

Rural partnerships achieve sustainable outcomes by leveraging federal funds

By Ann Ferrero, Marcia Green and Christina Villalobos



Susan Foster, nurse, and Rori Schreiman, nurse practitioner, discuss a patient's medical record at Live Well Community Health Center in Concordia, Mo.

For more than 20 years, the Office of Rural Health Policy (ORHP) has been providing grants to small, rural community-based organizations.

And many rural networks have leveraged the federal funding by using ORHP grants to catapult their goals.

“These grants serve as seed money for helping rural communities test out new ways to address local health care challenges,” says Tom Morris, ORHP associate administrator. “What’s been amazing over the years is to also watch how so many grantees are then able to garner additional funds and resources – often local and foundation dollars – to keep those projects going long after federal funding has ended. They serve as examples that others can learn from as they end up producing outcomes and benefits beyond the original intent of

their funding requests.”

ORHP’s Rural Health Information Technology Network Development (RHITND) Program is a three-year, one-time initiative. The program seeks to improve health care and support the adoption of health information technology (HIT) in rural America by providing targeted HIT support to rural health networks.

“The ability to secure the necessary capital for expanding a network’s organizational capacity and obtaining the initial investment in essential hardware and software is a challenge for many rural providers, so the intent of the RHITND Program is to improve health care and support the adoption of HIT among rural health networks located in the most disadvantaged areas,” says Nisha Patel, ORHP community-based division director.

Health Care Collaborative of Rural Missouri

The Health Care Collaborative of Rural Missouri (HCC) is one of 41 RHITND Program grantees. HCC’s focus is to develop and implement programs that are responsive to documented health needs of rural patients in West Central Missouri with specific health status indicators as benchmarks for progress on addressing those needs.

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HCC implements and supports region-wide programs that help create access to education, awareness, prevention and treatment of health care conditions. HCC works directly with service providers such as rural hospitals (I-70 Community Hospital, Carroll County Memorial Hospital, Fitzgibbon Hospital and Lafayette Regional Health Center), federally qualified health centers (Rodgers-Lafayette Dental and Health Clinic and Live Well Community Health Center), a community mental health center (Pathways Community Behavioral Healthcare Inc.) and county health departments.

“When you bring people together who are passionate about health care and equally passionate about looking out for the underserved, you can move the needle,” says Toniann Richard, HCC executive director.

The network is supported by leveraging funds from federal agencies and the private sector. Since 2008, HCC has successfully implemented a number of ORHP grants through its various programs, including Rural Health Network Development Planning Program, Rural Health HIT Network Program, Rural Health Network Development Program and Rural Health Care Services Outreach Grant Program. HCC has also leveraged other federal funding such as Health Resources and Services Administration grants and a U.S. Department of Agriculture grant.

Each ORHP grant opportunity is carefully matched with another funding or revenue stream, which aligns with HCC's strategic plan, Richard explains.

HCC has secured more than \$5 million over the past six years to address access to care needs. Most recently, HCC was awarded a Health Center Cluster 330 Grant and federally qualified health center status for its two rural clinics in Lafayette County, Mo.; it is the first rural health network in the country to achieve this status.

Chautauqua County Health Network

Chautauqua County Health Network (CCHN), in western New York, is another example of multiple organizations coming together to leverage funds.

In 2010, CCHN received the Small Healthcare Provider Quality Improvement (SHPQI) grant, its first federal grant. The purpose of ORHP's quality program is to provide funding and other support to improve the quality of health care services in the rural primary care setting. Grantees focus on improved health outcomes and enhanced chronic disease management by using a team approach and providing more patient-centered care. Funding recipients are required to collect and report data on clinical quality measures and use the data to drive quality improvement efforts.

"CCHN and other grantees have used the grant announcement as a catalyst to seek additional funds through the building and strengthening of partnerships," says Ann Abdella, CCHN executive director.

The network comprises more than 100 local health care providers and community-based organizations. Its mission is to strengthen the economic viability of hospitals and other health care providers, promote access to quality health care related services, facilitate partnerships to address community needs, plan for the efficient delivery of care and develop appropriate health resources.

"In 2010, a diverse collection of clinicians and organizations was providing health care in Chautauqua County, with little or no coordination among them," Abdella explains. "So CCHN engaged 10 primary care practices to build an integrated network with the support of the quality grant. As the practices began by sharing data and ideas, their confidence




Health Care Collaborative of Rural Missouri staff

in working together increased and led them to begin thinking about more effective and efficient ways to coordinate patient care across multiple settings, which is especially important for patients with chronic conditions or multiple illnesses. These efforts not only have led to better health outcomes for CCHN patients, but also facilitated the formation of an accountable care organization (ACO)."

The ACO, known as Chautauqua Region Associated Medical Partners, is a group of doctors, hospitals and other health care providers who have come together to voluntarily provide coordinated care to Medicare patients.

"This effort has resulted in improved outcomes for patients with diabetes and hypertension," Abdella says. "Every practice showed an improvement in blood pressure, with a 4.6 percent improvement overall."

CCHN staff also plan to analyze claims data to demonstrate they have improved health care quality at lower cost and use it to negotiate future pay-for-performance contracts with insurers, contributing to the sustainability of the providers. 

Ann Ferrero, Marcia Green and Christina Villalobos are public health analysts for the Office of Rural Health Policy's community-based division.

More money

Learn about current and former Office of Rural Health Policy grantees that have leveraged federal dollars to expand health care programs and services by visiting the Rural Assistance Center's Rural Health Models and Innovations Hub at raconline.org.