

Announcements from the
Federal Office of Rural Health Policy

March 7, 2019

What's New

Rural Communities Opioid Response Program-Implementation (RCORP-Implementation) – May 6. The Health Resources and Services Administration's (HRSA) Federal Office of Rural Health Policy (FORHP) will be making approximately 75 awards of up to \$1 million each to rural communities to enhance service delivery for substance use disorder, including opioid use disorder. Over the course of a three-year period of performance, grant recipients will implement a set of core prevention, treatment, and recovery activities that align with the U.S. Department of Health and Human Services' [Five-Point Strategy to Combat the Opioid Crisis](#). Award recipients are strongly encouraged to leverage workforce recruitment and retention programs such as the [National Health Service Corps \(NHSC\)](#). All domestic public and private entities, nonprofit and for-profit, are eligible to apply and all services must be provided in HRSA-designated rural areas (as defined by the [Rural Health Grants Eligibility Analyzer](#)). The applicant organization must be part of an established network or consortium that includes at least three other separately-owned entities. At least two of these entities must be located in a HRSA-designated rural area. FORHP will hold a 90-minute webinar for applicants on **Wednesday, March 27, 2019 from 11:30-1:00 pm ET**. A recording will be made available for those who cannot attend. For the webinar dial-in and playback information, please reference page (ii) in the Notice of Funding Opportunity on Grants.gov. (Click "Preview" on the Package tab, and then "Download Instructions".) Contact ruralopioidresponse@hrsa.gov with questions.

RCORP-Evaluation Funding Opportunity – May 6. The Health Resources and Services Administration's (HRSA) Federal Office of Rural Health Policy (FORHP) has released a new Notice of Funding Opportunity for the Rural Communities Opioid Response Program (RCORP)– Evaluation. HRSA anticipates making one cooperative agreement award of \$3 million per year for a 4 year period of performance. This cooperative agreement will evaluate the impact of all RCORP initiatives, which currently include [RCORP-Planning](#), [RCORP-Implementation](#), and [RCORP-Technical Assistance \(TA\)](#) activities. The evaluation activities include data collection and analyses of RCORP activities, as well as developing valuable RCORP-based evaluation tools and resources for use in rural communities and to inform future rural health initiatives. FORHP will hold an hour-long technical assistance webinar for applicants on **Thursday, March 28, 2019 from 12-1:30 PM, EST**. For the webinar dial-in and playback information, please reference page (ii) in the NOFO Notice of Funding Opportunity on Grants.gov. (Click "Preview" on the Package tab, and then "Download Instructions".) Contact ruralopioidresponse@hrsa.gov with questions.

CMS Opioid Prescribing Mapping Tool Improved with Medicaid and Rural Data. Recently, the Centers for Medicare & Medicaid Services (CMS) released an expanded version of its tool that tracks rates of opioid prescribing over time and across regions to help inform prevention and treatment efforts. For the first time since the Opioid Prescribing Mapping Tool launched in 2015, the tool allows geographic comparisons of Medicare Part D opioid prescribing rates for urban and rural communities. **See the Learning Events section below for a CMS Rural Health Open Door Forum, taking place today**, that will explain what's new for rural stakeholders.

Funding Opportunities

[Increasing Access to HIV Primary Health Care Services](#) – March 22. Rural communities may request funding preference for this \$4 million investment through HRSA's Ryan White/HIV AIDS Program. Twenty-six awards will go to public and non-profit private entities, including faith-based and community-based organizations. Tribes and tribal organizations are also eligible to apply. Funding is intended to support one short-term activity that can be completed within the one-year period of performance. Supported activities include care efforts such as HIV case finding and treatment adherence, and infrastructure development such as for electronic health records and management information systems. Assistance for applicants, including answers to Frequently Asked Questions (FAQs), a recording and slides explaining the requirements and process, and more about programs in HRSA's HIV/AIDS Bureau can be found [online at the TargetHIV website](#).

[Full-Service Community Schools Program](#) – April 15. The U.S. Department of Education will give competitive priority to rural and low-income school districts for this program that aims to coordinate academic, social, and health services through local partnerships. Applicants must be a consortium comprised of the following: one or more local education agencies or the Bureau of Indian Education; and one or more community-based organization, nonprofit organization, or other public or private entity. Approximately eight awards of up to \$500,000 per year each will be made for a project period of five years. According to the American Public Health Association, [education is a social determinant of health](#) leading to opportunity, income, and behaviors that lead to a life of well-being.

[SAMHSA: Substance Use Disorder Treatment for Minorities at High Risk for HIV/AIDS](#) – April 22. The Substance Abuse and Mental Health Services Administration (SAMSHA) will make 24 awards of up to \$500,000 each to increase engagement in care for racial and ethnic minority individuals with substance use disorders, and/or co-occurring substance use and mental disorders, who are at risk for HIV or are receiving HIV services and treatment. Eligible applicants include state, local and tribal governments, public and private universities and colleges, and community- and faith-based organizations. Racial and ethnic minority populations make up only 15 percent of the rural population, but [approximately 62 percent of people living with HIV/AIDS in rural areas are minorities](#).

[NIH Summer Research Education Experience Program](#) – April 23. This program from the National Institutes of Health (NIH) supports educational activities that complement and/or enhance the training of a workforce to meet the nation's biomedical, behavioral and clinical research needs. A focus of the program is to include individuals from groups that have been identified as underrepresented in health-related research, including those with disabilities, from rural and low-income households, and ethnic and racial minorities. Eligible applicants include state and local governments, local education and housing authorities, institutions of higher learning, and non-profit organizations that can support educational activities for high school, undergraduate, and graduate students.

Policy Updates

Visit the [FORHP Policy page](#) to see all recent updates and send questions to ruralpolicy@hrsa.gov

[Comments Requested: Improving Programs for HIV and Viral Hepatitis](#) – March 11. The Office of HIV/AIDS and Infectious Disease Policy within the U.S. Department of Health & Human Services is seeking input from the public on the National HIV/AIDS Strategy and the National Viral

Hepatitis Action Plan, both set to expire in 2020. This request for information seeks public input on improving efficiency, effectiveness, coordination, and accountability of HIV and viral hepatitis prevention, care, treatment, and cure policies, services, and programs at all levels and for all types of stakeholders. Research shows [social, environmental and economic barriers to treatment and care in rural areas](#). More recently, data from the Centers for Disease Control and Prevention show [heightened risk and vulnerability among persons who inject drugs](#), particularly in rural areas where health care infrastructure is limited.

[Comments Requested: Physician-focused Payment Model for Rural Emergencies – March 22](#). The Physician-focused Payment Model Technical Advisory Panel (PTAC) requests public comment on an alternative payment model [proposal to bundle payments for emergency cerebral neurological conditions through telemedicine](#). It would expand on the rural hospital neuro-emergent telemedicine platform and payment model, ACCESS, used in New Mexico. Comments can be emailed to PTAC@hhs.gov with subject line “Public Comment – ACCESS Telemedicine”.

[Comments Requested: Draft Report on Best Practices for Pain Management – April 1](#). A task force within the U.S. Department of Health & Human Services is seeking input from the public on a [Draft Report on Pain Management Best Practices: Updates, Gaps, Inconsistencies, and Recommendations](#). The Task Force consists of 29 experts who have significant experience across the disciplines of pain management, patient advocacy, substance use disorders, mental health, and minority health. Their recommendations are focused on a multi-modal, multi-disciplinary approach to chronic pain management and will be finalized and submitted to Congress in 2019. One recommendation included in the draft is exploration of the use of technology, particularly in rural areas, as a method of delivering patient education and support for acute and chronic pain.

[Comments Requested: ONC Proposal for Interoperability of Health IT – May 3](#). The Office of the National Coordinator for Health Information Technology (ONC) [leads the federal effort to support the adoption of health information technology](#) (Health IT) and the promotion of nationwide health information exchange to improve health care. ONC’s proposed rule promotes secure and more immediate access to health information for patients and their healthcare providers, and new tools allowing for more choice in care and treatment. The proposal aims to align requirements for payers, health care providers (including rural providers), and health IT developers to drive an interoperable health IT infrastructure across systems. ONC published a report in 2016 on interoperability for hospitals across the U.S. that revealed [a substantially lower engagement rate for small, rural hospitals](#). In a separate announcement last month, the Centers for Medicare & Medicaid Services (CMS) requested comments on a proposal to support the [MyHealthEData initiative](#), aiming to increase the flow of health information, reduce burden on patients and providers, and provide data for researchers and innovators. Comments from the public on [CMS’ Proposed Updates to Interoperability & Patient Access to Health Data](#) are also due on May 3.

Resources, Learning Events and Technical Assistance

[Rural Hospitals in Financial Distress: What We Know and What to Do – Thursday, March 7 at 1:00 pm ET](#). The Center for Optimizing Rural Health Technical Advisory Center is a HRSA/FORHP-funded initiative with the goal of understanding economic challenges, community health needs and resources, and finding ways rural hospitals and communities can keep needed care locally. This webinar will explore the common factors among rural hospitals in financial distress and offer practical advice to address those topics.

[CMS Rural Health Open Door Forum – Thursday, March 7 at 2pm ET](#). At its next forum for addressing rural health policy and clinical concerns, the Centers for Medicare & Medicaid Services (CMS) will discuss [the Hospital 5-Star Rating System](#), the newly updated [Opioid Prescribing](#)

[Mapping Tool](#), and what the [Appropriate Use Criteria Program](#) means for Critical Access Hospitals, among other topics.

[Save the Dates: Virtual Job Fairs for SUD Clinicians and Employers – through March](#)

7. HRSA's Bureau of Health Workforce will hold a series of virtual job fairs to match employers and clinicians treating substance use disorder (SUD). Virtual job fairs are free, interactive events held online allowing sites approved by the National Health Service Corps and/or NURSE Corps a chance to discuss their site, the populations they serve, and currently available positions. Clinicians and trainees in medical, nursing, dental, and mental/behavioral health, as well as SUD, can learn about hundreds of opportunities in rural and medically underserved communities.

[Count the Kicks – Rural Focus in a Campaign to Prevent Stillbirth – Wednesday, March 13 at](#)

9:00 am ET. Count the Kicks is an evidence-based campaign that works to educate expecting parents about the importance of monitoring fetal movement in an effort to prevent stillbirth. Special emphasis will be placed on the role of rural health providers in this webinar about the campaign, the current state of stillbirth, and the importance of talking with expectant parents about the risk of stillbirth in the 3rd trimester.

[Addressing the Burden of COPD in Rural America – Thursday, March 14 at 2:00 pm ET.](#)

In 2018, data from the Centers for Disease Control and Prevention revealed [significantly higher estimates in rural areas](#) of adult prevalence, Medicare hospitalizations, and deaths from chronic obstructive pulmonary disease (COPD), a respiratory condition that makes breathing difficult. In this hour-long presentation, members of the National Advisory Committee on Rural Health and Human Services will discuss their report and recommendations on rural-urban disparities for COPD, and shed light on a patient's perspective living with the disease.
