

MARYLAND RURAL HEALTH NEWS AND NOTES

MARYLAND STATE OFFICE OF RURAL HEALTH

WINTER 2009

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Maryland Department of Health and Mental Hygiene

Martin O'Malley
Governor

Anthony G. Brown
Lt. Governor

John M. Colmers
Secretary, DHMH

Family Health Administration

Russell Moy, M.D., M.P.H.
Director, FHA

Joan H. Salim
Deputy Director, FHA



Rural Health Agendas Moving Forward

Happy 2009 from the Maryland Office of Rural Health! Despite 2009 being a fiscally tight year, there are still ideas and momentum to help improve the health of rural Maryland. The Rural Health Implementation Plan (RHIP) is in final draft. This document is a report out of Rural Health Listening Sessions held by the Maryland Rural Health Association (MRHA) that identified specific objectives and actionable items to move the Rural Health Plan forward. Rural recruitment and retention of health care providers, the priority strategy in the Rural Health Plan, was the sole topic of the Rural Health Roundtable on October 2-3, 2008 hosted along with the Rural Maryland Council (RMC) and MRHA. A report out of the roundtable can be found at http://www.ruralforvm.state.md.us/Roundtables/RRT2_08.html, and comments can be provided to rmc@mda.state.md.us. The Task Force on Health Care Access and Reimbursement (HCAR) has released draft recommendations, which can be found at http://www.dhmh.state.md.us/hcar/pdf/nov2008/nov25/Draft_HCAR_Final_Report.pdf. HCAR has been examining a variety of issues related to health care access and provider reimbursement in the State of Maryland over the past year. The Task Force on Rural Physician Shortage met for the last time in December after a series of meetings through the fall, and its recommendations are in draft as well by the University of Maryland Medical School. If anyone has any questions on these groups or recommendations, please do not hesitate to contact our office.

Nursing Education Comes to Garrett County

Nursing education is coming to Garrett County—thanks to a partnership between Allegany College of Maryland (ACM) and Garrett County Memorial Hospital (GCMH). This program is expected to graduate as many as 20 new registered nurses every other year. This new opportunity, made possible by a grant from the Maryland Health Services Cost Review Commission, is intended to sharply increase the number of practicing RN's in a county federally designated as medically underserved.

Garrett County is the only Maryland jurisdiction lacking on-site nursing education, and this extension of ACM's well-regarded degree program advances the State's goal of having more qualified bedside nurses available for its hospitals.

News of the grant funding was hailed by administrators of the Oakland hospital as a positive development in its mission to provide quality health care to residents of Garrett County and nearby portions of Grant, Mineral, Preston and Tucker counties in West Virginia.

GCMH will host clinical training at its 56-bed acute care facility and provide preceptors to guide students through its various units as well as arrange space for students' classroom education.

Submitted By: Kathy Greaser, Director of Development, Garrett County Memorial Hospital

Rural Policy Reports

New AMA Policy Addresses Barriers to Primary Care Physician Recruitment

Agency: *American Medical Association*

The nation is experiencing the beginning of a physician shortage – with primary care being especially hard hit. As the U.S. population grows and millions of baby boomers age, this shortage promises to get worse with major repercussions for the health of the nation.

<http://www.ama-assn.org/ama/pub/category/20276.html>

Eligible But Not Enrolled? Potential for Targeting Over a Half-Million Rural Medicare Beneficiaries for Enrollment in the Low-Income Subsidy Prescription Drug Program

Agency: *RUPRI Center for Rural Health Policy Analysis*

<http://www.unmc.edu/ruprihealth/Pubs/LIS%20Brief%202008-5.pdf>



Policy Recommendations - In Support of Rural Entrepreneurship

Agency: *RUPRI Center for Rural Entrepreneurship*

Discusses recommendations, including healthcare, from the Microenterprise and Entrepreneurship Rural Summit which was held in May 2008.

Rural Resources *(continued on pg. 3)*

Developing Effective Strategies for Recruitment and Retention of Physicians and Other Medical Professionals Webinar Series

Agency: *The Ohio Association of Community Health Centers (OACHC) and The National Rural Recruitment and Retention Network (3RNet)*

The Recruitment and Retention Webinar Series - a four-part program is specifically tailored for community health centers, rural health centers, critical access hospitals, and other rural health care facilities. This series is also appropriate for state agencies involved with recruitment and retention. Please share this information with the health centers, clinics and hospitals in your states - all are welcome. To view the complete brochure with session descriptions and registration costs, visit:

https://asoft144.securesites.net/secure/ohiopca/clientuploads/conference_brochures/Webinars/Recruitment_2009_Brochure.pdf

Rural America At A Glance

Agency: *USDA Economic Research Service*

Highlights the social and economic conditions in rural areas for use in developing policies and programs to assist rural areas. This edition focuses on employment, poverty, population change, and demographic characteristics of non-metro areas.

<http://www.ers.usda.gov/Publications/EIB40/EIB40.pdf>

Caregiving in Rural America

Agency: *Easter Seals and the National Alliance for Caregiving*

This report highlights the unique challenges and opportunities faced by caregivers living in rural America.

http://www.easterseals.com/site/PageServer?pagename=ntl_pr_caregiving_rural_america_info

Concentrated Rural Poverty and the Geography of Exclusion

Agency: *Carsey Institute*

Reports that social exclusion and isolation in poor communities often reinforce racial and class inequality.

<http://www.carseyinstitute.unh.edu/publications/PB-Lichter-Parisi.pdf>

Outreach Sourcebook: Rural Demonstration Project 2005-2008

Agency: *Health Resources & Services Administration (HRSA)*

This report documents 30 Outreach Grant Programs in 20 states that ran from 2005-2008. While they are now completed, they serve as a valuable resource for those interested in learning about the Outreach grant program and the impact they can have on rural health care. The sourcebook is available at: <http://www.raconline.org/pdf/vol13sourcebook.pdf>

Rural Resources *(continued from pg. 2)*

Affordable Health Services and Care in Maryland Brochure

Agency: Maryland Department of Health and Mental Hygiene (DHMH)

Provides a listing of affordable health services and care options offered in the state.

<http://dhmh.state.md.us/gethealthcare/affordable.pdf>

Rural Health Funding Alerts *(continued on pg. 4)*

Distance Learning and Telemedicine Program (DLT)

Agency: U.S. Department of Agriculture

Eligibility: Eligibility is open to county governments, cities, schools, public and state institutions, non profits, private institutions, and for profit organizations. To assess eligibility for grant you need to know percentage of students receiving National School Lunch Program (NSLP) in the School District where equipment will be located. This NSLP data can be found at:

<http://www.marylandpublicschools.org/MSDE/programs/schoolnutrition/docs/Free+and+Reduced-Price+Meal+Data>

Funding: \$50,000 - \$500,000; 15% matching contributions required

Deadline: March 24, 2009

Purpose: To meet the educational and health care needs of rural America through the use of advanced telecommunications technologies. In the Grant Program, the focus is on funding end-user equipment that operates via telecommunications to connect students and teachers or medical providers and patients in separate rural locations.

Website: <http://www.usda.gov/rus/telecom/dlt/dlt.htm>

Rural Access to Emergency Devices

Agency: Office of Rural Health Policy, Health Resources and Services Administration

Eligibility: Awards will be made to community partnerships. These partnerships are defined as a consortium of first responders (e.g., EMS, Law Enforcement and Fire Departments) and local for-profit and nonprofit entities that may include but are not limited to long-term care facilities, rural health clinics, community health centers, post offices, libraries and other civic centers, athletic facilities and senior organizations applying as a community partnership. All applicant organizations have to be located in an eligible rural county or eligible rural census tract of urban counties. Eligible rural counties can be found at: <http://ruralhealth.hrsa.gov/funding/eligibility>. The eligible census tracts of urban counties are included in the document identified above. To identify the Census Tract where your organization is located, visit the webpage at: <http://app.ffiec.gov/geocode/default.htm>.

Funding: \$1.1 million for 10 grant awards

Deadline: February 4, 2009

Purpose: To purchase automated external defibrillators (AED) that have been approved, or cleared for marketing by the Food and Drug Administration, and to provide defibrillator and basic life support training in AED usage through the American Heart Association, the Red Cross, or other nationally recognized training courses.

Website: <https://grants.hrsa.gov/webExternal/SFO.asp?ID=1D4BE65A-9CC5-40ED-8D08-27020BB43C51>

Call For Rural Behavioral Health Promising Practices Nominations

Through collaboration with the Health Resources and Services Administration's Office of Rural Health Policy, and the Nakamoto Group, Inc., the Western Interstate Commission for Higher Education (WICHE) Mental Health Program is working to identify promising practices, best practices, models that work, and evidence-based practices in rural behavioral health.

There are many challenges to providing behavioral health services in rural America, but, despite the challenges, there are programs that have a positive impact on the behavioral health of rural Americans. By sharing information about these successful programs, other providers can learn from these models of practice and incorporate these successful program designs into their own communities. The overall goals of this project are to highlight some of these rural promising practices, and to provide information for rural promising practices to achieve higher levels of evidence-based practice to become models for other communities.

In the initial stage of the project, people are asked to nominate a practice by completing a brief survey (approx. 1.5-2 hours in length). Once a sufficient number of nominated practices have been received and reviewed, 30-40 practices will be selected from which to collect additional information. At that point, a short list of 10-20 practices will be selected for site visits. The end result will be a formal "rural promising practices" document summarizing the promising practices for a national audience, as well as a technical assistance guide for rural programs that want to move toward becoming evidence-based or promising practices.

The goal of the initial survey is to identify practices that are successful in meeting a mental health and/or substance abuse (behavioral health) need in a rural area. The definition of "meeting a behavioral health need in a rural area" is purposefully vague. "Meeting a need" could include increasing access to and/or availability of behavioral health services, increasing awareness about behavioral health issues, recruitment and/or retention of behavioral health providers, treatment of a behavioral health problem, prevention services, etc. If your organization is doing something that has a positive impact on behavioral health in a rural area, please participate in the survey.

The survey must be completed by 5:00 p.m. PST on March 13, 2009 for your nominated practice to be considered. Should you have any questions as you are completing the survey, please contact Nicole Speer at 303-541-0257, or e-mail your question to nspeer@wiche.edu. To access the survey, simply follow this link or copy this web address into your web browser: http://www.surveymonkey.com/s.aspx?sm=UHDjmLGvktkCAL5JfbWwVQ_3d_3d

Please forward this announcement to others who may have practices to nominate.

Rural Health Funding Alerts *(continued from pg. 3)*

Telehealth Network Grant Program

Agency: Health Resources and Services Administration

Eligibility: Nonprofits or public entities that can provide services through a telehealth network to rural or underserved urban communities or through a tele-home care network to patients in their homes located in either urban underserved or rural communities. Rural counties are those that are non-metropolitan areas/rural counties as defined by Rural Urban Commuting Areas Codes (RUCAs). A list of eligible rural counties is located at: <http://ruralhealth.hrsa.gov/funding/eligibilitytestv2.asp>

Funding: \$3.4 million for 14 awards

Deadline: March 6, 2009

Purpose: The Telehealth Network Grant Program demonstrates how telehealth programs and networks can improve access to quality health care services in underserved rural and urban communities.

The telehealth grants go to networks that must:

- Expand access to, coordinate and improve the quality of health care services.
- Improve and expand the training of health care providers.
- Expand and improve the quality of health information available to health care providers, patients and their families.

Website: <https://grants.hrsa.gov/webExternal/SFO.asp?ID=52A7B2CF-1213-4FBD-9E72-B5820C031562>

Maryland Success Stories

Southern Maryland Non-Profit Addresses Social/Emotional Needs of Children

Healthy Families Charles County, a program of the Center for Children, Inc. located in La Plata, offers participants enrolled in home visiting services for teen and first time parents Early Childhood Behavioral Consultation and Mental Health Services to ensure that children at risk of poor childhood outcomes have every opportunity to grow up healthy. Begun in 2006 with the generous support of the United Way of Charles County, Rural Maryland Council, and Weyerhaeuser Family Foundation, Healthy Families Charles County has been providing in-home support through a licensed clinician to parents of children, ages 0-5 years, who are concerned with their child's social/emotional development.

For more information, please visit <http://www.center-for-children.org/healthyfamilies.asp>

Submitted by: Colleen S. Wilburn, Program Director, Healthy Families Charles County

Sexual Assault Response Teams Ready to Respond

The Shore Health System has announced that sexual assault response teams (SARTs) are available in Talbot and Dorchester counties, ensuring that survivors receive immediate, accessible and comprehensive services by trained and caring professionals. In partnership with For All Seasons, a community mental health clinic and rape crisis center, a SART team was formed in Talbot County in November 2006. The second SART, in Dorchester County, was formed in April 2008.

For more information, please visit <http://www.shorehealth.org/news/article.shtml?id=410>

Submitted by: Linda Mastro, Editorial Specialist, Shore Health Systems

University of Maryland, Baltimore, Department of Psychiatry Offers Telemental Health Services

In November 2008, the University of Maryland, Baltimore, Department of Psychiatry began offering telemental health services to the rural areas of Maryland. The Department is part of a grant from the Health Resources and Services Administration (HRSA) to provide telemental health services to seven rural sites on the Eastern Shore, Garrett County and Southern Maryland.

For further details, please visit http://www.umm.edu/psych/pdf/newsletter_win_spr09.pdf

Submitted by: Robert White, LCPC, University of Maryland, Baltimore, Department of Psychiatry

Do you have a success story you would like to share with the rural community? Please email mclark@dhhm.state.md.us with a brief summary to be included in the next newsletter by March 15, 2009.

National News

VA Announces \$22 million for Rural Veterans

On January 9, 2009, the Department of Veterans Affairs (VA) released a statement reporting that \$21.7 million has been provided to its regional health care systems to improve services specifically designed for veterans in rural areas.

For further details, please visit: <http://www1.va.gov/opa/pressrel/pressrelease.cfm?id=1642>.

New Analysis: Congressional Health Care Reform Proposals Would Offer Coverage to Many Without Insurance; Plan to Cover the Uninsured Through Medicare Reduces Health Care Spending By \$58 Billion in 2010

The Commonwealth Fund reports that with health reform high on the agenda of the incoming Congress and President, a new analysis of legislative proposals—including the plans of President-elect Barack Obama and Senate Finance Committee Chairman Max Baucus (D-MT)—shows that several proposals already put forth could substantially reduce the number of uninsured Americans, and would either reduce health care spending or add only modestly to annual health care expenditures.

For further details, please visit: http://www.commonwealthfund.org/newsroom/newsroom_show.htm?doc_id=775915.

Shortage of General Surgeons Endangers Rural Americans

A January 2, 2009 Washington Post article reports that among the one-quarter of Americans who live outside metropolitan areas, general surgeons are the essential ingredient that keeps full-service medical care within reach, but various forces -- educational, medical and sociological -- are making them an endangered species.

Full article is available at: http://www.washingtonpost.com/wp-dyn/content/article/2008/12/31/AR2008123103120_pf.html



The mission of the Maryland State Office of Rural Health (SORH) is to improve the health of rural Marylanders through collaboration, networking, outreach, education, research, advocacy, and the development of special programs.

Maryland State Office of Rural Health Staff:

Maryland State Office of Rural Health

Office of Health Policy and Planning
Family Health Administration
Maryland Department of Health and
Mental Hygiene
201 West Preston Street, Room 423
Baltimore, MD 21201
Phone: 410-767-5300
Fax: 410-333-7501
E-mail: ohpp@dhmh.state.md.us

Michelle Clark, Project Director
410-767-5121
mclark@dhmh.state.md.us

Michele Randolph, Health Policy Analyst
410-767-3543
mparr@dhmh.state.md.us

Jessica McKinnie, Graduate Intern
410-767-5297
jmckinnie@dhmh.state.md.us



Calendar of Events

January 26-28
Rural Health Policy Institute
National Rural Health Association
Capital Hilton, Washington, DC
For more information, contact: 816-756-3140 or
mail@NRHArural.org

January 28
Rural Health Open Door Forum
Centers for Medicare & Medicaid Services
Washington, DC
Phone: 1-800-837-1935
Conference ID: 70013728
http://www.cms.hhs.gov/OpenDoorForums/24_ODF_RuralHealth.asp

February 18-20
2009 Local, State, Federal Public Health Preparedness Summit
National Association of County & City Health Officials
San Diego, CA
For more information, contact: 202-783-5550 or
info@naccho.org

February 21 – 23
12th Annual Health Education Advocacy Summit
Coalition of National Health Education Organizations (CNHEO)
L'Enfant Plaza Hotel, Washington, DC
<http://www.healtheducationadvocate.org/>

February 25 – 27
3rd National Leadership Summit on Eliminating Racial and Ethnic Disparities in Health
U.S. Department of Health and Human Services
Gaylord National Resort and Convention Center
National Harbor, MD
<http://www.omhrc.gov/npasummit2009/>

March 15-19
2009 Aging in America Conference
American Society on Aging & National Council on Aging
Paris Las Vegas and Bally's Las Vegas, Las Vegas, NV
For more information, contact: 1(800) 537-9728 or
<http://www.agingconference.org/asav2/conf/jc/jc09/index2.cfm>

April 8
Delaware Rural Health Initiative Conference
Delaware Office of Primary Care & Rural Health
For more information, contact:
Katherine Collison, 302-744-4555
Katherine.Collison@state.de.us

May 5 – 8
National Rural Health Association Annual Conference
National Rural Health Association
Fontainebleau Resort Miami Beach
Miami Beach, FL
<http://www.ruralhealthweb.org/annual>