2022 NACo

LEGISLATIVE CONFERENCE

FEBRUARY 12-16 | WASHINGTON HILTON | WASHINGTON, D.C.
Navigating Federal Resources to Improve Rural COVID-19 Response Efforts

Tuesday, February 15 | 8:00 – 9:15 am EST
Washington Hilton Hotel | Columbia 9 & 10, Terrace Level
2022 NACo

LEGISLATIVE CONFERENCE

Hon. Greg Puckett
Chair of NACo Rural Action Caucus,
Commissioner
Mercer County, W.Va.
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@NACoTweets
#NACoLeg
2022 NACo LEGISLATIVE CONFERENCE
FEBRUARY 12-16 | WASHINGTON HILTON | WASHINGTON, D.C.
THERE ARE OVER 2,000 COUNTIES WITH POPULATIONS BELOW 50,000 PEOPLE
THE RECOVERY FUND PROVIDES $7.6 BILLION DIRECTLY TO EVERY SMALL COUNTY, PARISH AND BOROUGH IN AMERICA

Total allocation by county (including consolidated funds) are official values from the U.S. Treasury that counties will receive under the American Rescue Plan.
HOW ARE COUNTIES INVESTING RECOVERY FUNDS?
- COUNTIES WITH POPULATIONS OVER 250,000

Health Programs: 79%
Human Services, Children & Families: 68%
Transportation & Infrastructure, including Water and Sewer: 57%
Workforce & Employment: 46%
Diversity, Equity & Inclusion Initiatives: 43%
Housing & Homelessness Services: 43%
Small Business Support: 37%
Resident Broadband Access: 33%
Justice & Public Safety: 25%

Source: NACo analysis of 200 county SLFRF Recovery Plans, as of November 17, 2021. Counties with populations over 250,000 were required by the U.S. Treasury to submit an SLFRF Recovery Plan Performance Report that details planned Recovery Fund allocations and/or expenditures as of August 31, 2021.
COUNTIES PLAN TO INVEST RECOVERY FUNDS TO:

- PROVIDE EDUCATIONAL OPPORTUNITIES IN LOW-INCOME AREAS
- CREATE BUSINESS ENTREPRENEURSHIP AND TRAINING OPPORTUNITIES
- CONNECT YOUTH AND FAMILIES IN THE CHILD-WELFARE SYSTEM WITH WRAPAROUND SERVICES
- EXPAND VACCINE EQUITY CLINICS AND OUTREACH
- CONNECT UNSERVED PARTS OF THE COUNTY WITH RELIABLE SERVICE
- PROVIDE AFFORDABLE HOUSING FOR RESIDENTS
- STRENGTHEN PUBLIC SAFETY INFRASTRUCTURE AND OPERATIONS
- PROVIDE MENTAL HEALTH SUPPORTS FOR SENIORS
- CONNECT RESIDENTS TO LANDLORD ENGAGEMENT PROGRAMS
- ASSEMBLE MOBILE MENTAL HEALTH OUTREACH TEAMS
- RESTORE AND UPDATE HOTELS TO PROVIDE HOUSING FOR HOMELESS INDIVIDUALS
- FUND EDUCATIONAL SUPPORTS AT COUNTY LIBRARIES
SMALL COUNTY EXAMPLES: BOLSTERING PUBLIC HEALTH SERVICES

Socorro County, N.M.
set aside $50,000 for community vaccine incentives and $25,000 for a vaccine lottery.

Harris County, Ga.
is investing in COVID prevention tactics within the county jail, as well as in HVAC improvements.

Jefferson County, Mont.
has allocated $100,000 to invest in its Health Department and $50,000 to support long-term care facilities. The county is also using $100,000 to support licensed childcare providers with sustainment of existing facilities and supporting new programs throughout the county.
Smaller County Examples: Bolstering Public Health Services

Skagit County, Wash. launched the County Medical Reserve Corps to assist with the ongoing pandemic response and vaccination efforts and purchased a van for additional testing, vaccination and future communicable disease response needs.

Coffee County, Ala. purchased and equipped an ambulance for Enterprise Rescue to continue COVID-19 operations and support.

Kodiak Island Borough, Alaska is investing in its hospital, allocating $300,000 to help pay for the analysis, planning and preparation of design improvements to the Kodiak Island Hospital Complex.
**Cochise County, Ariz.**
is allocating Recovery Funds to establish a psychiatry department that provides accessible mental health services to residents.

**Renville County, Minn.**
is also investing in mental health services, alongside other major county priorities like childcare.

**Whitman County, Wash.**
is investing $750,000 in mental health services, especially in funding new staff for Palouse River Counseling, which offers behavioral health services and group sessions to help people deal with anxiety or depression stemming from the COVID-19 pandemic.
COUNTY INVESTMENTS OF AMERICAN RESCUE PLAN RECOVERY FUNDS

The State and Local Coronavirus Fiscal Recovery Fund, part of the American Rescue Plan Act (ARPA), which NACo helped develop and strongly advocated to pass, allocates $65.1 billion directly to every county across the nation. These funds provide direct, flexible aid for every county, parish and borough in America. Counties are on the front lines in delivering this aid to residents and are a driving force connecting communities and strengthening the economy. Below, find analysis and trends of county investment priorities, share how your county is supporting your residents and explore our database of county ARPA Recovery Fund investment plans.

COUNTY INVESTMENT PLAN DATABASE  RECOVERY FUND RESOURCE HUB  SHARE YOUR STORY
NACo’s COUNTY INVESTMENT PLAN DATABASE:
www.naco.org/resources/featured/county-investments-american-rescue-plan-recovery-funds

EXPLORE COUNTY EXAMPLES

The following collection of planned ARPA Recovery Fund investments is sourced from official county documents such as the SLFRF Recovery Plan Performance Reports, county press releases or other county budgeting materials. The summaries and numbers below provide a brief overview of a county’s current planned investments. To date, NACo has collected 255 plans, 200 of which are Recovery Plans. SLFRF Recovery Plans contain detailed project performance data, including information on efforts to improve equity and engage communities for counties with populations above 250,000.

For questions or to submit your county’s plan, email research@naco.org.

filter by topic - Any -  by county size Small Counties  by state - Any -  SLFRF Recovery Plans only  

CALVERT COUNTY, MD.
2020 POPULATION: 92,783
DESCRIPTION:
Calvert County’s proposed ARPA allocation includes $2 million for premium pay for non-television county employees, $500,000 for an End Hunger Grant, over $1 million for revenue loss, $800,000 towards economic relief for local businesses, $1.5 million for temporary emergency medical services staffing, $3 million for infrastructure repairs and $2.2 million for a broadband buildout project.

CAYUGA COUNTY, N.Y.
2020 POPULATION: 78,249
DESCRIPTION:
Cayuga County has allocated $1 million for a revitalization project at Emerson Park, $200,000 for a restaurant voucher program which provides a 50 percent county subsidy towards the purchase of gift cards and $400,000 for vaccination clinics and contact tracing costs.

CHEMUNG COUNTY, N.Y.
2020 POPULATION: 84,148
DESCRIPTION:
Chemung County’s ARPA proposal includes: $1 million for a grant program to benefit “orange zone” businesses that were deemed non-essential and had to close during the pandemic, $2.5 million for the Chemung County Nursing Facility, $376,000 for tourism lost revenue, $1 million for capital improvements at county recreation and tourism facilities and $243,000 to create a new Deputy Director of Budget and research to help with ARPA funds.

CHESHIRE COUNTY, N.H.
2020 POPULATION: 76,458
DESCRIPTION:
The Cheshire County Commission approved a spending plan for over $7.2 million in ARPA funds. The allocations include $1 million in additional support to the Maplewood Nursing Home Reconstruction Project, $2.3 million for energy upgrades across all three county campuses, $1 million for qualifying municipal improvement projects and unplanned COVID-10 costs distributed to Cheshire County’s towns, $750,000 for compensation investments to support essential services to residents, $8,500 for a Summer Concert Series to welcome people back to public events, and $1 million to support COVID-19 testing and vaccine efforts.
Local Government ARPA Investment Tracker

A Partnership of NLC, Brookings Metro, and NACo.

Note: Within this interactive tracker, users can select search filters below—including by location and type of expenditure—or search through the map, to find detailed information on large city and county plans for deploying American Rescue Plan Act (ARPA)’s State and Local Fiscal Recovery Fund dollars. This tracker will be updated as more information becomes available over time.

<table>
<thead>
<tr>
<th># of Local Governments</th>
<th># of Projects</th>
<th>Total $ Tracked</th>
<th>% of Funding Budgeted</th>
</tr>
</thead>
<tbody>
<tr>
<td>152</td>
<td>2334</td>
<td>$18.4bn</td>
<td>48.6%</td>
</tr>
</tbody>
</table>

National Sample Average

- **Government Operations**: 37.9%
- **Infrastructure**: 12.1%
- **Housing**: 12.7%
- **Economic & Workforce Dev**: 10.5%
- **Community Aid**: 12.3%
- **Public Safety**: 2.3%
- **Public Health**: 12.2%

www.NACo.org/ARPAtracker
Questions?
Research@NACo.org
Rural Resources for Responding to COVID-19

Jocelyn Richgels
Rural Policy Research Institute
February 2022
Counties with COVID-19 Deaths
February 13, 2022
Metro deaths: 742,835  Nonmetro deaths: 160,476
Metro rate: 26.83  Nonmetro rate: 34.82
Metropolitan and Nonmetropolitan Counties. Confirmed cases, deaths, and rates
February 10, 2022

<table>
<thead>
<tr>
<th></th>
<th>Metropolitan</th>
<th>Nonmetropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed cases</td>
<td>65,110,536 (23.5%)</td>
<td>11,017,265 (23.9%)</td>
</tr>
<tr>
<td>Deaths</td>
<td>739,621 (0.3%)</td>
<td>159,834 (0.3%)</td>
</tr>
<tr>
<td>Cases/10K population</td>
<td>2,352</td>
<td>2,391</td>
</tr>
<tr>
<td>Deaths/10K population</td>
<td>26.72</td>
<td>34.68</td>
</tr>
<tr>
<td>Counties w/ 2000+ cases/10K</td>
<td>922 (79.1%)</td>
<td>1,473 (74.5%)</td>
</tr>
<tr>
<td>Counties w/ 25+ deaths/10K</td>
<td>727 (62.3%)</td>
<td>1,507 (76.3%)</td>
</tr>
</tbody>
</table>
All County Confirmed COVID-19 Cases
Week-to-Week Count Changes: 01/31/2022 - 02/13/2022

Legend:
- No cases reported
- Increase, notable
- Increase, not notable
- No change
- Decrease, notable
- Decrease, net notable

Data source: Johns Hopkins University CSSE COVID-19 Data
https://github.com/CSSEGISandData/COVID-19
Noncore County Confirmed COVID-19 Cases
Week-to-Week Count Changes: 01/31/2022 - 02/13/2022
Rural Health Information Hub COVID-19 Resources

Rural Response to Coronavirus Disease 2019 (COVID-19)

On This Page
- Key Rural COVID-19 Resources
- Rural COVID-19 Trends
- Key Federal Sites
- Additional Rural-Relevant Resources

More in This Topic Guide
- Vaccination
- Rural COVID-19 Innovations
- State Response
- Resources
- Funding & Opportunities
- News
- Events
- About This Guide

Share Your Community’s COVID-19 Innovations

How has your community been adapting to address COVID-19? Please email your examples to Kristine Sando at kristino@ruralhealthinfo.org with the subject line: COVID-19 Innovations. Your examples may be included in the Rural COVID-19 Innovations collection.

This guide will help you learn about activities underway to address COVID-19, the disease caused by the SARS-CoV-2 virus, with a focus on rural communities.

See the Emergency Preparedness guide for communication planning tools to reach rural communities.
Key Rural COVID-19 Resources

**Path Out of the Pandemic: President Biden's COVID-19 Action Plan**
The White House
A comprehensive federal action plan to address COVID-19. Covers vaccination, testing, prevention, and care for those with COVID-19. Also addresses schools and the economy.

**NRHA COVID-19 Technical Assistance Center**
National Rural Health Association
Supports the needs of rural providers and communities impacted by the COVID-19 pandemic. Assists rural healthcare organizations through financial consultations, operational support, and help obtaining essential medical resources, including Personal Protection Equipment (PPE). Also provides information on vaccine distribution and education.

**Re-imagining Leadership: A Pathway for Rural Health to Thrive in a COVID-19 World**
Colorado Hospital Association, Eugene S. Farley, Jr. Health Policy Center
A COVID-19 emergency response playbook for rural healthcare delivery systems. Includes an assessment tool to help rural communities examine governance and leadership, community engagement, financial health, clinical care, and emergency preparedness and resilience.

**Rural Healthcare Surge Readiness**
COVID-19 Healthcare Resilience Working Group
Up-to-date and critical resources for rural healthcare systems preparing for and responding to a COVID-19 surge.

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**Rural COVID-19 Trends**

**CDC COVID Data Tracker: Trends in COVID-19 Cases and Deaths in the United States, by County-level Population Factors**
Centers for Disease Control and Prevention
Provides data on COVID-19 cases and deaths for metropolitan, micropolitan, and non-core areas for the nation, by region, and by state.

**COVID-19 County Reports**
RUPRI Center for Rural Health Policy Analysis
Current data on COVID-19 cases for metropolitan and nonmetro counties, as well as a collection of data briefs showing trends in COVID-19 cases over time.
Sustaining Rural Infrastructure for Pandemic Response

How do we make sure treatment and vaccine is available and accessible?

- Rural Pharmacies
- Rural Hospitals & Public Health
- Rural Telemedicine
Sustaining Rural Infrastructure for Pandemic Response: Pharmacy

Nonmetropolitan County Pharmacy Availability
"Partner" or Other Pharmacies with Immunization Service*

*Includes independent, chain, franchise, and government pharmacies that provide pharmaceutical medications. Includes pharmacies affiliated with HHS partners, or other pharmacies that provide immunizations.

Data source: National Council of Prescription Drug Programs 2023

Rural Policy Research Institute (RPRI)
University of Iowa, College of Public Health
Sustaining Rural Infrastructure for Pandemic Response: Public Health & Hospitals

56 Rural Hospitals Closed 2017-2020
University of North Carolina Rural Health Research

*Map includes closure data for January 1, 2017 through December 31, 2020. Study analysis reflects only closures that were known as of August 31, 2020.
Sustaining Rural Infrastructure for Pandemic Response: Telehealth

- Expanded uses for telehealth through COVID-19 Public Health Emergency
- But rural uptake is lower than urban uptake
- 30% of urban Medicare beneficiaries used telehealth; 22% of rural Medicare beneficiaries (May 2020)
- Primary care telehealth peaked at 25% of visits for rural; 47% for urban.
- The rate of telemedicine visits among rural patients significantly increased to 147 visits per 1000 patients in June 2020. A similar but steeper increase was observed among urban patients (220 visits per 1000 urban patients).

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8023379/
Sustaining Rural Infrastructure for Pandemic Response: Telehealth

New Opportunities for Telehealth Usage

- Services eligible for Medicare payment were expanded by 135 additional services.
- Medicare beneficiaries allowed to receive telehealth-enabled visits in new locations, including their home, through payments to providers to offer these services.
- Rural Health Clinics and FQHCs allowed to provide distant site telehealth services to Medicare beneficiaries.
- All health care professionals, including therapists, speech language pathologists and others may deliver and bill for services through telehealth.
Focus: Rural Nursing Homes

Weekly Mean Resident Vaccination Percentage

- Metropolitan
- Micropolitan
- Noncore
Updates from the Federal Office of Rural Health Policy
NACo Annual Legislative Conference

February 15, 2022

Michael Fallahkhair
Principal Advisor
Federal Office of Rural Health Policy (FORHP)

Vision: Healthy Communities, Healthy People
Agenda

- Overview of HRSA, FORHP and Rurality
- Community Health
- Opioids and Substance Use Disorder
- American Rescue Plan and Workforce Funding
- COVID-19 Activities
- Expansion of Telehealth
- Policy, Research, and Resources
- FY 2022 Funding Opportunities
Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged

Over 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities

Every year, HRSA programs serve tens of millions of people, including people with HIV/AIDS, pregnant people and their families, and those otherwise unable to access quality health care
The Federal Office of Rural Health Policy (FORHP) collaborates with rural communities and partners to support community programs and shape policy that will improve health in rural America.

- **Cross Agency Collaboration**: Works across HRSA, HHS, and several other federal partners to accomplish its goals
- **Capacity Building**: Increases access to health care for people in rural communities through grant programs and public partnerships
- **Voice for Rural**: Advises the HHS Secretary on policy and regulation that affect rural areas

[Map showing Counties and Census Tracts Eligible for FORHP Funding]
Rural Population Diversifying

New Census Data Shows Pattern Mirrors Broader National Trends

• The median rural community saw its population of color increase by 3.5 percentage points between 2010 and 2020
   Two-thirds of rural counties consisted of at least 10% people of color
   One-third were more than a quarter people of color
   10 percent of rural counties are majority people of color
   40% of AI/AN live in non-metro areas

The Federal Office of Rural Health Policy (FORHP) has supported:

- at least 750,000 people each year since 2011
- 200 grantees
- 80% continue services after program ends

The goal of rural community programs is to improve health service delivery by strengthening health networks and encourage collaboration among rural health care providers.

Watch **Improving Rural Health Outcomes: Stories from the Field** to hear Grantee stories.

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**Ongoing Support**

- Flex, SHIP, RHC TA
- Research Policy Analysis, Flex Monitoring Team

**Leveraging Telehealth**


**HRSA Awards over $12.7 Million to Programs Enhancing Health Care Delivery to Rural Underserved Populations**

HRSA NEWS RELEASE

FOR IMMEDIATE RELEASE

APR 12

Today, the Health Resources and Services Administration (HRSA) announced more than $12.7 million in funding to 61 public, private and non-profit entities across 35 states to serve rural communities and address rural health disparities as part of its community-based Rural Health Care Services Outreach Program (Outreach Program).

The Outreach Program expands and improves health services for rural residents by supporting innovative and evidence-based approaches tailored to the specific needs of local communities.

For the first time, funds will go toward supporting the Healthy Rural Homelessness Initiative (HRHI) to address underlying factors that drive rural health disparities related to the five leading causes of avoidable death (heart disease, cancer, unintentional injury, chronic lower respiratory disease, and diabetes).

“HRSA is dedicated to supporting community-focused approaches to improve health care in rural and underserved areas,” said Acting HRSA Administrator Dianna Bosempena. “Through strong partnerships with local organizations, the Outreach Program will improve the health of the nations’ underserved and vulnerable rural populations and expand access to comprehensive, culturally competent, quality primary health care services.”

HRSA’s Federal Office of Rural Health Policy administers the Outreach Program. The first round of the program awarded over $8.8 million to 43 recipients to collaborate with local health care and social service organizations to deliver health services to underserved and socioeconomically disadvantaged rural residents. Services will focus on social determinants of health, chronic disease management and prevention, care...
The Rural Dimensions of the Opioid Epidemic

Recent Data Release from the National Center for Health Statistics

- Rural overdose deaths track the rise in urban deaths
- Pandemic has driven increases
- Rural areas have limited infrastructure to offer treatment
- Rural areas are also dealing with substance use issues beyond opioids

Provisional Drug Overdose Deaths by Urban/Rural Classification: 2018 – 2020

Source: https://data.cdc.gov/NCHS/Provisional-Drug-Overdose-Deaths-by-Urban-Rural-CL/dtm2-meqi
RCORP is a multi-year $440 million initiative launched in FY 2018 that provides direct funding and technical assistance to rural communities addressing behavioral health needs, including SUD/OUD.

- Investments across 47 states and 2 territories, reaching 1,500+ rural counties
- In FY 2020:
  - Direct services to more than 2 million rural patients
  - Over 71,000 rural patients received medication-assisted treatment
- RCORP programs have expanded to more diverse and emerging areas:
  - Behavioral Health Services
  - Psychostimulant
  - Neonatal Abstinence Syndrome
Workforce Funding from the American Rescue Plan

Focusing Solely on Rural Communities

Rural Public Health Training Workforce Program

• Goals:
  ▪ Supporting networks linking educational entities, clinical sites, key workforce stakeholders
  ▪ Linking the training directly to potential work sites through practicums and employment
  ▪ Ensuring that the networks are community-focused and use a shared co-equal governance approach
  ▪ Focusing on high-need communities and develop networks with a focus on diversity and health equity

• Four Tracks:
  ▪ Community Health Workers
  ▪ Community Paramedicine
  ▪ Health Information Technology, Telehealth Technical Support
  ▪ Respiratory Therapy and Case Management/Coordination
Rural Public Health Workforce

Potential Network Partners ...

- County Governments
- Local Health Departments
- Rural and Critical Access Hospitals
- Rural Health Clinics
- Community Health Centers
- Community and Technical Colleges
- State and Local Workforce Investment Boards (from the Workforce Investment and Opportunity Act funding)
- Non-Profits and Foundations with an interest in workforce
- Area Health Education Centers

- State Offices of Rural Health
- State Rural Health Associations
- Primary Care Associations
- Human and Social Service entities:
  - Community Action Agencies
  - Head Start and other child care providers
  - Labor One-Stop Job Centers
  - TANF Programs
  - Area Agencies on Aging
  - Housing Assistance Councils
  - Food Banks
Rural COVID-19 Activities

**Rural Health Clinic COVID-19 Vaccine and OTC Test Kit Distribution Programs**
Distributes COVID-19 vaccines and over the counter test kits directly to Rural Health Clinics (RHCs) to increase the availability of COVID-19 vaccines and test kits in rural communities.

**Rural Health Clinic COVID-19 Testing and Mitigation Program**
Funds to assist over 4,600 RHCs across the country in maintaining and increasing COVID-19 testing efforts, expanding access to testing in rural communities, and expanding the range of mitigation activities in local communities.

**Rural Health Clinic Vaccine Confidence Program**
Support vaccine outreach in rural communities. Efforts include helping to increase vaccine confidence and uptake, reinforcing basic messages about prevention and treatment of COVID-19, and vaccine promotion.

**Small Rural Hospital Improvement Program (SHIP) COVID-19 Testing and Mitigation**
Funds the state SHIP grantees to support over 1,500 small rural hospitals to expand their COVID-19 testing and mitigation efforts.
Mapping the Rural COVID-19 Response

RHC and SHIP COVID-19 Testing & Mitigation
RHCCOVID-19Testing@hrsa.gov

RHC Vaccine Confidence
RHCVaxConfidence@hrsa.gov

RHC COVID-19 Vaccine Distribution
RHCVaxDistribution@hrsa.gov

Find More Information Here
Expansion of Telehealth
Expanding HRSA’s Focus

- Pandemic-driven acceleration aided by reduction or regulatory barriers
- New resources on licensure burden
- Elevation of the Office for the Advancement of Telehealth within HRSA
- Challenges and opportunities with Broadband
HHS Telehealth Resources

• Telehealth.HHS.gov
  https://telehealth.hhs.gov/

• Telehealth Resource Centers
  https://www.telehealthresourcecenter.org/

• ProviderBridge
  https://www.providerbridge.org/

• Multi-Discipline Licensure Resource Project
  https://licensureproject.org/

• Rural Telehealth Research Center
  https://ruraltelehealth.org/
State Offices of Rural Health

- Share information, resources and innovative projects with other rural health stakeholders
- Coordinate with other state partners on rural health issues
- Link rural health stakeholders to Federal and state resources
- Rural recruitment and retention

Connect with your SORH: [https://nosorh.org/nosorh-members/](https://nosorh.org/nosorh-members/)
Rural Health Policy

Regulatory Review

The Federal Office of Rural Health Policy is charged in Section 11020(a) of the Social Security Act with advising the Secretary of the U.S. Department of Health and Human Services on the effect that federal health care policies and regulations may have on rural communities. Monitoring current and proposed changes, including programs established under titles VIII and XIX (Medicare and Medicaid), FORHP analyzes their impact on the financial viability of small rural hospitals and clinics, on the ability of rural areas to attract health professionals, and on rural access to high-quality care.

Data collection and analysis is essential to understanding the challenges in rural communities, how those communities are impacted by policy, and setting policy for the future. For this reason, the work of the Rural Health Research Centers informs that of FORHP’s policy team and vice versa.

Policy Updates

April 1

CMS Guidance to Resume Hospital Survey Activities (PDF - 265 KB). As of March 23, 2021, the Centers for Medicare & Medicaid Services (CMS) is lifting the suspension on hospital survey activities, which was put in place due to the public health emergency. Non-immediate jeopardy

Reports

Guide for Rural Health Care Corporation and Coordination (2019) (PDF - 2.1 MB). This Guide describes how rural hospitals, community health centers, local public health departments, and other rural stakeholders can work together to assess and address their rural communities’ health needs.


Final Report to Congress on Frontier Health Demonstration Project (2020) (PDF - 345 KB). This final Report to Congress expands on the interim report, with findings from the duration of the 3-year model and recommendations for legislative and administrative action.

Questions about Policy Updates?

Write to ruralpolicy@hrsa.gov

ruralhealthresearch.org

The Rural Health Research Gateway is an online library of research and resources. The website is free to use, searchable, and provides access to the work of the Rural Health Research Centers and Analytic Initiatives funded by the Federal Office of Rural Health Policy.

The Rural Health Research Center programs is the only federal program that is dedicated entirely to producing policy-relevant research on health care in rural areas. The centers study critical issues facing rural communities in an effort to secure adequate, affordable, high-quality health services for rural residents.

This online resource of research connects you to:

- Research and policy centers
- Publications and journal publications
- Fact sheets
- Policy briefs
- Research articles
- White papers
- Experts
- Data
- Dissemination toolkit

Connect with us:

facebook.com/RHRG Gateway

twitter.com/HRSGateway
Resources

Rural Health Information Hub (RHIhub)

**Topic Guides**

- Rural Healthcare Workforce
  - Maintaining the healthcare workforce is fundamental to providing access to quality healthcare in rural areas. Rural healthcare facilities must employ enough healthcare professionals to meet the needs of the community. They must have proper licensure, adequate education and training, and cultural competency skills. Equally important, optimizing how health professionals are used and enhancing coordination among them helps ensure that patients are getting the best care possible.
  - Strategies can include:
    - Using interprofessional teams to provide coordinated and efficient care for patients and extend the reach of each provider.
    - Ensuring that all professionals are fully utilizing their skill sets and working at the top of their license; that is, practicing to the full extent of their training and allowed scope of practice.
    - Removing state and federal barriers to professional practice, where appropriate.
    - Changing policy to allow alternative provider types, once evidence shows they can provide quality care.

**Funding Opportunities**

- Indian Health Service Loan Repayment Program
  - Loan repayment for undergraduate and graduate health professional educational loans in return for full-time clinical service in Indian Health Service programs.
  - Geographic coverage: Nationwide
  - Application Deadline: Aug 15, 2019
  - Sponsors: Indian Health Service, U.S. Department of Health and Human Services

**Models and Innovations**

- **High Plains Community Health Center Care Teams**
  - Updated/Released February 2019
  - **Need:** Meeting health care demands in a region with a limited number of physicians, where recruiting additional providers is considered impractical.
  - **Intervention:** Using the additional support of health coaches, implementation of care teams consisting of 3 medical assistants to support each provider.
  - **Results:** More patients seen per provider hour, with improved patient outcomes and clinic cost savings.

https://www.ruralhealthinfo.org/
HRSA Needs Your Help!

Consider Being a HRSA Grant Reviewer

https://www.hrsa.gov/grants/reviewers
FORHP Weekly Announcements

Focus on ...
✓ Rural-focused Funding opportunities
✓ Policy and Regulatory Developments Affecting Rural Providers and Communities
✓ Rural Research findings
✓ Policy updates from a Rural Perspective

To sign up: Email Michelle Daniels at mdaniels@hrsa.gov

What's New

HHS Reports Funding for COVID-19 Response in Rural Areas. On Tuesday, the U.S. Department of Health & Human Services (HHS) announced $336 Million for COVID-19 testing and mitigation. The funds will be distributed by State Offices of Rural Health to 1,540 rural hospitals through the Small Rural Hospital Improvement Program.

One Month Left to Enroll in, or Change, Health Insurance Marketplace Coverage. Last week, HHS released a report on current trends and challenges to accessing affordable health care in rural America. Analysts found that, although uninsured rates have fallen in rural areas, other barriers to care such as geographic distances, infrastructure limitations, and provider shortages contribute to rural health disparities. The report comes one month before the special enrollment period for qualified individuals and families ends on August 15. As noted in the HHS brief, 65 percent of the 1.9 million rural uninsured individuals in HealthCare.gov States may be able to find a zero-premium plan on the platform.

NOSORH Accepting 2021 Community Star Nominations. The National Organization of State Offices of Rural Health (NOSORH) seeks nominations until August 2 of individuals, organizations, or consortia making a big difference in the health of rural communities.

COVID-19 Resources

Rural Health Clinic Vaccine Distribution (RHCVI) Program. Under the program, Medicare-certified RHCS will receive direct COVID-19 vaccines in addition to their normal jurisdictions’ weekly allocation. Contact RhCVaxDistribution@hrsa.gov for more information.
Connect with HRSA

Learn more about our agency at:

www.HRSA.gov

Sign up for the HRSA eNews

FOLLOW US:
## FY 2022 FORHP Funding

<table>
<thead>
<tr>
<th>Grant Program</th>
<th>Background</th>
<th>Anticipated Application Due Date</th>
<th>Potential Project Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rural Communities Opioid Response Program—Implementation</strong></td>
<td>$50 M in funding ($1 million each) to support prevention, treatment, and recovery service delivery in rural communities.</td>
<td>1/13/2022</td>
<td>9/1/2022</td>
</tr>
<tr>
<td><strong>Rural Health Network Development Planning</strong></td>
<td>$1.1 million in funding for planning and strategic efforts towards the development of new rural health networks</td>
<td>1/28/2022</td>
<td>7/1/2022</td>
</tr>
<tr>
<td><strong>Rural Public Health Workforce Training Network Program</strong></td>
<td>$47 million in funding; up to 31 awards to expand public health capacity by supporting health care job development, training and placement in rural and tribal communities</td>
<td>3/15/2022</td>
<td>8/1/2022</td>
</tr>
<tr>
<td><strong>Rural Residency Planning and Development Program</strong></td>
<td>$11 million in funding to award recipients to create new rural residency programs</td>
<td>12/20/2022</td>
<td>8/1/2022</td>
</tr>
<tr>
<td><strong>Delta Region Rural Health Workforce Training Program</strong></td>
<td>The purpose of this program is to educate and train future and current health professionals in the rural counties and parishes of the Mississippi River Delta Region and Alabama Black Belt</td>
<td>1/25/2022</td>
<td>9/1/2022</td>
</tr>
</tbody>
</table>
# FY 2022 FORHP Funding

<table>
<thead>
<tr>
<th>Grant Program</th>
<th>Background</th>
<th>Anticipated Application Due Date</th>
<th>Potential Project Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rural Communities Opioid Response Program (RCORP) - Behavioral Health Care Support</strong></td>
<td>$13 million for behavioral health care services and address health inequities including through evidence-based, trauma-informed treatment for substance use disorder</td>
<td>3/18/2022</td>
<td>9/1/2022</td>
</tr>
<tr>
<td><strong>Medicare Rural Hospital Flexibility Program – Emergency Medical Services Supplement</strong></td>
<td>This is part of an ongoing program that goes to State Offices of Rural Health and focuses on rural EMS issues.</td>
<td>3/11/2022</td>
<td>9/1/2022</td>
</tr>
<tr>
<td><strong>Small Health Care Provider Quality Improvement Program</strong></td>
<td>Up to $8 million to support the planning and implementation of quality improvement activities for rural primary care providers</td>
<td>3/21/2022</td>
<td>8/1/2022</td>
</tr>
</tbody>
</table>
## Community-Based Division
### Outreach Funding Opportunity Forecast

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2022</th>
<th>FY 2023</th>
<th>FY 2024</th>
<th>FY 2025</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural Health Care Services Outreach</td>
<td></td>
<td></td>
<td></td>
<td>NOFO Available Fall 2024</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Project Period Start 5/1/2021</td>
</tr>
<tr>
<td>Rural Health Network Development</td>
<td></td>
<td></td>
<td>NOFO Available Summer 2022</td>
<td>Project Period Start 7/1/2023</td>
</tr>
<tr>
<td>Rural Health Network Development Planning</td>
<td>NOFO Available Fall 2021</td>
<td>NOFO Available Fall 2022</td>
<td>NOFO Available Fall 2023</td>
<td>NOFO Available Fall 2024</td>
</tr>
<tr>
<td></td>
<td>Project Period Start 7/1/2023</td>
<td>Project Period Start 7/1/2023</td>
<td>Project Period Start 7/1/2024</td>
<td>Project Period Start 7/1/2025</td>
</tr>
<tr>
<td>Small Health Care Provider Quality Improvement</td>
<td>NOFO Available Winter 2022</td>
<td>NOFO Available Summer 2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Project Period Start 8/1/2022</td>
<td>Project Period Start 8/1/2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delta States Rural Development Network</td>
<td></td>
<td></td>
<td>NOFO Available Summer 2022</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Project Period Start 8/1/2022</td>
<td></td>
</tr>
</tbody>
</table>