

#### Alabama Rural Health Annual Conference March 6 – 8, 2024 | Embassy Suites | Montgomery, AL

## Wednesday, March 6, 2024

8:30 AM – 5:00 PM	Pre-Conference Workshop: Billing / Coding ARCH Pro Coding
Thursday, March	7, 2024
8:30 AM – 11:30 AM	Pre-Conference Workshop: Billing / Coding ARCH Pro Coding
11:30 AM	Vendor Networking / Conference Check-In
Noon	<b>Lunch/ Annual Business Meeting</b> This session is the annual business meeting for the Alabama Rural Health Association. All conference members, attendees and vendors are welcome to participate.
1:00 PM	Break/ Vendor Discovery
1:45 PM	Panel Discussion: ARHA Legislative Priorities in 2024 Farrell Turner, Dr. Conan Davis, Ryan Kelly
	This session will review the feedback received from the 2023 Alabama Rural Health Policy Roadshow and the work that the board has taken to develop its 2024 legislative priorities.
2:30 PM	Healthcare Deserts in Alabama Kyle Siegrist, PhD
	A healthcare "desert" in Alabama is defined as a region of the state that is too far from a particular type of medical resource for basic quality healthcare. The meaning of "too far" depends on the particular resource under consideration. Naturally, healthcare deserts are most common in the rural parts of the state. This presentation will give a brief analysis of healthcare deserts for

	medical resources that have featured prominently in the news lately: ambulance services, pharmacies, and hospitals that provide obstetric services.	
3:15 PM	Break	
3:30 PM	Exploring the Role of Emerging Mobility Solutions in Shaping Care-Seeking Behaviors in Rural Communities Javier Pena-Bastidas	
	Addressing transportation barriers to healthcare services in rural communities is a well-documented challenge. Emerging mobility solutions driven by advanced information and communication technologies, such as ride-hailing services, offer opportunities for healthcare access improvement. However, their adoption in rural areas lags behind their urban counterparts. This slower adoption rate in rural regions provides an opportunity to carefully consider the roles of these technologies and how they can effectively address rural healthcare access issues. Through a national survey coupled with open-access socioeconomic data in the United States, we aim to explore the potential contributions of emerging mobility solutions in shaping healthcare-seeking behaviors within rural communities. Specifically, we seek to understand how individuals with diverse socio-demographic backgrounds, health conditions, and social environments (including family, social network, and community) perceive these emerging mobility services and their potential to enhance rural healthcare access. The findings will offer valuable insights to stakeholders and practitioners looking to harness innovative mobility technologies for addressing rural healthcare access challenges.	
4:15 PM	Break	
4:30 PM	Sharing the Care for Families Dealing with Alzheimer's Disease or Related Dementias Stephanie Holmes & DeLane Richardson	
	The PANDA Project (Providing Alzheimer's N' Dementia Assistance) and Dementia Friendly Alabama are both programs under the Central Alabama Aging Consortium, the Area Agency on Aging for Autauga, Elmore, and Montgomery counties. Both work to bring awareness and support to those living with dementia and their care partners throughout Alabama, striving to build partnerships across the state to create communities where those living with dementia can live and thrive! Is your community "dementia friendly?" Find out how YOU can be the spark. Together we can!	

#### **Rural Health Reception**

This is an open reception in the lobby of the hotel. All in-person conference attendees and guests are welcome.

### Friday, March 8, 2024

7:00 AM	Breakfast and Check-In

8:00 AM Breakout Session 1

#### Public Health Track

# Screening, Identification, and Referral of Sex Trafficking Victims in Rural Areas

Lauren C. Mays, DNP, CRNP, FNP-BC

Research has shown that up to 88% of trafficked victims present to a healthcare setting during their time of being trafficked. Healthcare providers often come into contact unknowingly with individuals who have been trafficked for sex yet are not aware of the indicators of trafficking and therefore offer no assistance to victims. Studies report that trafficked victims have a seven year life expectancy during their time of being trafficked. Therefore, lack of knowledge by healthcare providers may further cause unintentional harm, and possibly death, by not assessing for and offering assistance to potential victims of trafficking. By increasing the knowledge of healthcare providers, we increase the chances of rescuing a victim of sex trafficking and enhancing their quality of life. This presentation will educate providers on the signs of sex trafficking and the ways that they can notify authorities if suspected.

#### Hospital and Clinic Track

### Care Coordination Through PCMH

Kristen Ogden

With the recent expansion of the CCM billing code for RHC's, the possibilities are incredible for both patients and clinics. Patient-Centered Medical Homes offer care that is above and beyond traditional models. By putting the patient at the center, clinics are well positioned for Value-Based Care.

Public Health Track

## Access to Care: Transforming Rural Alabama through Student-Led Clinics

Chandler Hinson

This presentation will focus on addressing the pressing healthcare disparities in rural areas in Alabama and how our student-run free clinic model (at the University of South Alabama) aims to provide accessible and quality medical care to underserved populations. We will unfold the clinic's mission and vision, highlighting its collaborative approach with local medical professionals, healthcare organizations, and community leaders. We will provide insights into the diverse range of services offered, the integral role of student volunteers in healthcare education, and the clinic's commitment to community outreach. The presentation will also explore innovative aspects such as technology integration, ensuring the model's sustainability, and sharing compelling success stories that underscore the positive impact on both individuals and the broader community. I think individuals will be incredibly interested in hear our student run free clinic experience in expanding to provide care to rural populations surrounding the greater Mobile area.

#### Hospital and Clinic Track

Bridging Healthcare Horizons: Understanding Medicare Alternative Payment Models (APMs) in Rural Settings Melissa Conboy

In the dynamic realm of healthcare, the shift from traditional Feefor-Service Medicare to Alternative Payment Models has become increasingly significant. This presentation aims to demystify these models, exploring their nuances and shedding light on their impact within rural healthcare settings. This presentation will include: Introduction to Medicare APMs, the Medicare Shared Savings Program (MSSP), Accountable Care Organization Realizing Equity, Access, and Community Health (ACO REACH), Impact on Rural Healthcare, Navigating the Transition. The presentation will be interactive, encouraging audience participation through Q&A sessions and open discussions. Attendees will leave with a comprehensive understanding of MSSP, ACO REACH, and actionable insights to navigate the changing landscape of Medicare APMs in rural healthcare.

10:00 AM Breakout Session 3

Public Health Track

#### Auburn University Rural Health Initiative:

# Partnering with communities to remap Alabama's rural health and wellness landscape

Hollie C. Cost, Ph. D.

In partnership with communities, public and private partners, Auburn University Outreach and Alabama Extension System have formed a collaborative to develop an innovative model of increasing access to healthcare throughout Rural Alabama. This accessible and innovative healthcare option combines the state-ofthe art OnMed<sup>®</sup> telehealth station with hands-on wellness care provided through university faculty and students in health-related fields. The telehealth station provides users with a an affordable, private, and efficient experience by facilitating a real-time patient encounter with an Alabama licensed clinician in a virtual setting through the use of diagnostic tools available for practitionerguided self-use. Our state-of-the-art model, developed through strategic community engagement, integrates technology with academic outreach programs and coordinated public/private partnerships while attending to critical patient-centric factors. Presenters will share the intricacies of this model along with project outcomes and a map for future project sites with participants. The presentation will culminate in a discussion regarding additional partnership opportunities.

#### Hospital and Clinic Track

#### Annual Required RHC Education

Susan Campbell

This presentation will review required rural health clinic education required annually and provided by the National Association of Rural Health Clinics.

#### 11:00 AM Track 4 Session

#### Public Health Track

The Alabama Rural Health Leaders Pipeline (RHLP) Demonstration Research Project, 1993-2017: Summary of evaluation results, program developments, and future research directions John R. Wheat, MD, MPH

We will review the mission assigned the RHLP in 1990 and its development, including critically important roles of rural advocates in the state. Major outcomes of the three basic programs, i.e., Rural Health Scholars, Minority Rural Health Scholars, and Rural Medical Scholars, will be presented. We will summarize evaluation data concerning production of health professionals with special attention to family physicians, rural doctors, and their economic impacts. The uneven geographic distribution of physician alumni in rural Alabama and its implication for future research and developments will be discussed. A panel of program alumni will be convened to comment on the presentation and help respond to questions from the audience.

#### Hospital and Clinic Track

# Rural Health- Creating and Sustaining a Culture of Exceptional Patient Experience

Liz Mahon DPT, MBA, FACHE

This presentation will discuss the key components of patient experience and provide practical ways to help you and your team improve your patient engagement scores and create a sustainable culture no matter how small the setting. Learn the difference between patient satisfaction and patient experience (hint they are not the same) and how you can impact both your patients and your employees too. Attendees will be provided with useful resources to utilize in their own healthcare setting.

Noon

Adjourn Conference

### **On-Demand Sessions**

### Connecting Communities

Maddie Tirpak

This presentation will demonstrate how Watershed Health works through community-wide gatherings, connections, data sharing, and analytics for the sake of building synergy among health entities.

#### How to Alleviate Financial and Staffing Constraints With ACO Participation Rusty Schlessman

Healthcare continues to face uncertainties. There are increased regulations, unprecedented levels of burnout, higher operating costs, and narrowed margins. Participating in an ACO has been proven to help with today's health care challenges, making it critical that rural hospitals and health systems position themselves for sustainable success in value-based care. Hear first-hand experiences from rural providers who have created an integrated value-based solution through ACO partnerships. They'll explore new advanced funding options to certain participants; how to use the Medicare Shared Savings Program as a stable business model to improve patient outcomes and generate savings; and clinical services and in-home capabilities that alleviate staffing shortage constraints, improve the care continuum and drive additional revenue streams.

#### Stop the Transfers of Dialysis Patients out of your Community

Pamela Foster & Ron Kubit

Learn how rural hospitals are serving their community for their CKD population. In the past patients on dialysis were being transferred out, as rural hospitals had no Nephrologist nor the dialysis equipment. The annual transportation cost in the US for transferring those patients is \$3B annually. You will learn from the CAH CNO who started the program over 4 years ago with a team that had no prior dialysis experience. The lessons learned; how to analyze your CKD population, projection of the hospitalizations, and why they are being hospitalized. How the clinical team became the champions of a new service line within the CAH and the development of proven clinical processes, procedures and the competencies required to deliver quality care locally and the halo effect it had on a hospital – the increase in their other service lines.