the Annual Apple A Day Campaign Dinner and Auction this year. We ask that you support our efforts by supporting this run. [Find out more about the Apple A Day Campaign here.](#)

Oregon Legislature Adjourns – Some Good News for Rural

The 2016 Oregon Legislature adjourned on March 3, 2016 and there was some good news for rural. The legislature funded the Medicaid Primary Care Loan Repayment Program and passed legislation to help address the Opioid abuse problem.

Medicaid Primary Care Loan Repayment Program (MLRP) — SB 5701

The Legislature appropriated \$2M for the remaining 2015-2017 biennium. Begun in 2013, MLRP was established to provide loan repayment to providers who serve Medicaid patients in underserved areas of Oregon. Qualified providers include physicians, nurse practitioners, physician assistants, dentists, expanded practice dental hygienists, psychiatrists, clinical psychologists, licensed clinic social workers and marriage and family therapists. During the 2013-2015 cycles, the program made 42 loan repayment awards.

Applications for the next round of awards are being accepted through May 16, 2016. [Details of the program and applications can be found here.](#)

Rural Hospital Transformation — SB 5701

The Legislature appropriated \$10M through the Rural Hospital Transformation bill. The money comes from unspent revenue of the hospital tax in 2013-2015. The bill will focus on four strategic projects:

- Post-Acute Care — working with Mayo Clinic to convert unused critical access hospital beds into swing beds for recovery, allowing patients to be transferred from DRG hospitals to a hospital closer to home.
- GME Consortium — support for the Graduate Medical Education Consortium to facilitate development of residency programs in rural hospitals.
- Virtual Clinics — use telehealth to improve after-hours access to primary care and urgent care services in rural communities.
- Education on Population Health – webinars and training for rural hospital administrators.

Opioid Addictions — HB 4124

The Legislature moved to address the opioid addiction problem facing Oregon. This bill has two components related to opioids and opioid abuse:

- It allows Emergency Departments (ED) to connect their Emergency Department Information Exchange with the Prescription Drug Management Program (PDMP). This will make it easier for EDs to quickly see whether a patient has recently filled an opioid prescription.
- Naloxone Rx — The bill also increases access to Naloxone, a prescription drug that can save the life of a person overdosing from opioids. A pharmacist would be allowed to prescribe and dispense this drug to someone who has undergone training. The bill was amended to allow Naloxone to be administered wherever a person may overdose.

Rep. Knute Buehler pointed out that every overdose patient admitted to the ICU costs around \$90,000.

Ground Emergency Medical Transport (GEMT) — HB 4030

EMS providers have reported there is a significant gap between the cost of emergency transport and reimbursement by Medicaid. This bill authorized the Oregon Health Authority to amend Oregon's Medicaid plan to enable an increase in Medicaid reimbursement for EMS services by as much as 40%. Washington and California are already doing this for public EMS providers. Oregon wants to expand on their plans; HB 4030 will also create a workgroup with the goal of expanding this enhanced reimbursement to nonprofit and private EMS providers as well.

Innovations to Address Opioid Use Disorder

Oregon, like much of the United States, is working to address an increasing abuse of opioids. In fact, Oregon has the second highest rate of opioid abuse in the nation, with almost one out of four Oregonians having received a prescription for opioid medications in 2013.

The 2016 Oregon Legislature passed [HB 4124](#) with the goal of decreasing prescriptions for drugs like OxyContin, reducing the overlap in opioid prescriptions and making naloxone more available. Naloxone is a drug that stops an overdose by blocking opiate receptors in the brain. The legislation will help support the State Health Improvement Plan. Created in 2015, [Oregon's State Health Improvement Plan](#) addresses the leading causes of death, disease and injury in Oregon, including opioid abuse.

The Agency for Healthcare Research and Quality recently published a list of innovative programs and tools that are being used to address the opioid abuse problem in different communities. [You can find those resources here](#) . These initiatives include community and providers in the plan to combat abuse.

How can Nurse Practitioners and Physician Assistants be Deployed to Provide Rural Primary Care?

Access to primary health care is insufficient in many rural communities, and the growth in number of people with health insurance as a result of the Affordable Care Act (ACA) exacerbates this problem. Oregon has a strong presence of Physician Assistants and Nurse Practitioners providing care. This recent study by the Rural Health Research Center looks at how PAs and NPs are an important part of the workforce shortage solution. [Read more here](#) .

Telehealth Alliance of Oregon Announces Online Portal to Find Telehealth Services

The Telehealth Alliance of Oregon has announced a new way to find telehealth services in Oregon. This portal allows providers of telehealth services in Oregon to enter information about the services they offer. The data they enter is available on the portal to anyone who would like to see and use it. The portal is searchable by provider, service type, geographic region, and reimbursement method, and allows the user to refine the search to meet specific needs. The portal can assist both those providing telehealth services as well as those seeking services. [You can read more about the portal and see what services are offered in your area here](#) □.

HHS Reaches Goal of Tying 30 Percent of Medicare Payments to Quality Ahead of Schedule

Thanks to tools provided by the Affordable Care Act, an estimated 30 percent of Medicare payments are now tied to alternative payment models that reward the quality of care over quantity of services provided to beneficiaries. This means that over 10 million Medicare patients are getting improved quality of care by having more time with their doctors and better coordinated care — nearly a year ahead of schedule. [Read more here](#) □.

Federal Office of Rural Health Policy (FORHP) Resource Guide Available

The Federal Office of Rural Health Policy (FORHP) has developed a resource guide for new applicants and grantees. The FORHP Resources Guide is a compendium with an array of relevant resources, tools and services organized by topic area that will assist with the development and sustainability of rural health projects, organizations and networks. [Get your copy here](#) □.

2016 Healthcare Staffing Trends

There is good news and bad news for healthcare leaders in the year ahead and beyond, according to experts who share five key points as part of their outlook. When it comes to healthcare job growth, there's good news and bad news for hospital leadership. The good news is that while other sectors of the economy seem to languish with a slow 8.9% projected growth rate from 2012–2022, healthcare is booming by comparison with a projected 26.5% growth rate. [Read more here](#) □.

Winding Waters Clinic Welcomes New Providers – Drs. Annika and Geoff Maly

Family medicine is a way of life for OHSU alumni Annika and Geoff Maly. As they prepare to work at Winding Waters Clinic in Enterprise, Oregon, they reflect on the experiences that led them there. “We benefited so much from OHSU rural Family Medicine programs, so we feel lucky to be able to give back in some small way, and are looking forward to working with medical students and residents from OHSU!”

[Learn more about the Malys here](#) □.

Creating a Blueprint for Rural Health in Oregon

What minimum level of health care services should rural Oregonians reasonably expect in their community, given the size and location of their community? Where do we fall short in ensuring those basics are available to local residents? The Oregon Office of Rural Health, Oregon Association of Hospitals & Health Systems and the Oregon Medical Association are frequently asked exactly those questions, by legislators and other policy makers. We are creating a blueprint to help them — and us — understand where the fabric of health care is most threadbare.

One of the highlights of our recent annual Oregon Rural Health Conference was a plenary session kicking off a project we're calling Creating a Blueprint for Rural Health in Oregon. The session outlined a process for reaching agreement on what minimum levels of health care service should be for different size rural communities throughout the state. We then asked for volunteers to actively participate in that process. More than 50 people offered to participate in eight monthly webinars, from February through September.

This first version of a blueprint will be limited to the following service areas: primary care, surgical services, oral health, behavioral health, emergency medical services, care coordination and public health services.

Once we have reached agreement on minimum levels of service in different size communities, we will compare it to what currently exists and see which communities are in greatest need.

If you are interested in participating in this process, or simply want to stay informed of it, please contact Scott Ekblad at ekblads@ohsu.edu .

Mark your Calendar!

Glow XC Run to Support the Apple A Day Campaign

Saturday, May 28, 2016

9.30pm – 11.45pm

Elijah Bristow Park

Dexter, OR

Sign up as an individual runner, team or just make a contribution by going to [the Glow XC website](#) !

The 33rd Annual Oregon Rural Health Conference

September 28-30, 2016

DoubleTree by Hilton

Portland OR

For additional information, [check out the conference webpage](#).

Beyond Translations: How to Reach Latino Communities with Effective Communications Webinar

Thursday, April 7, 2016

11.00am (pacific time)

Sponsored by the Campaign for Dental Health

[Register here](#)

2016 National Rural EMS Conference

Building Integration & Leadership for the Future

April 21-22, 2016

San Antonio Marriott Riverwalk

San Antonio, TX

For more information, contact Matt Strycker at stryckerm@nosorh.org or 574-855-4671

NE Oregon AHEC – 2016 Brain Awareness Teacher Workshop

April 16, 2016

9.30 am

Simulcast at Eastern Oregon University—La Grande and Ontario campuses

[Register here](#) □

For more information, contact NEOAHEC at 541.962.3422

Funding & Opportunities

NURSE Corps Scholarship Program

NURSE Corps Scholarship Program (formerly Nursing Scholarship Program) provides scholarships to nursing students in exchange for a minimum 2-year full-time service commitment (or part-time equivalent), at an eligible health care facility with a critical shortage of nurses. Scholarships are awarded competitively and consist of payment for tuition, fees, other reasonable costs, and a monthly support stipend. [Find program details here](#) □.

National Health Service Corp. Loan Repayment and Scholarships

Applications are now being accepted for NHSC Loan Repayment and Scholars programs. [For application and deadline information, click here](#) □.

2016 Innovations in Rural Health Award

The Kate B. Reynolds Charitable Trust is excited to announce the 2016 New Rural: Innovations in Rural Health Award. They are seeking original, innovative solutions that have the potential to drive health improvement in rural communities.

Deadline: April 29, 2016. [For more information, click here](#) □.

You can find additional funding opportunities at the [Rural Health Information Hub](#) □.

Quick Links

[Tax Credits](#)

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[Conference](#)

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