

OREGON OFFICE OF
RURAL HEALTH

- ▼ About
 - ▶ [ORH Staff](#)
 - ▶ [Rural Health Conference](#)
 - ▶ [Coordinating Council](#)
 - ▶ [Apple A Day Campaign](#)
- ▼ News
 - [ORH Newsletters](#)
- ▶ [Events](#)
- [Clinics](#)
- [Hospitals](#)
- [Providers](#)
- [Recruiting](#)
- [Data](#)
- [Resources](#)
- [Contact Us](#)



QUICK LINKS

- [Tax Credits](#)
- [Rural Medical Practitioners Insurance Subsidy Program](#)
- [Policy Updates](#)
- [CHIP](#)
- [Recruiting for Rural Oregon](#)
- [Oregon Rural Healthcare Quality Network](#)

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MARCH 2013 NEWSLETTER



HAVE YOU HEARD OF THE APPLE A DAY CAMPAIGN?

Rural Health Apple A Day Campaign



The Oregon Office of Rural Health, through its [Apple A Day Campaign](#) →, raises funds to help volunteer Emergency Medical Responders and EMS Providers pay for their EMS training.

*In many rural parts of Oregon the people who respond to 9-1-1 calls are **volunteers**. Without these volunteers the response to a 9-1-1 call could be hours away. EMS volunteers take time off work and away from their families to become certified and licensed. They pay out of their own pockets for the training needed to respond when you call — 24 hours a day, 7 days a week, 365 days a year. But more and more, these volunteers simply can't afford the ongoing tuition and related travel costs. *They need your help.**

The Apple A Day Campaign raised over \$72,000 in its first four years which has been distributed to 112 rural Oregon EMS volunteer for their continuing education to date! The 2012 campaign alone raised over \$20,000 which will be distributed in three different grant cycles during calendar year 2013.

Please help us meet our 2013 Apple A Day campaign goal of raising \$25,000. Contribute today and help ensure that no matter what corner of the state you visit, you can expect a prompt response if you ever need to dial 9-1-1.

It's easy to make your tax deductible contribution! → Thanks so much for your support!

AT THE CAPITOL

The Oregon Legislature hit the ground running on February 4th with bills introduced and ready to go on day one. "Usually we have a couple weeks to start ramping things up," says Doug Barber, lobbyist for

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the Oregon Rural Health Association. "This year, we had hearings starting on the first day. But that gives us the opportunity to get our work done and out of Salem on time."



You can track bills and follow legislative hearings by going to the [Oregon Legislative website](#) .

The Office of Rural Health, in collaboration with the Oregon Rural Health Association and other partners, is working on a number of bills that are important to health care delivery in rural Oregon. They include:

SB 325 – Provider Tax Credit

SB 325 will extend the sunset on the Rural Provider Tax Credit. The tax credit is designed to help recruit and retain qualifying providers to practice in rural Oregon communities. If no action is taken, the program will sunset for new participants on December 31, 2013. SB 325 was heard in the Rural and Economic Development Committee and referred to the Senate Health and Human Services committee. Once the bill is passed out by the Health and Human Services Committee, it will be referred to the Tax Credit Committee before reaching the Senate Floor. Click [here](#)  to find the committee members and [here](#)  for current bill status.

SB 324 – EMS Tax Credit

If you live in a rural area, you know that the EMS Provider that responds to your call is probably a volunteer. The EMS Tax Credit is designed to offer up to \$250 tax credit to qualifying rural, volunteer EMS Providers to help offset the cost incurred for time and continuing education. If no action is taken, this program will sunset on December 31, 2013. The bill was heard in the Rural and Economic Development Committee and referred to the Tax Credit Committee. You can find contact information for committee members [here](#)  and bill status [here](#) .

Loan Forgiveness – HB 2858

During the 2011 Session, the Legislature created the Primary Health Care Loan Forgiveness Program as a long-term investment in educating and retaining doctors, physician assistants and nurse practitioners who are willing to practice in rural Oregon. The program, administered through the Office of Rural Health, requires awardees to commit to one year of clinical service in an approved rural Oregon practice site for each year of loans granted through this program. Without approval of HB 2858, the program will accept no additional awardees after the current year. The bill was passed out of the House Health Care Committee and referred to the Ways and Means Committee where it awaits a hearing.

Loan Repayment – SB 440

As part of the Medicaid waiver Oregon received to implement health care transformation, CMS (Center for Medicaid and Medicare Services) insisted on a Loan Repayment program targeting primary care providers who serve Medicaid patients in rural and underserved areas. The program will provide \$2 million in loan repayment funds each of the next two years. The money could provide loan repayment for 32 physicians and 64 other providers.

Lisa Dodson, MD testified at the first hearing on SB 440 that a recent study by the Oregon Healthcare Workforce Institute indicates a loss of more than 300 primary care providers in Oregon in the last two years. According to Scott Ekblad, Director of the Office of Rural Health, Oregon had a funded Loan Repayment program that made awards between 1993 – 2008. During that time, 79 health care professionals received awards. The Office of Rural Health knows that at least 41 of those 79 are still practicing in rural Oregon.

SB 440 actually moves the existing loan repayment program out of the Office of Rural Health and to the Oregon Health Authority. However, it is expected that the OHA will contract with the Office of Rural Health to run the program because of their experience and ability to get the program up and running immediately.

"There are a lot of changes going on in health care," says Scott Ekblad, Director, Office of Rural Health. "But none of them will succeed if we do not have the providers to offer needed services. We need to make sure we are doing everything we can to attract providers to our rural areas, which are great places to practice."


SB 440 was passed out of the Senate Health and Human Services Committee and referred to the Ways and Means Committee, where it awaits a hearing.

Liability Reform - Senate Bill 483

Oregon has been trying to address the issue of liability reform in the health care industry for many years. SB 483 is a structured approach to notification, discussion and mediation of serious adverse events. The program will be administered by the Oregon Patient Safety Commission. There are four key components:

- Notice of event filing process available to both providers and the public;
- Timely discussion of the event between the provider and the patient;
- Mediation if the discussion phase does not result in resolution for both parties;
- Litigation if the discussion and mediation do not result in resolution; a patient may bring a civil action for negligence.


OREGON'S HEALTH PROFESSIONS: OCCUPATIONAL AND COUNTY PROFILES

The Oregon Healthcare Workforce Institute (OHWI), in partnership with the Office of Oregon Health Policy & Research, the Oregon Center for Nursing, the Oregon AHEC Program and the health licensing boards announce the release of the *Oregon Health Professions: Occupational and County Profiles report* . This report provides a partial, but detailed picture of the licensed health care workforce in Oregon today. The Oregon Healthcare Workforce Database was created to provide information about Oregon's healthcare workforce including workforce demographics, practice characteristics, and future plans.

Among the Key Findings:

- Between 2010 and 2012, there was an increase in the number of licensees with a practice address in Oregon for most of the health professions included in this report. However, three professions experienced a decrease: dentists (-8.8%), physicians (-2.9%) and certified nursing assistants (-0.7%).
- Between 2010 and 2012, the number of primary care physicians identifying a practice address in Oregon dropped 7.8% (-320) and the number of physician assistants in primary care declined by 2.1% (-8). The number of nurse practitioners in primary care specialties increased by 19.3% (+189).

It is important to note that there are multiple organizations, partnerships and efforts at work to increase and support Oregon's primary care workforce. For example:

- The Oregon Health Policy Board's Healthcare Workforce Committee recently issued a *report regarding primary care provider recruitment*  that includes a number of strategies to help Oregon produce more primary care professionals in-state, improve Oregon's competitiveness in recruiting, and to support community workforce planning.
- As part of its recent Medicaid waiver, the state committed to funding a primary care loan repayment program at \$2 million annually for the 2013-2015 biennium.
- Oregon's Patient-Centered Primary Care Home program is helping practices adopt new models of care using teams with a mix of provider types and capitalizing on health IT and data.
- As part of the federal Affordable Care Act, Medicaid primary care providers are receiving increased reimbursement—at parity with Medicare rates—in 2013 and 2014.

The report is available online at the [Oregon Health Care Workforce Committee's website](#) .

AROUND THE STATE

Peace Harbor Hospital Wins Award

Peace Harbor Hospital, Florence, Oregon, has been awarded an honorable mention for demonstrating excellence and innovation in the area of quality. The award was given by the National Rural Health Resource Center and nominees came from Critical Access Hospitals (CAH) from across the nation. Peace Health recently won awards from the Oregon Rural Healthcare Quality Network (ORHQN) at its annual meeting.

Providence Seaside Names New CEO

Providence Health Services has named Michael Blauer as the new chief executive for its North Coast Service Area and Providence Seaside Hospital. Michael replaces Krista Farnham who moved to

Providence Portland Medical Center.

Blauer comes from the Morrow County Health District in Heppner, Oregon where he has served as CEO. In Morrow County, he oversaw the CAH, two rural health clinics, home and hospice care, emergency medical services and an assisted living facility.

"I am very excited to be part of Providence and am honored to serve in a value-based organization that serves the poor through compassionate service," said Blauer. "My wife and I are looking forward to being involved in the community and helping to serve our neighbors."

MARK YOUR CALENDAR

2013 Telehealth Alliance of Oregon Conference

Oregon's only conference dedicated to telehealth. Learn the latest in telehealth services and implementation in Oregon

April 11 – 12, 2013

Holiday Inn, Springfield, OR

<http://www.ortelehealth.org/> →

23rd Annual Statewide Ethics Conference

Health and Well-Being: Who is Responsible

Presented by the OHSU Center for Ethics in Health Care

April 11-12, 2013

Southern Oregon University

Ashland, OR

Stevenson Union-Rogue River Room

For registration and information, contact:

Margaret Jeppesen, jeppesem@ohsu.edu ✉ or 503-494-4436

30th Annual Oregon Rural Health Conference

October 23-25, 2013

Doubletree by Hilton Hotel

Portland OR

www.ohsu.edu/orh →

2013 NATIONAL HEALTH SERVICES CORP (NHSC) LOAN REPAYMENT PROGRAM (LRP) APPLICATIONS NOW OPEN!

If you are interested in participating in the NHSC loan repayment program, get your applications in today. Application period is open through April 16, 2013. Learn more about the LRP and how you can participate by [going to their website](#) →.

STATE LOAN REPAYMENT PROGRAM (SLRP) APPLICATIONS AVAILABLE


The Oregon State Loan Repayment Program (SLRP) applications are available for Oregon sites and providers interested in participating. SLRP is a partnership among the federal government, practice sites and the Oregon Office of Rural Health. The Federal government, through the Office of Rural Health, will match dollars committed by the practice site to offer loan repayment to providers who commit to serving in a rural community.


Learn more at www.ohsu.edu/orh → or contact Julie Hoffer, program administrator, at

hoffer@ohsu.edu ✉

YOUTH PHOTO CONTEST

As part of Oregon Public Health Week celebrations, The NW Health Foundation and the Oregon Public Health Division are sponsoring the fifth annual Public Health Youth Photo Contest. Each year, Oregon youth are asked to share a photo that depicts a healthy or unhealthy environment or situation. Photos must be accompanied by a caption.

Entries may be submitted through [this link](#)  which will be updated and open to accept photos on April 1, 2013. Entries will close on Friday, April 26. As in previous years, first, second and third place

winners will win \$300, \$200 and \$100 respectively. The winning photos from last year can be [seen here](#) .



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