



Announcements from the Federal Office of Rural Health Policy

May 9, 2019

What's New

[New One-Stop Resource for FORHP's Rural Communities Opioid Response Program \(RCORP\).](#)

The Health Resources and Services Administration's (HRSA) Federal Office of Rural Health Policy (FORHP) created this new web page with information on upcoming RCORP funding opportunities, current grant recipients, and the program's impact to date. RCORP currently includes grants for [planning](#), [implementation](#), and [medication-assisted treatment expansion](#) for rural communities and consortia, as well as cooperative agreements for [technical assistance](#), [evaluation](#), and three [Rural Centers of Excellence on Substance Use Disorders](#). As a reminder, [RCORP-MAT Expansion](#) and [RCORP-Rural Centers of Excellence on Substance Use Disorders](#) are currently accepting applications through June 10.

[Focus on Women's Health.](#) May 12-18 is National Women's Health Week, an annual promotion by the U.S. Department of Health & Human Services to remind women of the importance of self-care.

[CDC: Pregnancy-Related Deaths Happen Before, During, and Up to a Year After Delivery.](#) In a new release earlier this week, the Centers for Disease Control and Prevention (CDC) reports that about 700 women die from pregnancy-related complications each year in the U.S. and that 60 percent of these deaths could be prevented. According to the Vital Signs report, Black women and American Indian/Alaska Native women were about three times as likely to die from a pregnancy-related cause as White women. In 2018, several studies reported that [this national trend is exacerbated by rural hospital closures](#). The Office of Research on Women's Health at the National Institutes of Health recently updated an online portal for [data, resources and learning events on maternal morbidity and mortality](#).

[Impacts of Rural Economy on Farmer Mental Health.](#) In a poll sponsored by the American Farm Bureau Federation, nearly half of farmers and farmworkers surveyed said they are experiencing more mental health challenges than they were a year ago. Financial issues were the most common stressor cited; other factors included the weather, the economy, isolation and stigma. Most of the rural Americans polled said that cost and stigma would make it harder for them to seek help or treatment. Research has shown that [eighty-five percent of federally designated mental health professional shortage areas are in rural locations](#). See the Resources section below for more information on this topic.

[FCC Expands Funding for Rural Broadband.](#) The Federal Communications Commission announced last week that reforms to its Universal Service Fund will increase the number of homes and small businesses in rural areas receiving faster broadband service.

Funding Opportunities

[RWJF Rural Learning & Coordinating Center – May 22.](#) The Robert Wood Johnson Foundation (RWJF) seeks proposals from public entities and nonprofit organizations to serve as a Rural Learning and Coordinating Center. One awardee will partner with RWJF to coordinate the work happening across the country to improve health in rural communities; advance the research and evidence that can support this work; and identify policy and systems solutions that support change in rural places given their unique

assets and challenges. **Statements of qualifications are due on May 22. The deadline for full applications is June 24.**

[American Indian Graduate Center Fellowships – June 1.](#) The American Indian Graduate Center is accepting applications for graduate fellowships for the 2019-2020 academic year. Eligible applicants are members of federally recognized American Indian tribes or Alaska Native groups who are pursuing a master, doctorate or professional degree as a full-time student and can demonstrate financial need. [Educational attainment is one of the social determinants of health](#) that can be compounded by challenges already present in rural areas and that [play a major role in a person's lifelong health and well-being](#).

[CDC Grants for Health and Wellness in Indian Country – Extended to June 12.](#) The Centers for Disease Control and Prevention (CDC) will invest \$20 million for 30 awards. Native American tribal organizations and federally-recognized governments are eligible to compete for multi-year projects with long-term goals of reducing rates of death and disability from tobacco use, diabetes, heart disease and stroke, and reducing the prevalence of obesity. **The original application deadline of May 15 has been extended to June 12.**

[CDC Emergency Department Surveillance of Non-fatal Suicide Outcomes – June 14.](#) The Centers for Disease Control and Prevention (CDC) seeks to bolster the effectiveness of its National Syndromic Surveillance Program (NSSP) with real-time information about nonfatal self-inflicted injuries presented in hospital emergency departments. [The CDC has been using syndromic surveillance since 2003 for early detection of outbreaks](#), to follow the size, spread, and tempo of outbreaks and to monitor disease trends. They will make nine awards of up to \$200,000 each to state and local governments to track incidents of self-harm and share data with the CDC that can be used for research activities, such as simultaneous tracking of suicide attempt and opioid overdose data as well as tracking geographic similarities and differences in these outcomes over time.

Policy Updates

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

[Request for Information: Physician Geographic Population-Based Payment Model – May 23.](#) In April, [CMS announced a new Primary Care Initiative](#) that will provide primary care practices and other providers with five new payment model options under two paths: [Primary Care First](#) (PCF) and [Direct Contracting](#) (DC). The three DC payment model options aim to engage a variety of organizations that have experience with financial risk and serving large patient populations. To inform one DC payment model option—the Geographic Population-Based Payment (PBP) model option—CMS seeks public input on specific design parameters, such as what criteria should CMS consider for target regions; the types of entities; payment methodology parameters; and general model design questions. In addition, CMS is interested in what safeguards are needed to preserve access and quality for rural beneficiaries and how would rural market forces (e.g., out-migration and hospital closures) affect the ability to lower cost and improve quality under this payment model option?

[Comments Requested: Institutions for Mental Disease \(IMD\) – May 31.](#) The Medicaid and CHIP Payment and Access Commission (MACPAC) requests written comments to learn more about IMDs across the country. For example, how many IMDs receive Medicaid payment and what services do they provide? This information may be useful for rural communities where research suggests patients with substance use disorders have access to [fewer options for treatment](#). Rural stakeholders interested in submitting comments should email written responses to Erin McMullen at erin.mcmullen@macpac.gov. Also see toolkits to [improve mental health](#) and [prevent and treat SUD](#) in rural communities for more information.

[Comments Requested: CMS Issues Draft Guidance on Hospital Co-location](#) – July 2. The Centers for Medicare & Medicaid Services (CMS) seeks public input on draft guidance regarding how CMS and State Agency surveyors will evaluate a hospital's co-location of space and staff when assessing the hospital's compliance with the [Medicare Conditions of Participation \(CoPs\)](#). It clarifies that sharing of staff may be done through a contractual arrangement where there are clear lines of authority and accountability and that sharing public areas, such as entrances and waiting rooms, would be permissible. [RHlhub](#) highlights several programs in rural communities that have used co-location of services and staff to improve efficiencies, including lessons learned about this approach.

[Request for Information: State Waivers for Health Insurance](#) – July 2. Section 1332 of the Patient Protection Affordable Care Act (PPACA) permits states to apply for State Innovation Waivers (aka [Section 1332 Waivers or State Relief and Empowerment Waivers](#)) to pursue innovative strategies for providing high value and affordable individual health insurance regardless of income, geography, age, gender, or health status. As a follow-up to the [guidance released last year](#), CMS requests additional ideas for innovative waiver concepts that could increase insurer participation and lower premiums, including how states might align these Section 1332 flexibilities with Section 1115 Medicaid waivers and state law. [In 2018, rural areas had fewer insurers offering individual health insurance](#) and higher average adjusted premiums compared to urban areas.

Learning Events and Technical Assistance

[ASTHOConnects Series on Brain Health](#) – Monday, May 13 at 3:00 pm ET. The Association of State and Territorial Health Officials (ASTHO) will hold this hour-long event to address brain health, Alzheimer's, and other dementias. The *ASTHOConnects* Series on Brain Health is designed to inform state and territorial health officials and their staff specific ways to support caregiving for aging adults. Data from the 2010 Census showed that [one-quarter of all adults aged 65 years and older lived in rural areas](#).

[HRSA on Maternal Mortality](#) – Wednesday, May 15 at 1:00 pm ET. The Health Resources and Services Administration (HRSA) will host this 90 minute webinar to discuss federal projects, research, and funding to address maternal mortality. See the Approaching Deadlines section below for a HRSA funding opportunity related to this issue, the [Rural Maternity and Obstetrics Management Strategies Program](#).

[Meeting Needs of Dual Eligible Older Adults with SUD](#) – Thursday, May 16 at 1:30 pm ET. Older adults with substance use disorder (SUD) benefit from treatment approaches that are age appropriate, designed to address common co-occurring conditions, mobility limitations, and social factors. During this 90-minute program, experts will identify promising practices for screening, treatment, and care coordination, and demonstrate practical strategies.

[Addressing Recent Trends in Syphilis Epidemiology](#) – Thursday, May 16 at 2:00 pm ET. The Southwest Telehealth Resource Center will discuss best practices for screening and clinical management of syphilis. Recent news has uncovered [a rise in new cases that are impacting rural areas](#).

[HRSA Virtual Job Fair for the Health Workforce](#) – Wednesday, May 22 at 6:45 pm ET. Practicing clinicians and those in training can register for this online job fair to learn about job opportunities in underserved communities. Connect to the 3.5-hour event using any device with access to the internet and interact with employers in real time.

[Northeast Telehealth Resource Center Regional Conference](#) – June 17-18. This two-day conference in Portland, Maine features a keynote presentation by Chris Gibbons, MD, MPH - Chief Health Innovation Adviser, FCC and the Future for Digital Health, a special panel on Federal and Regional Telehealth Policy Perspectives, and other key topics from national and regional telehealth leaders. There are more than fifteen breakout sessions on a wide variety of areas including: strategies for planning and sustaining

telehealth programs, telehealth use cases across various environments, models for serving vulnerable populations through telehealth, and more. This year's event also includes a Pre-Conference Telebehavioral Health Workshop: "A Provider's Guide to TeleMental Health: Key Concepts and Use Cases", and two hands-on technology labs with the National Telehealth Technology Assessment Resource Center.

Resources of the Week

[Mental Health Resources for Agricultural Workforce](#). The Great Plains Center for Agricultural Health is promoting Mental Health Awareness Month with a collection of resources and learning events to help farmers, workers, and their families find ways to get help if and when they need it.

[Minnesota Farm & Rural Helpline](#). The newest addition to the Models and Innovations library at the Rural Health Information Hub is this a free, confidential helpline available 24/7 for farmers and farm families dealing with stress. The resource connects callers with counselors, help with daily living (like childcare or food assistance), and financial/legal advice.

[SAMHSA Suicide Prevention Competencies for Faith Leaders](#). The Substance Abuse and Mental Health Services Administration (SAMHSA) joined with the National Action Alliance for Suicide Prevention to produce this guide to help faith leaders prevent suicide.