May 7, 2020

What’s New

**HHS Begins Distribution of Payments to Hospitals with High COVID-19 Admissions, Rural Providers.** On May 1, the U.S. Department of Health and Human Services (HHS) announced that it is processing payments from the Provider Relief Fund to hospitals with large numbers of COVID-19 inpatient admissions through April 10, 2020, and to rural providers in support of the national response to COVID-19. Recipients of the $10 billion rural distribution will include, rural acute care general hospitals and Critical Access Hospitals (CAHs), Rural Health Clinics (RHCs), and Community Health Centers located in rural areas.

**Federal Office of Rural Health Policy FAQs for COVID-19.** A set of Frequently Asked Questions (FAQs) from our grantees and stakeholders, updated regularly.

**Request for Information: Clinical Experience in Suicide Prevention in Primary Care Settings – August 7.** The National Institutes of Health seeks information from the public to better understand the opportunities and barriers in the primary care community regarding efforts to care for individuals with suicide risk. Relevant topics include how suicide screening is deployed, cultural/linguistic needs of patients, reaching disparity populations, and telehealth adaptations.

**USDA Atlas of Rural and Small-Town America.** The Economic Research Service (ERS) at the U.S. Department of Agriculture (USDA) has updated statistics on several socio-economic factors for rural areas. Researchers at the ERS use data from the U.S. Census Bureau’s American Community Survey, an ongoing function of the Census that keeps track of changes in demographics, employment trends, household incomes, veterans’ status, and other factors that help determine how federal and state funds are distributed.

**NAM on Improving Access to Treatment for OUD.** The National Academies of Medicine (NAM) addresses the treatment gap in medically-assisted treatment for opioid use disorder (OUD), and presents strategies for increasing access to medicines such as buprenorphine and methadone.

**FCC Report on Broadband Deployment.** On April 24, the Federal Communications Commission (FCC) issued its report on access to broadband service in the U.S., with information specific to broadband access in rural and tribal communities and the U.S. territories.

**CDC COVID-19 Updates.** The Centers for Disease Control and Prevention (CDC) provides daily updates and guidance. New this week: 1) updated guidance on caring for someone sick at home; 2) an interactive map with the number of cases and deaths for each state, and 3) a recording of La Vida Durante la Pandemia del Coronavirus, an all-Spanish webcast from April 29. CDC also does regular clinical calls for public health emergency response, called Clinician Outreach and Communication Activity (COCA).

**Confirmed COVID-19 Cases, Metropolitan and Nonmetropolitan Counties.** The RUPRI Center for Rural Health Policy Analysis provides up-to-date data and maps on rural and urban confirmed
cases throughout the United States. An animated map shows the progression of cases beginning January 21.

**Rural Response to Coronavirus Disease 2019.** The Rural Health Information Hub has created a guide to help you learn about activities underway to address COVID-19.

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**Funding and Opportunities**

Please note that many deadlines for Federal funding opportunities have been extended. See Approaching Deadlines section below.

**HHS COVID-19 Funding Minority, Rural, and Socially-Vulnerable Communities – May 11.** On May 1, the U.S. Department of Health & Human Services (HHS) announced a competitive funding opportunity to invest up to $40 million for the development and coordination of a strategic network of national, state, territorial, tribal and local organizations to deliver important COVID-19-related information to racial and ethnic minority, rural and socially vulnerable communities hardest hit by the pandemic. The information network will strengthen efforts to link communities to COVID-19 testing, healthcare and social services and to best share and implement effective response, recovery, and resilience strategies.

**HRSA Rural Communities Opioid Response Program-Implementation – Extended to May 26.** A reminder that the Health Resources and Services Administration (HRSA) has extended the application deadline for its three-year program to implement a set of core opioid use disorder prevention, treatment, and recovery activities in rural communities. The list of Frequently Asked Questions on eligibility and application requirements (under the tab “Related Documents”) has been updated. Applicants can also view an archived recording of the technical assistance webinar and send questions to ruralopioidresponse@hrsa.gov.

**Rural Training Track Program Director Development – June 7.** Rural Training Track (RTT) is a cooperative organization that offers peer learning and technical expertise in medical professions training in rural areas; participating programs pay annual fees. RTT is offering three scholarships to its National Institute for Program Director Development.

**DOL Senior Community Service Employment Program – June 15.** The U.S. Department of Labor (DOL) will make 25 awards with a total investment of $312 million to support community-level programs for low-income older individuals seeking to enter or re-enter the workforce. Eligible applicants are nonprofit organizations and Federal public agencies that can demonstrate ability to administer a multi-state program.

**ACL Alaska Native Tribal Resource Center on Domestic Violence – June 26.** The Administration for Children and Families (ACL) will invest $1 million/year for a three-year statewide project helping Alaska Native communities respond to family violence, domestic violence, and dating violence in a culturally sensitive and relevant manner.

**DOL Mine Health and Safety Grants – June 30.** The U.S. Department of Labor (DOL) will make 56 awards with total funding of $10.5 million for state-level training programs for small mining operations. Training is to include miners’ statutory rights, occupational safety hazards, and mine emergency preparedness, among other issues. Eligible applicants include public institutions of higher education, nonprofit organizations, tribal organizations, state/local governments, and territorial governments (including the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, American Samoa, Guam, and the Commonwealth of the Northern Mariana Islands).
ACF Basic Center Program for Runaway/Homeless Youth – July 3. The Administration for Children and Families (ACF) will make 120 awards with total funding of $24 million for community-based programs that can provide up to 21 days of shelter for youth who have left home. Eligible applicants include state and local governments, Native American tribal organizations (federally-recognized and others); public housing authorities, and nonprofit organizations.

DOL Workforce Opportunity for Rural Communities – July 29. The U.S. Department of Labor (DOL) will make 35 awards with a total investment of more than $29 million to support long-term economic growth strategies developed by regional partnerships. Eligible applicants include state and local governments, regional organizations, public and private institutions of higher education, federally-recognized Tribal governments, and nonprofit organizations.

Rural Health Research

Research in this section is provided by the HRSA/FORHP-supported Rural Health Research Gateway. Sign up to receive alerts when new publications become available.

Metropolitan/Nonmetropolitan COVID-19 Confirmed Cases and General and ICU Beds. The number of confirmed COVID-19 cases in rural areas has sparked concern about the availability of health resources to meet increased need. This policy brief from the RUPRI Center for Rural Health Policy Analysis uses data from the American Hospital Association annual survey to examine case incidence and hospital bed availability.

Health Care Professional Workforce Composition Before and After Rural Hospital Closure. Researchers at the RUPRI Center for Rural Health Policy Analysis used National Provider Identifier data to examine changes in the local health care workforce prior to, and following, the closure of hospitals in 85 rural communities between 2010 and 2019. (Note: a hospital closure can mean a complete closure with no remaining health care services or a converted closure in which the former hospital site provides only non-inpatient services but remains open, e.g., becomes a freestanding emergency department.)

Policy Updates

Visit the FORHP Policy page to see all recent updates and send questions to ruralpolicy@hrsa.gov.

Comments Requested: CMS Issues Second COVID-19 Interim Final Rule – July 7. On April 30, CMS issued another round of regulatory waivers and rule changes during the COVID-19 Public Health Emergency. These changes build on temporary regulatory waivers and new rules CMS announced March 30 and April 10. Highlights of the waivers and rule changes include flexibilities to increase hospital capacity, health care workforce changes, efforts to reduce administrative burden, and a number of expansions of telehealth in Medicare. For more information on the COVID-19 waivers and guidance, and the Interim Final Rule, please go to the CMS COVID-19 flexibilities webpage.

CMS Extends Promoting Interoperability Hardship Exception Deadline for Hospitals. If a health care provider is eligible to participate in the Medicare Promoting Interoperability Program, they must successfully demonstrate meaningful use of their certified electronic health record (CEHRT) each year to avoid a downward payment adjustment. Eligible hospitals and CAHs may be exempted from the Medicare downward payment adjustment if they can show that compliance with the requirement for being a meaningful EHR user would result in a significant hardship. To be
considered for an exception (to avoid a downward payment adjustment), eligible hospitals and CAHs must complete and submit a Hardship Exception Application. CMS recently extended the deadline to September 1 for hospitals (previously July 1). The deadline to submit a Hardship Exception Application is November 30 for CAHs.

**CMS Publishes Update to RHC/FQHC COVID-19 Guidance.** On April 30, CMS updated its MLN Matters® Special Edition Article is for Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) during the COVID-19 Public Health Emergency for services provided to Medicare beneficiaries. The update provides additional details about the new payment for telehealth services, cost-sharing related to COVID-19 testing, additional telehealth flexibilities, and the revision of the bed count methodology for determining the provider-based RHCs exemption to the RHC payment limit.

**CMS Updates EMTALA Requirements and Implications Related to COVID-19.** Recently, CMS issued a Memorandum that conveys information in response to inquiries from hospitals and Critical Access Hospitals (CAHs) concerning implications of COVID-19 for their compliance with the Emergency Medical Treatment and Labor Act (EMTALA). The memo was revised to include additional guidance related to the establishment of drive through testing sites, clarification of expectations in relation to the triage process and the medical screening examination, and use of telehealth. Among other topics, the memo address transfers to and from rural hospitals.

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**Learning Events and Technical Assistance**

**AgriSafe: COVID-19 Weekly Think Tank** – Thursday, May 7 at 12:00 pm ET. The AgriSafe Network holds a weekly discussion with rural health and safety professionals to identify risks that farmers, farm workers and ranchers face as it relates to COVID-19.

**SAMHSA Combating Social Isolation for Seniors during COVID-19** – Thursday, May 7 at 1:00 pm ET. The Substance Abuse and Mental Health Services Administration (SAMHSA) will hold a 90-minute webinar with practical ideas for promoting connection and recovery for older adults with mental illness and/or substance use disorders.

**IHS All Tribal and Urban Indian Organization Leaders Call** – Thursday, May 7 at 4:00 pm ET. The Indian Health Service (IHS) will provide updates in this hour-long call.

**Ending the HIV Epidemic: American Indian/Alaska Native (AI/AN) Engagement** – Friday, May 8 at 1:00 pm ET. Join the Health Resources and Services Administration and the HIV/AIDS Network Coordination for a 75-minute webinar with an overview of the national Ending HIV initiative and strategies for AI/AN populations.

**Telehealth 101: Intro and Q&A** – Fridays at 4:00 pm ET. The HRSA/FORHP-supported South Central Telehealth Resource Center (TRC) will provide the basics of telehealth and telemedicine each Friday through May 8. Get more resources and find your regional TRC online.

**Applying for the Vulnerable Rural Hospital Assistance Program** - Monday, May 11, 2020 at 1:00 pm ET. The Center for Optimizing Rural Health, provides targeted in-depth technical assistance to rural hospitals and their communities through the FORHP-funded Vulnerable Rural Hospital Assistance Program. During this webinar, the Center will explain the program and its application process that begins on May 11.
**AgriSafe: Behavioral Health Planning for Farming in the Era of COVID-19** – Tuesday, May 12 at 1:00 pm ET. The AgriSafe Network presents this hour-long webinar to help farm families learn how to recognize signs of physical and emotional distress and incorporate daily coping tactics.

**Rural Graduate Medical Education Faculty Recruiting and Development: Building the Core of Your Program** – Tuesday, May 12 at 1:00pm ET. The Rural Residency Planning and Development Technical Assistance is hosting a one-hour webinar about graduate medical education program faculty needs. You can also get more [free resources for developing rural residency programs and rural training tracks](https://www.ruralresidency.org) by registering to access the toolbox.

**Rural Health and COVID-19** – Tuesday, May 12 at 4:00 pm ET. Federal leaders from the U.S. Departments of Health & Human Services (HHS) and Agriculture (USDA) will come together in a 60-minute presentation to highlight tools and resources specific to rural communities.

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**Resources of the Week**

**ASTHO Training for COVID-19 Contact Tracers.** The Association of State and Territorial Health Officials (ASTHO) is providing a free online course for entry-level COVID-19 contact tracers. [Contact tracing is a control measure for preventing further spread of disease](https://www.astho.org/astho-training/). The training will be augmented by protocols specific to state and local jurisdictions and focus on building knowledge for remote contact tracing.

**Indian Country ECHO for COVID-19.** The ECHO Model for health professions training uses [interactive video technology to connect remote providers with specialists](https://www.indiancountryecho.org) at centers of excellence in real-time collaborative sessions. The Indian Country ECHO provides knowledge and support for front-line clinicians managing COVID-19 and other complex conditions such as hepatitis C, HIV, chronic pain, and substance use disorders.

**Online COVID-19 Training for Community Health Workers.** In rural settings, Community Health Workers (CHWs) act as [liaisons between providers and consumers](https://www.medicalcaredevelopment.org), providing culturally-appropriate health education, making referrals for health and social services, and advocating for individuals and communities within the health service system. This free online training from the global public health organization, [Medical Care Development (known as MCD)](https://www.mcdhealth.org), covers the various roles CHWs can take in combating the spread of the coronavirus.