

# Policy Opportunities for Advancing Rural Health

RUPRI Health Panel Presenters:

Keith Mueller, PhD

Andrew Coburn, PhD

Jennifer Lundblad, PhD

Timothy McBride, PhD

Presented at the Annual Conference of the National Rural Health Association

Atlanta, Georgia

May 8, 2019



# The Framework for the Future: A High Performance Rural Health System

*The RUPRI Health Panel envisions rural health care that is affordable and accessible for rural residents through a sustainable health system that delivers high quality, high value services. A high performance rural health care system informed by the needs of each unique rural community will lead to greater community health and well-being.*

Source: Advancing the Transition to a High Performance Rural Health System. RUPRI Health Panel. November, 2014. <http://www.rupri.org/wp-content/uploads/2014/11/Advancing-the-Transition-Health-Panel-Paper.pdf>. p. 6

# Pillars of the High Performance System

- Affordability
- Accessibility
- Community Health
- High Quality Care
- Patient-Centeredness



Source: The High Performance Rural Health Care System of the Future. RUPRI Health Panel. September 2,, 2011. <http://www.rupri.org/wp-content/uploads/2014/09/The-High-Performance-Rural-Health-Care-System-of-the-Future.pdf>.

# Bringing the High Performance System to Life

- Considerations from the RUPRI Health Panel after an assessment of the landscape
- Combined with themes related to successful innovation
- And policy considerations put forth by successful innovators

## Sources:

1. Taking Stock: Policy Opportunities for Advancing Rural Health. RUPRI Health Panel. January, 2018. <http://www.rupri.org/wp-content/uploads/TAKING-STOCK-2018.pdf>
2. Toward a High Performing Rural Health Care System: Key Issues and Recommendations from Rural Health Care System Innovators. April, 2019. <http://www.rupri.org/areas-of-work/health-policy/>



# Medicaid and CHIP

- Maintain and expand incentives for states to lower eligibility criteria for Medicaid and CHIP
- Monitor impact of 1115 waiver programs on rural beneficiaries, providers, health plans, and communities
- Provide incentives and technical support to Medicaid agencies and rural providers to provide effective Substantive Use Disorders services
- Include rural beneficiaries, providers, and communities in Medicaid payment and delivery system innovations, and monitor innovation impact over time

# Insurance coverage and affordability

- Maintain insurance reforms
- Consolidate rate areas
- Offer incentives to carriers to establish Multi-state plans
- Strengthen risk mitigation
- Encourage demand for marketplace plans

# Quality: Setting the stage in rural

- Federal policies and programs are intensifying a focus on improving health care quality through:
  - publicly reporting quality measures
  - paying differentially based on quality
  - incentivizing value-based care
  - providing quality improvement technical support
- Policies and program requirements often present barriers to rural participation in quality improvement initiatives, as well as to appropriately measuring and demonstrating the quality of care delivered in rural areas
- Policy action is feasible, and concerted rural health quality efforts in the past have proven to be effective

# Quality: Policy Opportunities

- Support development of rural-relevant quality measures
- Develop comprehensive cross-agency approach to rural health care quality improvement and technical assistance
- Offer quality initiatives specifically design to meet rural needs and opportunities

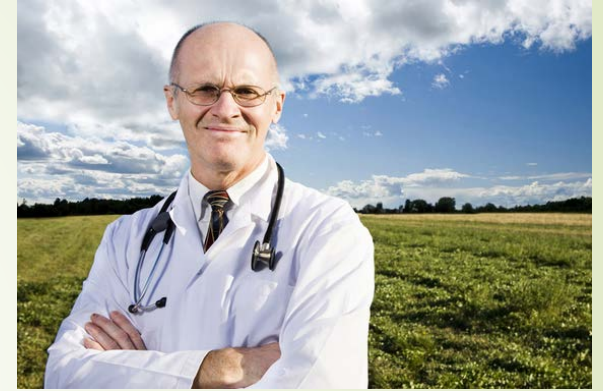


# Quality: Pathways to change

- ▶ Quality measures which reflect the care and services in rural:
  - Support the work of the NQF rural workgroup regarding the implementation of existing rural-relevant measures and development of new measures
- ▶ A comprehensive and aligned program of rural-focused quality improvement TA:
  - Coordinated through contracting, management, and oversight across the multiple agencies of HHS with responsibility for health care and rural health.
- ▶ New health care quality pilot programs:
  - Designed specifically to test methods to improve quality and value for the **unique rural environment**
  - Address the barriers to participation by CAHS and RHCs

# Population Health: The New Frontier

- Population health: improving *quality*, improving *health*
  - Improving quality: ensuring access to preventive services and comprehensive primary care
  - Improving health: connecting health and healthcare
  
- Low hanging fruit: underuse of preventive services in rural populations
  - Increasing these services benefits consumers and primary care providers



# Population Health: Policy Opportunities

- Ensure affordability of clinical and community-based preventive services
- Provide stable long-term funding to support locally-appropriate public health prevention programs
- Ensure availability of comprehensive and integrated services through policies that target workforce adequacy development to achieve health equity

# Population Health: Policy Opportunities

- ▶ Incent integrated preventive and clinical services
- ▶ Integrate population health goals into financing strategies and payment policy formulation



# Population Health: Pathways to Change

- Improving health in rural communities and populations:
  - Strengthening rural public health infrastructure: scope of services, workforce, integration with primary care
  - Integrating rural social services, including mental health and SUD services, food systems, housing, LTSS
- Financing rural public health community health improvement
  - New reimbursement options under Medicare Advantage and private insurers
  - Medicaid
  - State and local global/pooled funding (e.g. Maryland, Pennsylvania, Bridging for Health models)

# Population Health: Pathways to Change

- ▶ Local and state innovation models: building on regional and local healthcare, public health, and social service leadership, capacity and resources
  - Role of health systems in rural health system development
- ▶ Community engagement and partnerships: moving from competition to collaboration
- ▶ Leveraging existing policy, resources, and funding: (e.g. federal, state, local/foundation)
  - Maximizing revenue from reimbursable preventive services
  - Workforce development: partnering with community colleges and universities

# Rural Workforce

- ▶ Workforce central to the transformation of rural health systems
  - ▶ Focus on primary care as foundation of high performing rural health systems but other professionals critical, including dental, nursing, behavioral health
  - ▶ New training program models (and funding models) to strengthen recruitment and retention
  - ▶ New health workers (e.g. community health workers)

# Workforce: Policy Opportunities

- Decentralize training programs into rural environments
- Target GME funding toward rural health care needs, including primary care
- Target federal funding of non-GME training programs to national health priorities
- Update payment policies to non-physician and patient support providers





# Workforce: Policy Opportunities

- ▶ Align payer policies to rural service delivery circumstances
- ▶ Create a comprehensive workforce strategy and plan that aligns with the health goals of the nation

# Workforce: Pathways to Change

- Changing how federal medical education funding works is essential to support new rural-based physician training models.
- Aligning other federal and state training resources and models to the needs of evolving rural health systems and communities (e.g. integration of behavioral health, public health).
- Support testing of innovation models.



# Medicare: A Change Agent

- System design and Medicare conditions of participation, support for professional training
- Payment reform driving change
- The role of the Center for Medicare and Medicaid Innovation



# Medicare Policy Opportunities

- Offer transitional support to rural providers during payment policy changes
- Allow for higher fixed costs per patient encounter in low-volume situations
- Include capital in infrastructure investments to redesign rural health care delivery facilities and support expansion of broadband capacity
- Develop and test alternative delivery models in rural communities

# System Redesign

- Much is happening across the land in healthcare organizations
- How do we take advantage of new opportunities to improve rural health delivery?



# Health Care Finance and System Transformation

- Offer alternative pathways to rural provider inclusion in value-based payments
- Expand collaborative opportunities among rural providers
- Support expanded rural provider participation in CPOC+ and other similar models
- Consider low volumes in rural performance analyses
- Provide TA to rural providers

# Health Care Finance and System Transformation

- Improve timeliness and transparency of demonstration evaluations
- Support care transitions and care coordination
- Monitor emerging research on the impact of social determinants on healthcare performance, and consider rural social risk factors in payment design
- Support telehealth expansion to extend rural health capacity and improve rural health care quality

# Financing Themes from Rural Innovators

- Flexible financing models allow collaboration in designing and delivering services responsive to health and well-being needs of rural residents
- Innovative financing models support investments in care management infrastructure





# Financing Themes from Rural Innovators

- Innovating financing models allow effective use of personnel, including peer support models, community health workers and inter-professional team-based care
- Private sector funding can help mitigate investment burden and risk necessary for smaller rural providers and health systems to participate in value-based payment models

# Recommendations for Payment Redesign to Support Rural Innovation

- Structure primary care payment to cover the cost of team-based coordinated and comprehensive care.
- Expand demonstrations of total-cost-of-care payment methods that incorporate both medical care payments and human service payments.
- Create a rural hospital fixed asset buy-back program to allow facility repurposing and right-sizing.

# Recommendations for Payment Redesign to Support Rural Innovation

- Expand global budget models to additional areas and health care organizations.
- Align payment systems across payers, under current methodologies.
- Mandate that all payers participate in new state-supported payment systems.
- Risk-adjust payments for social determinants of health.

# Creating Infrastructure to Support Innovation

- ▶ Frame rural health care innovation as an economic development issue, both jobs and the broader economic health of the community
- ▶ Create governance structures supporting collaborative leadership, which fosters opportunities and decisions to reinvest savings or cost reductions in the community
- ▶ Develop mechanisms enabling shared data analytic capacity across rural health care organizations, and take advantage of technical assistance and support from outside entities

# Recommendations for Public Investment to Support Rural Innovation

- Expand broadband capacity (greater than 25 MBPS speed) to rural residences and health care organizations.
- Provide data analytic capacity to under resourced rural health care organizations to improve health care quality and efficiency.
- Incorporate long-term services and supports, and home and community-based services, in rural health care planning.

# Recommendations for Public Investment to Support Rural Innovation

- ▶ Fund programs to educate community-based boards of trustees/directors about value-based care and payment.
- ▶ Fund technical assistance to hospitals and public health agencies for developing and implementing community health needs assessments.
- ▶ Fund innovative health professions programs in health professions training, including interdisciplinary training and community-based care approaches, hospice, palliative care, and advance care planning.

# Recommendations for Public Investment to Support Rural Innovation

- ▶ Combine health and human services funding demonstrations so that planning and payment have a community focus, not a beneficiary or enrollee focus.
- ▶ Create a structure and rationale for balancing rural health investments (e.g., a “base closing commission” for rural health).
- ▶ Facilitate and approve community/regional-based insurance plans and governance.

# Recommendations for Public Investment to Support Rural Innovation

- ▶ Fund exploratory regional gatherings to discuss the organization and delivery of rural health services.
- ▶ Allow county-based or region-based health care management, purchasing, and payment models.
- ▶ Monitor health care organization mergers and acquisitions to assess changing governance, such as strategic control, resource allocation, and disinvestment.



# Concluding Comments

- Exciting times of transforming finance, delivery organizations
- All the while benefitting from advances in science of medicine
- And benefitting from understanding of social determinants of health and actions to take
- We can move to a system focused on health that draws the best talent from multiple disciplines and perspectives
- Policy actions can facilitate (or inhibit) progress toward a high performance rural health system

This work was supported by the  
Leona M. and Harry B. Helmsley Charitable Trust  
Grant number #2017PG-RHC006.



# Collaborations to Share and Spread Innovation

- ✓ The National Rural Health Resource Center <https://www.ruralcenter.org/>
- ✓ The Rural Health Information Hub <https://www.ruralhealthinfo.org/>
- ✓ The National Rural Health Association <https://www.ruralhealthweb.org/>
- ✓ The National Organization of State Offices of Rural Health <https://nosorh.org/>
- ✓ The American Hospital Association <http://www.aha.org/>

