Unintentional injuries and death associated with opioid use have increased over the past two decades due to abuse of prescription opioids and increased access to heroin. This session looks
at the impact of opioid use from occupational injuries to overdoses to the spread of infectious diseases.

**Tackling Infectious Disease Risk of the Opioid Epidemic**
*Allison Gardner, PhD, Med-IQ, LLC, Vice President, Educational Strategy and Content*
*Sara Miller, Med-IQ, LLC, Director, QI Institute, CE Content and Strategy*

Through case study, participants will discuss how continuing education developed specifically for rural healthcare providers can help build critical knowledge and skills related to hepatitis C and HIV prevention, identification, and care and address infectious disease risks associated with the escalating opioid epidemic and injection drug use in rural communities.

1B
**Telehealth and the triple aim in rural care**
*Billy Philips, PhD, MPH, FSAHP, Texas Tech University Health Sciences Center, Profession of Family and Community Medicine and EVP Rural and Community Health*
*Jimmy Ashley, ETC, Texas Tech University Health Sciences Center, Enterprise Network Engineer*

This session will feature hands-on applications of modern mobile technologies to manage chronic conditions, behavioral health and counseling, and use of point of care ultrasound. Proven programs of Texas Tech University Health Sciences Center will be discussed in each topic.

1C
**Monitoring and Benchmarking Rural Health Clinic Financial Performance**
*John Gale, MS, Maine Rural Health Research Associate, Research Associate*
*Crystal Barter, Michigan Center for Rural Health, Director of Performance Improvement*

Relatively little information is available to assist Rural Health Clinics (RHCs) in monitoring and improving their financial performance. This session explores the development of financial performance and efficiency measures using Medicare cost reports as well as the use of financial and staffing benchmarks by an RHC quality improvement network.

1D
**Leveraging Private Practice Dentists in Health System Equity**
*Christine Vesuschio, DrPH, Division of Population Oral Health, MUSC, Oral Health Policy Consultant and Adjunct Assistant Professor*
*Amy Martin, DrPH, Division of Population Oral Health, MUSC, Director & Associate Professor*

Most rural communities lack access to safety net dental programs. Collaborative referral management approaches between rural health clinics and dentist in three South Carolina communities will be shared. Participants will explore individual and participate attributes that rural health advocates should consider when engaging rural dentists to address system-level issues.
1E
Preparing a Primary Care Workforce for Rural Alabama
D’Ann Somerall, DNO, Med, FNP-, University of Alabama at Birmingham School of Nursing, Assistant Professor
Lauren Wehunt, BSN, RN, University of Alabama at Birmingham School Nursing, Graduate Student
Shana White, BSN, RN, University of Alabama at Birmingham School Nursing, Graduate Student
Cynthia Selleck, PhD, RN, University of Alabama at Birmingham School Nursing, Professor & Associate Dean, Clinical & Global Partnerships

This session will discuss how the University of Alabama at Birmingham School of Nursing is leveraging two partnership programs to prepare primary care nurse practitioners to provide care in rural Alabama. The Graduate Nursing Education Primary Care Scholars Program and Advanced Nursing Education Program collaboration will be discussed.

1F
Obstetric Care and Hospital Closure in Rural Area
Angela Thompson, MD, MPH, FACOG, Mayo Clinic, Obstetrician
Kristin Wharton, RN, PHN, IBCLC, Sawtooth Mountain Clinic, Community Health Nurse
Peiyin Hung, MSPH, University of Minnesota Rural Health Research Center, PhD Candidate and Statistical Programmer
Katy Kozhimannil, PhD, MPA, University of Minnesota Rural Health Research Center, Associate Professor and Director of Research

Approximately 500,000 rural US women give birth annually, with hospital and unit closures increasingly affecting access and care. Rural clinicians will relate the effects of closures on their patients, Research experts will respond, contributing data. Together, speakers will discuss administrative, clinical, and policy strategies for ensuring rural obstetric care access.

1G
Contributed Research Papers
TBA

11:15 a.m. – 12:15 p.m.
Plenary Session – HRSA Rural Health Update
Room XX
Tom Morris, Federal Office of Rural Health Policy, Associative Administrator

The session will provide updates regarding HRSA activities that help improve access to quality health care in rural communities.
12:15 p.m. – 2 p.m.  
Lunch  
Room XX

2 – 5 p.m.  
Student Track Session  
Room XX

Join other students for an interactive rural ethics session and the student constituency meeting.

2 – 3:15 p.m.  
Concurrent Sessions

2A  
Expanding Access to Colorectal Cancer Screening: Benchmarking Quality Indicators  
*Jane Bolin, RN, PhD, Texas A&M University School of Public Health, Co-PI Colorectal Cancer Screening Grant*

There is an inadequate supply of physicians who perform colonoscopies. This leads to higher colon cancer rates in rural areas. This shortage could be reduced in PCP’s performed colonoscopies. This session reports on original research assessing outcomes of colonoscopies performed by PCP trainees in CRC prevention program.

2B  
Climbing the Ladder Toward Recovery: North Carolina Mobile Medication Program  
*Allen Smart, Kate B. Reynolds Charitable Trust, Vice President, Programs  
Julia Wacker, North Carolina Hospital Association, Director of Behavioral Health*

The session will review outcomes from the first two year of the Mobile Medication Program pilot, serving adults with mental illness in rural North Carolina. Participants’ number of hospitalizations dropped 82% and emergency department visits fell 90%. MMP was the winner of the Pioneer Institute’s 2016 Better Government Competition.

2C  
Aligning provider and hospital interests in rural Illinois  
*Gregg Davis, MD, Illinois Rural Community Care Organization, LLC, Chief Medical Officer*

The Illinois Rural Community Care Organization has guided 24 rural Illinois hospitals and 150 primary care physicians in the transition from volume to value based practice. This presentation will explore the changing market force, provider adoption and changing metrics necessary to align the interest of providers and hospitals.

2D  
Rethinking the Challenges of Rural Health
To improve rural population, targeted investments need to move beyond traditional health care to address the social determinants of health. This session discusses how the principle underlying the Robert Wood Johnson Foundation’s Culture of Health Initiative can be implemented in rural communities and lead to improved population health.

2E
Developing the First Rural Track in Obstetrics and Gynecology
Ellen Hartenbach, MD, University of Wisconsin, Dept. of Obstetrics and Gynecology, Vice-Chair of Education and Residency Program Director
John Street, PhD, University of Wisconsin, Dept. Obstetrics & Gynecology, Education Program Manager

The University of Wisconsin has developed the nation’s first rural residency track in Obstetrics and Gynecology. We will present:
1. A compelling argument that Obstetrics & Gynecology must commit to developing a nationwide training pipeline to place physicians in rural areas
2. Challenges encountered and solutions developed
3. Next steps

2F
TBD

2G
Contributed Research Papers
TBA

3:15 – 3:45 p.m
Break

3:45 – 5 p.m.
Concurrent Sessions

3A
How are we addressing Addiction in Rural Communities? Practical tools and tip (ORHP)
Christina Villalobos – FORHP
Michele Pray – FORHP
Allison Hutchings – FORHP
ROOR, Black Lung and Outreach grantees
This session will discuss how FORHP grantees engage their communities in combating and treating substance abuse and addiction as well as common strategies, challenges, and lessons learned in developing programs that integrate behavioral health into primary care settings, provide outreach and education to patients and the public, as well develop community partnerships to train licensed healthcare professionals and emergency responders on the use of emergency devices in order to prevent and treat opioid overdose.

3B
Veterans Health Administration Rural Innovation
Thomas Klobucar, PhD, Veterans Health Administration, Deputy Director, Office of Rural Health (10P1R)
Tommy Driskill, Office of Rural Health, VHA / VA Pacific Islands Health Care System, Field Adviser to Director, Office of Rural Health, VHA / Rural Health Coordinator VA Pacific Islands Health Care System
Gina Capra, Veterans Health Administration, Director, Office of Rural Health (10P1R)

This session will explain how the Office of Rural Health, Veterans Health Administration has embarked upon a new collaborative process to disseminate innovate best practices Enterprirse-Wide initiatives to Veterans Systems across the country as a means of enhancing both quality and access to health care for America’s most rural Veterans.

Community Partnerships to Connect Rural Veterans to Resources
Kimber Parry, Veterans Rural Health Resource Center-SLC, Geriatric Population Scientist
Jennifer Morgan, Utah Aging and Disability Resource Connection (ADRC), Director/Project Manager
Bret Hicken, PhD, Veterans Rural Health Resource Center-SLC, Geriatric Domain Lead

This session presents a Veterans Administration (VA) initiative that helps rural Veterans access VA benefits. Community agency staff are trained about VA benefits and develop partnerships with VA staff to support outreach and benefits counseling to rural Veterans and families. VA is disseminating this initiative to rural communities nationwide.

3C
MACRA, CPC+, CCM - What is the end game?
Cody Mullen, PhD(c), Indiana Rural Health Association, Network Development Coordinator

The Indiana Rural Health Association (IRHA) has developed and supported a chronic care management (CCM) program to assist healthcare providers in the transformation from volume to value. This presentation will discuss the next steps of CCM and other CMS programs. In addition, a non-Medicare based CCM program will be highlighted.

3D
Rural Children: Increasing coverage but lagging service use
Janice Probst, PhD, SC Rural Health Research Center, University of South Carolina, Director
Between 2003 and 2012, the proportion of rural children with health insurance increased steadily, but gains in rates of preventive medical and dental visits noted between 2003 - 2007 had diminished by 2012. This session will document these trends and address potential barriers to care for rural children.

3E
Health Policy Fellowship: Preparing Health Professionals for Leadership
Kim Becher, MD, Community Care of WV, Family Practice physician in a rural community
Jennifer Plymale, Marshall University Joan C. Edwards School of Medicine, Associate Dean of Admissions and Director of the Robert C. Byrd Center for Rural Health

Marshall University Medical School's health policy residency track is one of a few in the country. The graduates have assumed leadership roles in state and national policy-making and in their rural communities, including one speaker, a physician, who helped her rural community recover from a devastating flood.

3F
Rural Medicare Policy Update (ORHP)

3G
Contributed Research Papers
TBA

Thursday, May 11

7:30 - 9:00 a.m.
Constituency Group meetings and continental breakfast

4A
Healthcare for the Whole Person: The Relationship Between Chronic Disease Management and the Social Detriments of Health for Rural Populations (ORHP)
Bruce Weber (RUPRI Analytic Panel Member)
Art Kaufman (University of New Mexico)
Kathleen Belanger (NACRHHS Committee Member)
Steve Hirssch (FORHP)
Aaron Beswick (FORHP)
Makeda Clement (FORHP)
Craig Caplan (FORHP)
Michelle Oswald (CMS)
The session will begin with an update on the CMS-FORHP Chronic Care Communications outreach and education campaign, and move into a larger discussion of high impact cross sector strategies from health and human service providers to address social determinants and improve health for rural populations.

4B
Combating Rural Opioid Use: Community and Provider Strategies
John Gale, MS, Maine Rural Health Research Associate, Research Associate
Holly Andrilla, WWAMI Rural Health Research Center, Research Scientist

Experts recognize the value of a comprehensive community-based intervention strategy involving prevention, treatment, and recovery in reducing the burden of rural opioid use. This session will explore effective components of an integrated community-based strategy involving hospitals, health care providers, public health, schools, local government, law enforcement, EMS, and community leaders.

4C
Extension for Community Healthcare Outcome: Reducing Provider Isolation
Department of Dermatology, Assistant Professor of Research for Telehealth
Karen Edison, MD, Missouri Telehealth Network, Medical Director
Gwen Ratermann, Missouri Telehealth Network, Associate Director
Susan Wilson, Missouri Primary Care Association, Chief Operating Officer

Show-Me ECHO (Extension for Community Healthcare Outcomes) Project is designed to educate and mentor Missouri primary care providers in complex, costly, chronic, and common diseases. The Missouri Telehealth Network and Primary Care Association lead ECHO sessions in 6 different specialties. Virtual learning collaboratives reduce professional isolation and improve healthcare outcomes.

4D
Quality Measurement and the Social Determinants of Health
Ira Moscovice, PhD, University of Minnesota Rural Health Research Center, Mayo Professor and Director
Brock Slabach, MPH, FACHE, National Rural Health Association, Senior Vice President for Member Services
Tim Putnam, DHA, Margaret Mary Health, President/CEO
Carrie Henning-Smith, PhD, University of Minnesota Rural Health Research Center, Research Associate

Quality measures do not take into account differences in patient and population characteristics. Risk-adjustment strategies address this issue, but the unique rural context has largely been missing from the discussion. This session will provide an overview of rural-relevant issues in quality measurement and adjustment for socio-demographic characteristics.
4E
Pre-matriculation Characteristics as Predictors of Rural Primary Care Practice
Mark Deutchman, MD, University of Colorado, Associate Dean for Rural Health, Rural Track Director, Colorado AHEC Director
Roberto Silva, MD, University of Colorado, Rural Track Assistant Director
Melanie DeHerrera, University of Colorado, Rural Track Program Coordinator

After 10 years of operation, the Rural Track at the University of Colorado has practice data on graduates. This session will highlight which pre-matriculation characteristics (demographics, education, residency state, etc.) had the greatest influence on rural practice location.

4F
Keeping the Next Generation Healthy: Challenges and Successes in the Health of Rural Kids (OHRP)
Sarah Bryce (FORHP)
School Based TNGP Grantee TBD
Rural Child Poverty TNGP
CBD grantees TBD

This session will focus on the status of children living in rural areas including 1) insurance status (including CHIP) 2) health indicators 3) access to care and 4) social determinants of health. The session will start with an overview of what we know from a data/research perspective and then pivot to FORHP grantees that are working with rural youth in their grant programs.

4G
Contributed Research Papers
TBA

10:15 – 10:45 a.m.
Break

5A
NORC
TBA

5B
Foundation
TBA

5C
Developing Patient-Focused, Culturally Sensitive Care
Neill Piispanen, NBBJ, Architect
Brian Sewell, Wenaha Group, Owners representative

The Yellowhawk Health Center, serving the members of the Confederated Tribes of the Umatilla Indian Reservation, is constructing a health center driven by a patient-centered, relationship-based model of care. The new center will be the most energy-efficient health facility in the region and will embrace team spaces versus individual offices.

5D
South Carolina’s Rural Health Action Plan
Graham Adams, PhD, South Carolina Office of Rural Health, CEO
Forrest Alton, 1000 Feathers, President
Melinda Merrell, South Carolina Office of Rural Health, Senior Program Director

The South Carolina Office of Rural Health, a non-profit, non-partisan organization, leads a statewide effort bringing together the state's rural communities and state leaders to create a common vision for healthier rural communities. The SC Rural Health Action Plan contains a comprehensive framework with actionable strategies to improve rural health.

5E
Using Data to Guide Rural Physicians Pipeline Initiatives
Lainey Mattox, Northeast Kentucky Area Health Education Center, Assistant Director
Jessica Caudill, Northeast Kentucky Area Health Education Center, Student Services Coordinator
David Gross, Northeast Kentucky Area Health Education Center, Director

Amid local students’ low application/matriculation rates to in-state medical schools; the Northeast Kentucky Area Health Education Center developed two physician pipeline programs. This presentation describes the programs' successes, details our multi-year analysis of county-level medical school data, and makes the case for regional responsibility in the development of competitive applicants.

5F
Rural Hospital Closures: Who is responding and how? (OHRP)
Representative TBD from the National Governors Association
Representative from RUPRI (possibly Keith Mueller)
State office or Flex director (possibly Angie Allen or Bill Joley from TN)
Program director TBD from Network Planning grant

This session will discuss current trends in rural hospital closures and the impacts of closures on rural communities. Learn about state and local responses to rural hospital closures as rural communities strive to maintain access to health care in the face of a changing delivery system. See how FORHP works across program areas and uses research and policy development to inform rural health grant programs.
5G
Contributed Research Papers
TBA

12 – 1:45 p.m.
Rural Health Awards Luncheon
Room XX
Join NRHA for a tribute to the 2017 Rural Health Award winners.

1:45 – 3:15 p.m.
Terry Reilly Lecture
Building a workforce fit for purpose: Inspiring and growing the next generation of rural health professionals
John Wynn-Jones, MD, Keele Medical School, Senior Lecturer in Rural and Global Health
Room XX

3:15 – 3:45 p.m.
Break

6A
Border Health
TBA

6B
Intentional Governance Critical to Rural Health Mission Sustainability
Patricia Crawford, MS, CHES, West Virginia School of Osteopathic Medicine, Director Rural Outreach
Sharon Lansdale, RPh, MS, Center for Rural Health Development, Inc., President/CEO
Sally Hurst, West Virginia School of Osteopathic Medicine, Outreach Coordinator /Greenbrier County Health Alliance
Stephen Whited, Minnie Hamilton Health Care Center, CEO

The difference between many nonprofits is vested in how the board approaches its work. Some boards are reactionary, developing knee-jerk solutions with possible unintended consequences. In high-performing organizations governance is intentional. Data replaces emotion. Process trumps intuition. The process may be cumbersome, but almost always leads to the best strategies.

6C
Night Shift: How to Build Effective Telenocturnist Program
Talbot McCormick, M.D., Eagle Hospital Physicians, CEO
Virgil Watson, South Central Kansas Medical Center, CEO
Brian Hunt, M.D., Sunflower Telemedicine, Hospitalist/Founder
This session focuses on the benefits of telemedicine as a solution to night-shift coverage. Attendees will learn how telenocturnists and other telemedicine solutions ease the night shift burdens faced by rural hospitals, with benefits including customer satisfaction, quick physician access, cost savings, burnout reduction, and growth potential for nighttime admissions.

**6D**

**Diving into Telemedicine**

*Christine Martin, MBA, PMP, Adventist Health, Telehealth Director*

*Dan McCafferty, AMD Global Telemedicine, V.P of Global Corporate Development*

This session will discuss the various ways telemedicine is being used globally to improve rural population healthcare and new opportunities it brings to your organization. Adventist Health will also dive into their specific use case of how they are currently using telemedicine today in 22 sites throughout rural CA communities.

**6E**

**Innovation in Rural Allied Health Profession Workforce Development**

*Cindy Large, RN, BSN, Indiana Rural Health Association, Network Director*

*Stephanie Laws, Rural Health Innovation Collaborative, Amnah Anwar, Indiana Rural Health Association, Evaluation Lead Coordinator*

The Indiana Rural Workforce Innovation Network is an educational focused initiative funded by a HRSA allied health professions workforce grant. This presentation will demonstrate how the program is strengthening the workforce in rural Indiana through a strategic hiring and retention plan; clinical rotation program, and an online rural elective curriculum.

**6F**

**Telehealth Resource Center: Providing Valuable Technical Assistance in Rural Areas (OHRP)**

*Natassja Manzanero (FORHP)*

*Bill England (FORHP)*

*Carlos Mena (FORHP)*

*Monica Cowan (FORHP)*

*Kathy Wibberly (TRC)*

This session will highlight FORHP-funded Telehealth Resource Centers (TRC) that provide technical assistance to healthcare organizations, healthcare networks, and healthcare providers in the implementation of cost-effective telehealth programs to serve rural and medically underserved areas. In understanding the work of the TRCs, the session will highlight the top technical assistance questions asked of TRCs and the impact of their assistance.

**6G**

**Contributed Research Papers**

*TBA*
Friday, May 12

8 – 9:30 a.m.
Washington Update
Room XX

9:30 – 9:45 a.m.
Break

7A
TBD

7B
Area Health Education Centers Niche in Continuing Education
Robert Trachtenberg, National AHEC Organization, Chief Executive Officer
Trisha Schulz, National AHEC Organization, Program Manager
Cynthia Lewis, National AHEC Organization, Evaluator
Gretchen Forsell, National AHEC Organization, Project Director

Learn about how the National Area Health Education Center Organization has leveraged its network of over 300 centers to provide uniform professional continuing education on Veterans Mental Health and Human Papillomavirus Immunization Rate Improvement across the county with a focus on rural and underserved communities.

7C
Integrating Pharmacist into Interprofessional Primary Care Clinics
Rebecca Grandy, PharmD, Mountain Area Health Education Center, Clinical Pharmacist Practitioner
Irene Park, PharmD, Mountain Area Health Education Center, Clinical Pharmacist Practitioner
Mollie Scott, PharmD, UNC Eshelman School of Pharmacy, Regional Associate Dean

The Patient-Centered Primary Care Collaborative champions the integration of pharmacists into interprofessional primary care teams. Studies demonstrate that pharmacists improve the quality of care and lower healthcare costs. This session will highlight primary care practice models that have successfully incorporated pharmacists onto interprofessional teams.

7D
Jim Bernstein Health Leadership Program: Growing Local Leaders
Maggie Sauer, Foundation for Health Leadership and Innovation, President/CEO
Jamie Cousins, North Carolina Public Health Foundation, Program Manager for the Catalyst for Health Eating and Active Living
Pete McQuiston, Swain County Hospital, Director of Food and Nutrition
Tom Bacon, DrPH, Foundation for Health Leadership and Innovation, Program Director

The session will describe the Jim Bernstein Community Health Leadership Program and its core elements; leadership, partnership, rural life and the health system. The program integrates health care with the economic and social well being of rural communities. The purpose is to create local rural health leaders to inspire and innovate.

7E
Beyond the Barn: The Contemporary Rural Health Elective
Michael Faircloth, MD, University of Alabama at Birmingham, Department of Family and Community Medicine, Interim Chairman
William Curry, MD, UAB Health System, University of Alabama at Birmingham School of Medicine, Senior VP for Population Health, Associate Dean for Primary Care and Rural Health
Glenda Stanley, Alabama Statewide Area Health Education Center Program, Associate Director

This presentation will discuss how the University of Alabama at Birmingham School of Medicine is retooling the rural health elective by incorporating population health management, preventive health, and health literacy into the course. The combination Medical Doctor and Masters of Public Health Degree will be discussed.

7F
Transitional Rural Hospitals and Networks to Value-based System (OHRP)
Jeanene Meyers – Provide introductions and overview of SRHT Project to include purpose and goals to assist rural hospital leaders and providers nation-wide
Bethany Adams (SRHT Program Manager) – Summarize key outcomes and impact from financial operational assessments and quality improvement projects, as well as share key tools developed through the SRHT Project
Stroudwater Consultant – Discuss key transition planning actions for rural hospitals, especially those that tie to the key strategies identified in the Financial Leadership Summit Hospital CEO that has successfully demonstrated outcomes to share their experience and next steps.
Jeanene and Bethany – Wrap up to emphasize the importance that the SRHT Projects are scalable for state programs and share how resources and information can assist other programs (i.e., SORH, Flex, SHIP)

This session will demonstrate the impact and outcomes of the SRHT Projects and promote transition resources developed through the program.

7G
Contributed Research Papers
TBA

End of Annual Conference