2023 Annual Report Expanding Beyond State Lines



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A WORD FROM OUR LEADER:

The Rural Health Redesign Center (RHRC) had a very successful and rewarding 2023, establishing a strong national rural presence given the significant work it was awarded late in 2022, and advancing the work of the Pennsylvania Rural Health Model (PARHM) through its fifth performance year. While its first priority is ensuring access to high quality care remains in rural Pennsylvania, it seeks to improve the lives of all rural residents across the country. The RHRC is a 501c3 nonprofit dedicated to helping rural communities thrive through improved health, and because of its work in 2023 has advanced its mission and vision. Through its various programs, the RHRC connected with over 120 communities across the country and is actively working with 90 healthcare providers to advance its vision. The RHRC estimates that 3.5 million residents reside in the communities it serves. Data that reflects the reality of health outcomes and the disparity within these communities that the RHRC engages with have higher rates of poverty and health disparity than national averages. While the mission is great, it emphasizes and motivates the RHRC team to pursue it with fervor.

This Annual report will provide insight into the work of each of the programs the RHRC led in 2023 as well as the structural changes made to prepare the organization for continued growth and impact. In 2023, the organization changed its organizational structure from predominantly program based to a competency-based infrastructure to allow it to grow and flex in response to the needs of the communities it serves. These changes resulted in sizable growth of the highly competent RHRC team, growing from 18 to 28 in 2023. Team members with rural relevant experience and expertise in the areas of strategic planning, compliance, data analysis, financial analysis, grant writing, and education joined the RHRC in 2023.

With the passionate and skilled team that RHRC has built, the organization is well positioned to advance its calling in partnership with other stakeholders to improve the lives of rural residents in the Commonwealth of Pennsylvania and across the country. As we look forward to 2024, the RHRC will continue to advance the work of the Pennsylvania Rural Health Model, with its focus changing to what comes next as the current program nears its end. Ensuring there are continued strategies to address the nation's rural health crisis is the RHRC's top priority in 2024, as well as expertly advancing the work of the other programs it has been entrusted to lead. 2024 will see the RHRC expanding its work with newly converted Rural Emergency Hospitals, as well as continue to walk with those assessing this opportunity. We will continue to support hospitals in the Northern Border Region, spending considerable time supporting organizations assessing alternative rural health payment strategies, as well as seek additional opportunities to support rural communities in our work. The team is excited about the journey our organization is on and believes we can truly make a difference in transforming rural America. We thank you for your ongoing support and contributions.

Síncerely,

Janice Walters Interim Executive Director



ABOUT US

Committed to helping rural communities THRIVE through improved health.

Our mission is to protect and promote access to high-quality health care in rural communities by encouraging innovation in health care delivery.



Our Vision

Is to TRANSFORM rural America by identifying and implementing sustainable solutions that will stabilize communities without compromising their culture and values. We are a national resource and advocate, offering rural-relevant support to providers and communities.

What We Do:

- ✓ Provide emergency support to distressed rural healthcare providers.
- ✓ Offer a complement of services tailored to meet the needs of rural providers and communities with limited resources.
- ✓ Implement scalable solutions to address rural community needs across the country.
- ✓ Develop alternative payment models to transform healthcare delivery.

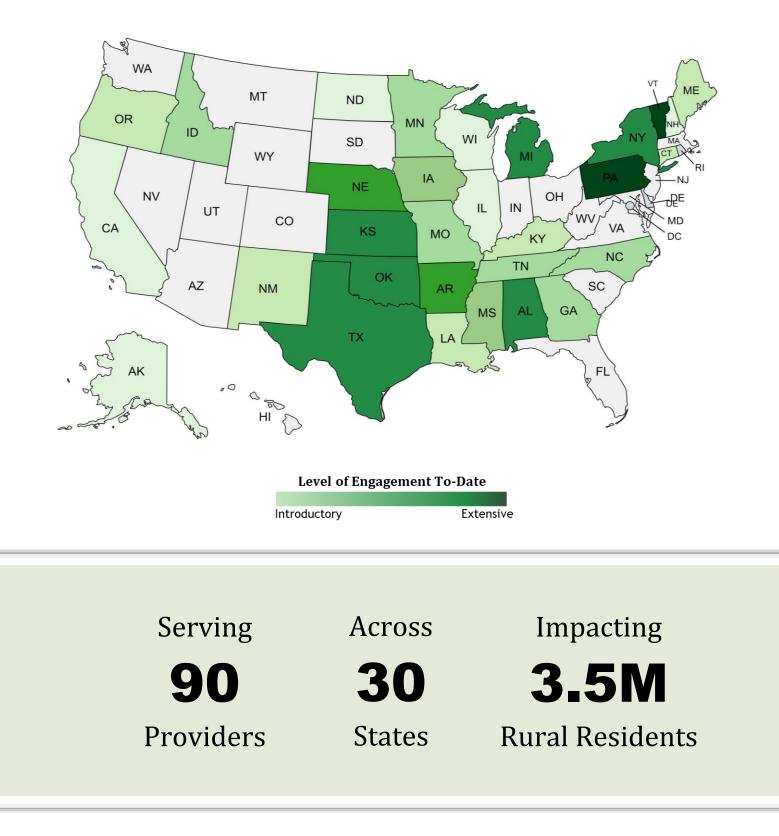


Our Focus Areas:

- 1. Preserving access to high quality healthcare in rural communities.
- 2. Strengthening rural economies through the preservation and enhancement of workforce opportunities.
- 3. Improving the health and wellbeing of rural residents through innovation in healthcare delivery.



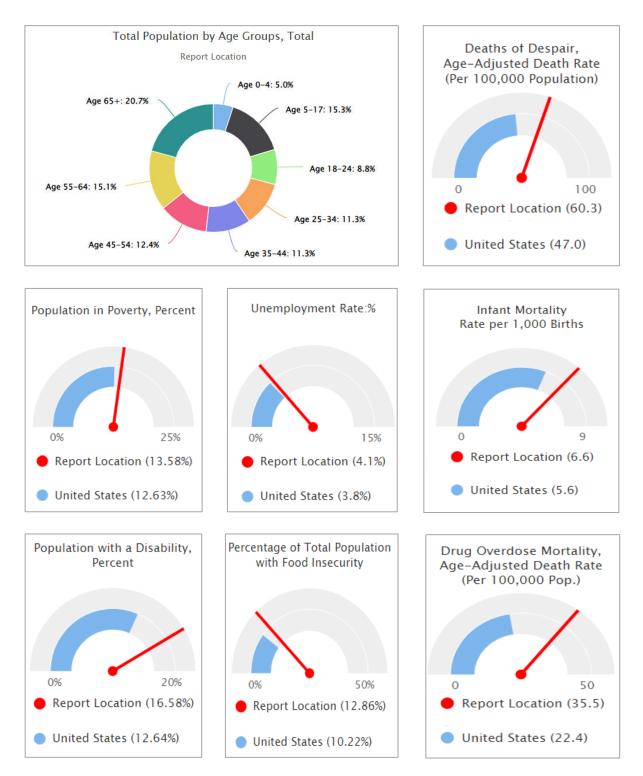
OUR FOOTPRINT





THE COMMUNITIES WE SERVE

Common trends in demographic, social, and clinical disparities have been found in the communities we serve. These include aging populations, poorer health outcomes, and elevated poverty, unemployment, and disability rates.





THE SUPPORT WE PROVIDE

Throughout the past year, we have expanded our portfolio to provide a wide array of technical assistance and support services to rural providers and communities across the country. We work with rural health leaders to understand the unique needs of each community and are proud to collaborate with valued partners who complement our services.

Value-Based Care Readiness	Data & Financial Analysis	Global Budgeting & Alternative Payement
Leadership & Team Development	Stakeholder Engagement	Strategic Planning
Culture Development	Emergency Support for Distressed Facilities	Compliance & Regulatory
Project Management	Grant Writing and Support	Performance Improvement
Clinical Tranformation & Innovation in Care Delivery	Quality Improvement	Social Determinants of Health & Health Equity



EMERGENCY SUPPORT FOR DISTRESSED HOSPITALS

Interim Management

✓ Senior Level Oversight

Fund Procurement

- ✓ Grant research
- ✓ Grant writing

Stakeholder Engagement

- ✓ State
- ✓ Federal
- ✓ Payers
- ✓ Staff and physicians
- ✓ Community

Hospital Financial Analysis

- ✓ Accounts receivable review
- ✓ Billing best practices
- ✓ Financial statement analysis
- ✓ Budget and payroll process review
- ✓ Staffing and productivity analysis
- ✓ Financial modeling

Service Line and Outmigration Analysis

- ✓ Service line evaluation and return on investment (ROI) assessment.
- Staffing plans that align with service line changes
- ✓ Designation-conversion analysis (e.g., CAH, PPS, REH, etc.)
- Transitional support for new or changed service lines.
- ✓ Ongoing financial review and analysis

Regulatory Compliance & Risk Mitigation

Action Planning



"The RHRC has been an invaluable partner and great help at this time. They have provided insight, instructions, professionals, support, you name it. Their work and commitment is totally different from any other advisor or consultant we have been able to hire. Their goal is our success, the same as ours, that is their difference between others we have hired."

Carla Flack, Board Member, Bucktail Medical Center



STRATEGIC PLANNING & ORGANIZATIONAL DEVELOPMENT

Strategic Planning

- ✓ Mission, vision, values review and refinement
- ✓ SWOT analysis
- ✓ Market analysis
- ✓ SMART goal development
- ✓ Action planning
- ✓ Ongoing monitoring, reporting, and coaching

Cultural, Leadership, and Staff Development

- ✓ Leadership training
- ✓ Staff and provider assessment surveys
- ✓ Team development and integration
- ✓ DISC personality assessment
- ✓ Staff and workflow efficiency review and optimization
- ✓ Performance improvement evaluation and monitoring
- ✓ Rounding (Gemba walks)



<u>Testimonials:</u>

"Thank you for your excellent work guiding all of us at NVRH through the strategic planning process. I feel like we now have a plan with clear, attainable goals, that will put NVRH on much better footing!"

-Mary Parent, Director, Chair of Business Law Group, Johnsbury, VT

"Having participated in many strategic planning exercises, I found this experience to be the best I have ever been a part of. The pace and length of meetings worked very well, and the end product is exceptional."

-Leadership member, Northeastern Vermont Regional Hospital

RHRC team facilitating strategic planning process for a rural NY hospital.



CLINICAL TRANSFORMATION & VALUE-BASED CARE PREPAREDNESS

Testimonials:

"The work of the RHRC has transformed our hospital's focus from providing "sick" care to providing HEALTH care which has helped drive many other strategic initiatives."

Dave Hoff, Former CEO, Wayne Memorial Hospital, PA

"The [Model] has helped us create financial stability which gives our hospital the opportunity to assess community needs and to grow, establish, and implement positive changes."

Participant in the PA Rural Health Model



RHRC team member helping a hospital leadership team develop a clinical plan for value-based transformation.

Assessment:

- ✓ Value-based readiness assessments
- ✓ Workflow analysis and redesign
- ✓ Social Determinants of Health & health equity and assessments

Stakeholder Engagement:

- ✓ Facilitation of provider-payer relationships
- ✓ Community engagement
- Employee and provider engagement
- ✓ Convening of state and federal partners

Clinical Transformation:

- ✓ Action planning
- ✓ Ongoing monitoring, reporting, and coaching
- ✓ Innovative care delivery pathways

Data and financial analytics

- ✓ Global budgeting
- Clinical improvement opportunity identification
- ✓ Potentially avoidable utilization reporting
- ✓ Financial modeling
- ✓ Development of alternative payment strategies



FINANCIAL AND DATA ANALYSIS Hospital Financial Analysis

- ✓ Accounts receivable review
- ✓ Payer mix analysis
- ✓ Billing best practices
- ✓ Financial statement analysis
- ✓ Budget and payroll process review
- ✓ Staffing and productivity analysis
- ✓ Financial modeling

Data Analytics

- ✓ Trend analysis
- ✓ Statistics modeling
- Workflow review to optimize data output
- ✓ Key Performance Indicator (KPI) dashboards
- ✓ Emergency department utilization reports
- ✓ Performance monitoring
- ✓ Gap analysis

Service Line and Outmigration Analysis

- Service line evaluation and ROI assessment
- ✓ Staffing plans that align with service line changes
- ✓ Designation-specific analysis (e.g., CAH, PPS, REH, etc.)
- ✓ Market reach analysis
- ✓ Outmigration reports
- Transitional support for new or changed service lines
- ✓ Ongoing financial review and analysis



Testimonials:

"Deep understanding of rural health, highly engaged, very supportive."

"RHRC staff really listened and "got it" when it came to boots-on-the-ground implementation and development. They were incredibly knowledgeable, supportive, and helpful. They took as much of the burden off our shoulders as they could. I cannot believe the vast array of knowledge and support that we got. We could not have paid for anything better!! Thoroughly impressed!"

"We thought we were doing well in meeting our community's needs until we saw the data."



LOCAL, STATE, AND FEDERAL STAKEHOLDER ENGAGEMENT



RHRC facilitating discussion among rural hospitals, MCOs, and state and federal partners.

Forums:

- ✓ Facilitated discussions
- ✓ Educational sessions
- ✓ Strategy and visioning
- ✓ Town halls
- ✓ Surveys
- ✓ Interviews

Stakeholders:

- ✓ State and federal partners
- ✓ Payers
- ✓ Providers
- ✓ Physicians
- ✓ EMS
- ✓ Educational institutions
- ✓ Community benefit organizations
- ✓ Drug and alcohol programs
- ✓ Funders
- ✓ Other relevant stakeholders



Testimonials:

"The RHRC's facilitated discussions between payers and providers are valuable."

"You guys do a great job selecting topics. Keep up the good work!"

Rural hospital leader engaging in dialogue with commercial payer at RHRC's 2023 Fall Summit.



GRANT AND FUNDING SUPPORT

Grant Research

- Research and identify available grant opportunities
- ✓ Assess grant readiness and qualifications
- ✓ Grant proposal consultation and preparedness

Grant Writing and Training

- ✓ Grant writing
- ✓ Best practices and education
- ✓ Submission support
- ✓ Drafting requests for proposals
- ✓ Reviewing, editing, and coaching

Grant Management & Reporting

- ✓ Project management
- ✓ Report development
- ✓ Project performance monitoring
- ✓ Project impact assessment



1:1 Hospital Support: We provided technical assistance to Barnes-Kasson in the form of grant writing. Through this assistance, the hospital received \$50,000 from the USDA to pursue modernization of their 57-year-old facility. Barnes is a 25-bed Critical Access Hospital located in rural Pennsylvania.



Substance Use Disorder: On behalf of seven rural hospitals and their local drug and alcohol programs, the RHRC applied for and received funding of the Peer Recovery Expansion Project. It is a four-year regional collaborative to improve access to substance use and behavioral health services by embedding Certified Recovery Specialists in hospital emergency departments. The RHRC serves as the central convenor of this project, managing its progress and data reporting, and coordinating its implementation across 5 regions in rural Pennsylvania.



Workforce Development: The RHRC applied for and received funding of the Emergency Medical & Community Health Industry Integration Partnership, a regional collaborative to strengthen the EMS and Community Health workforces in rural Pennsylvania. This project is comprised of hospitals, workforce boards, education institutions, and EMS providers. The RHRC serves as the central convenor of this project, managing its progress and data reporting, and coordinating its implementation.



QUALITY & REGULATORY COMPLIANCE

Quality Performance Improvement

- ✓ Quality assessment and training
- ✓ Quality data review and monitoring
- ✓ Patient safety assessment and training
- ✓ Educational guidance for operationalizing safety programs (e.g., infection control and antibiotic stewardship)
- ✓ Risk assessment
- ✓ Mitigation strategy development

Regulatory and Compliance Support

- ✓ Regulatory assessments
- ✓ Conditions of participation (CoPs)
- ✓ Survey readiness
- Policy and procedure review and development
- ✓ Health equity assessment and mitigation plans
- ✓ Leadership and staff regulatory training
- ✓ Regulatory quality performance monitoring
- ✓ Action planning for ongoing compliance

PROJECT MANAGEMENT

- ✓ Review and prioritize organizational projects
- ✓ Assess project risks
- ✓ Project planning
- ✓ Customized project management tools and resources
- ✓ Customized project management plans to address risks
- ✓ Project performance tracking and monitoring
- ✓ Ongoing coaching and support





OUR PROJECTS

In addition to our independent services, we continue to support rural healthcare organizations and communities at no cost to them through the state and federally funded programs we manage.



Pennsylvania Rural Health Model

Impacting 1.3 million Pennsylvanians through rural healthcare transformation.



Peer Recovery Expansion Project Enhancing access to behavioral health and substance use disorder services in rural communities.

Funded by Health Resources and Services Administration's (HRSA) Rural Communities Opioid Response Program through 2026.



Emergency Medicine & Community Health Industry Integration Partnership

Strengthening the EMS and Community Health Workforces in rural communities to support Mobile Integrated Healthcare solutions.

Funded by Pennsylvania Department of Labor & Industry through June 2024.



National Rural Emergency Hospital Technical Assistance Center

Helping rural hospitals across the country assess feasibility of the Rural Emergency Hospital provider type to maintain access to care in their communities. *Funded by HRSA through 2027.*



Rural Northern Border Region Technical Assistance Center

Providing technical assistance to providers in rural Maine, New Hampshire, New York, and Vermont to help them improve access to and quality of care. *Funded by HRSA through 2025.*



PENNSYLVANIA RURAL HEALTH MODEL

Background:

The PARHM is an innovative payment model developed by the Centers for Medicare and Medicaid Innovation (CMMI), testing whether fundamental changes to how rural hospitals are paid lead to improvements in hospital stability, population health, and total costs of care. This is tested using global budgets that incentivize providers to deliver value-based care through transformation planning.

"Without the Model, our hospital would not have survived the COVID-19 pandemic."

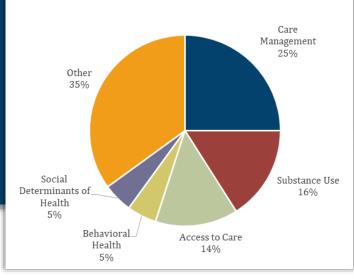
Tom Kurtz, President, Chan Soon Shiong Medical Center at Windber, Somerset PA

Program Details:

- 1.02M Payer-Covered Lives
- 18 Hospitals
- 6 Payers
- 32 Counties

Program Impact:

- ✓ All participating hospitals remain open, preserving 17k jobs and \$2.4B of economic contributions to the state.
- All quality metrics have been attained.
- ✓ 119 transformation goals completed.



Transformation Plan Focus Areas

2023 At A Glance:

In 2023 the RHRC continued its robust technical assistance to PARHM participating hospitals to address population health, Social Determinants of Health, and other initiatives identified in their 2023 transformation plans. To accomplish this, the RHRC team met quarterly with the hospitals to review their plans and provide 1:1 assistance as needed.

Bi-weekly calls with the participating hospitals continued throughout the year, with one call a month being dedicated to shared learning between the hospitals. This shared learning began in 2022 and with positive feedback from attendees, it continued through 2023.

Another key activity conducted in 2023 was the annual transformation planning with all 18 hospitals from May to August. During this time, the RHRC team met 1:1 with the leadership teams of each hospital to update their transformation plans by identifying additional goals and action steps that support their efforts towards improving quality and access to care in their communities.

The RHRC hosted spring and fall summits, bringing together PARHM stakeholders that included hospitals, payers, and local, state, and federal partners.



PEER RECOVERY EXPANSION PROJECT

Background:

The RHRC is serving as a central convenor for the federally funded Peer Recovery Expansion Project, a multi-regional collaboration that has partnered seven rural Pennsylvania hospitals with their local drug and alcohol programs. This project aims to enhance access to substance use and mental health treatment by embedding Certified Recovery Specialists (CRS) in hospital emergency departments.

2023 At A Glance:

The RHRC concluded the planning activities of the Peer Recovery and began working towards its implementation in the late spring through the hiring of certified recovery specialists to be embedded in the emergency departments of the hospitals participating in the program. The first site to launch was Barnes Kasson Hospital in Susquehanna County in September 2023. Implementation in other counties occurred throughout the fall with the final CRS being hired in December of 2023 for McKean County.

Other key activities included the formation of a monthly CRS workgroup, in-person training opportunities, and continued collaboration between each county's participating hospitals and single county authorities. Additionally, our partners at Pitt-PERU performed robust gap analysis for each county and developed substance use disorder learning modules for emergency department staff aimed at reducing stigma.

Given the immense scope of work to facilitate this program, a full-time Program Manager was hired in November of 2023.

Impacting Disparities: Through this project, hospitals have begun screening for SDoH in their emergency departments. The RHRC equipped the facilities that did not have pre-existing means to do so.

- **6,582 screenings** conducted since program start.
- **Domains being screened for:** Transportation, Utilities, Housing, Safety, Mental Health, Substance Use.





NATIONAL RURAL EMERGENCY HOSPITAL TECHNCIAL ASSISTANCE CENTER

Background:

Through this Cooperative Agreement, we serve as a national technical assistance center to support critical access hospitals and small PPS hospitals interested in assessing feasibility of the Rural Emergency Hospital (REH) designation, made available through the Medicare Rural Hospital Flexibility Program. We have also convened an REH Peer Network to provide ongoing technical assistance and shared learning opportunities for hospitals that have converted to a REH.

2023 At A Glance:

Since award of this program, we have received outreach from 104 hospitals spanning 39 states regarding the REH designation and our technical assistance services. We have progressed 52 hospitals through the cohort process to assess feasibility of REH conversion. This included thorough education, financial modeling, transition planning, stakeholder engagement, and assistance with submitting their application. Of those who participated in a cohort, twelve are either in the process of applying, have been approved, or are awaiting approval. Nineteen are continuing to work with our team to assess the decision, five have placed their decision on hold, and sixteen decided that REH conversion was not in the best interest of their organization or community. Our team also provided education to the public regarding the REH designation through the hosting of four webinars, presentations at several national events, and publishing of resources.

"We participated in the REH Cohort process and found it extremely beneficial to network with other organizations across the country navigating similar issues with the designation. We look forward to continuing the conversation as we convert."

-Shona Turner, RN, MSN, MBA, Chief Operating Officer, SCK Health, Arkansas City, KS



REH Peer Network:

Looking forward to 2024, we have received supplemental funding to support converted REHs. In January, we will launch the REH Peer Network where these hospitals will have access to a peer forum, educational sessions, and ongoing support such as stakeholder engagement, clinical transformation, strategic planning, data analytics, and more. Of the seventeen REHs operating in the country, sixteen have verbally confirmed participation in the REH Peer Network.





RURAL NORTHERN BORDER REGION TECHNICAL ASSISTANCE CENTER

Background: Through a Cooperative Agreement with HRSA, we serve as a multi-state technical assistance center supporting healthcare providers and communities in the rural Northern Border Region: *Maine, New Hampshire, Vermont, and Northern New York*



2023 At A Glance

Events & Forums:

- Hosted 4-part webinar series with 400+ attendees.
- Presented at New England Rural Health Association's Annual Conference.
- Presented to Region 1 on the American Hospital Association and to individual hospital associations in each state.
- Celebrated National Rural Health Day at The Hall of Flags in The State House at Augusta, Maine.

Engagements:

- Executed agreement with Vermont Hospital Association to work with 10 rural hospitals regarding value-based care.
- Provided technical assistance to 9 organizations in the areas of:
 - o Strategic planning
 - Value-based care
 - Project management
 - o Cultural development
 - o Financial analysis of potential CAH conversion
 - o HIV/STI Testing development
 - o Health equity impact assessments

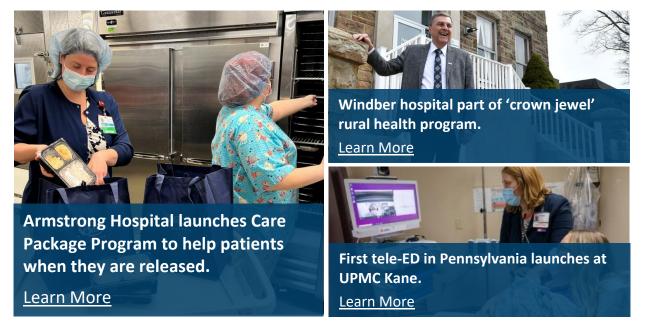
Supplemental Funding

- Received an additional \$1M funding from HRSA which was used to sub-award 7 projects in the areas of:
 - \circ Food insecurity
 - \circ Substance use
 - o Leadership development
 - Pediatric oral health
 - $\circ \quad \text{Mobile integrated care} \\$
 - o Health equity
 - o Primary care



OUR IMPACT

Though our work primarily operates behind the scenes, it has resulted in recognition and rewards. Below are a few examples:



Patient Impact Stories

In Butler County, a veteran and his wife were facing challenges related to chronic and acute conditions, making repeated medical appointment travel difficult and dangerous. Clarion Hospital staff contacted Ramps of Hope, who constructed a ramp to facilitate safer transportation options for this family.

> A homeless behavioral health patient needed assistance with medication management, safe shelter, food insecurity, and a job. Through access to behavioral health services, the patient was able to establish a medication regiment and group home placement. Through continued support and care coordination the patient is now safe and—with an actual address—is able to apply for a job.

I suffered a "widow maker" heart attack. The quick and decisive actions by the physicians, nurses and staff members were critical to survival. Since that day, I've often thought how lucky Punxsutawney is to have a hospital with the level of service it maintains staffed by talented professionals who genuinely care.



THE RHRC IN ACTION



Project Manager, Josh Miller, Celebrating National Rural Health Day at The Hall of Flags in The State House at Augusta, ME.



Interim Executive Director, Janice Walters, speaking at the National Rural Health Association conference



Director of Clinical Services, Beth Locke, assisting hospital with 2023 transformation plan for the PA Rural Health Model.



Janice Walters, presenting on Mobile Integrated Health and Community Paramedicine at New England Rural Health Association Annual Conference.



Subset of RHRC team attending our 2023 Annual Summit. (Left to right – Beth Locke, Billi Bizzaro, Tom Harlow, Steven Davis, Sue Pascarella, Gary Rhodes, Candice Talkington, Autum Martin, Dan Simmons, Michelle Trotz, Tracey Dorff)



Program Director, Anna Anna, and Project Manager, Angie Slemok.



RHRC Team facilitating strategic planning engagement.



Manager of Strategic Planning, Candice Talkington, and Program Director, Tom Harlow



Beth Locke and CBO Coordinator, Sue Pascarella, attending 2023 RCORP conference for the Peer Recovery Expansion Project.



OUR TEAM

Our team is comprised of long-term rural residents and healthcare executives. Our passion to help rural communities thrive is derived from our lived experience, and we are committed to addressing rural-relevant issues through creative and practical approaches.





OUR GOVERNANCE

Board of Directors (as of December 2023)

- John Lewis Chairman: Former Chief Executive Officer, Armstrong Memorial Hospital
- Lauren Hughes, MD, MPH, MSc, FAAFP Vice Chair: State Policy Director, Farley Health Policy Center, Colorado
- Brock Slabach, MPH Secretary: Chief Operations Officer, National Rural Health Association
- Lisa Davis, MHA Treasurer: Director and Outreach Associate Professor of Health Policy and Administration, PA State Office of Rural Health
- **Greg Leis, MBA, CHFP:** Vice President/Chief Financial Officer Fulton County Medical Center

• Raymond Prushnok: Executive Director, UPMC Center for Social Impact Assistant Vice President of Government Programs, UPMC Health Plan

• John Myers:

Vice President of Federal Advocacy Hospital and Healthsystem Association of Pennsylvania (HAP)

• Sheilah Borne:

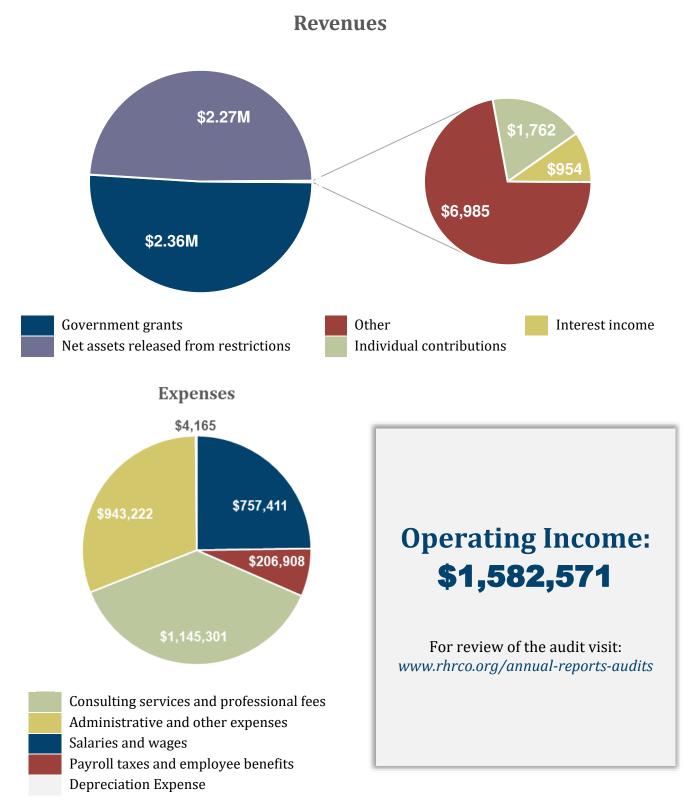
Associate Vice President of Government Health Relations, Penn State Government and Community Relations





FINANCIALS

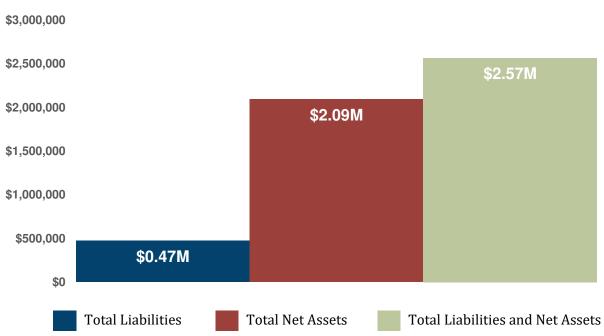
The RHRC's financials are audited following a June 30 fiscal year. Below highlights our 2023 audit, as completed by external auditor, Forvis, LLP.



RUBAL HEALTH REDESIGN CENTER

FINANCIALS

This Financial position is reflective of all activities including support of the PA Rural Health Model, Rural Emergency Hospital Technical Assistance Center, Northern Border Region Technical Assistance Center, Peer Recover Expansion Project, Emergency Medical & Community Health Industry Integration Partnership, and other client engagements.



Statement of Financial Position



For review of the audit visit: www.rhrco.org/annual-reports-audits



LOOKING FORWARD

As we move into 2024, our focus will be the continued execution of our programs and expansion of rural-relevant support to other providers, communities, and partners to broaden our impact to the health and well-being of rural communities beyond the scope of our federally funded programs.

2024 Priorities:

Development of Alternative Payment Strategies in Pennsylvania and Beyond

As the Pennsylvania Rural Health Model nears the end of its performance period, we are committed to identifying what comes next for its participants. We will continue to work closely with our hospitals, payers, and state officials to develop alternative payment strategies that will secure access to care in rural Pennsylvania. Our team will also expand support and continue to work with partners in other states to leverage the lessons learned through the Rural Health Model to develop rural solutions beyond Pennsylvania.

Continued Execution and Expansion of Programs and Initiatives Underway

Our team will advance the work of our other programs. We will expand our work with newly converted Rural Emergency Hospitals, as well as continue to walk with those assessing the designation. We will continue to support hospitals in the Northern Border region, spending considerable time supporting organizations assessing alternative rural health payment strategies, as well as seek additional opportunities to support rural communities. We will advance the execution of the Peer Recovery Expansion Project, exploring possible expansion and cross-training of Certified Recovery Specialists in mental health.

Expansion of Service Offerings Beyond the Scope of Federally Funded Programs.

Our team is expanding its ability to support rural providers and communities outside of the guardrails of our current grants and cooperative agreements through affordable service offerings. Committed to helping rural communities thrive, we have built a comprehensive catalog of subject matter expertise, and we desire to make our services accessible to rural communities and stakeholders in need of support.



YOUR SUPPORT MATTERS



Help Us:

- ✓ Keep Rural Healthcare Providers Open
- ✓ Strengthen Rural Economies
- ✓ Make Rural Communities Healthier

DONATE TODAY

Scan the QR Code or visit www.rhrco.org/donate to support our cause.



The RHRC is a 501c3 non-profit and all donations are tax deductible (EIN 85-2486560)



ACKNOWLEDGEMENTS

Thank you to our partners, clients, donors, and other stakeholders for your ongoing support of our organization and initiatives. Together, we are preserving access to care in rural communities and improving the quality of life of rural residents across America.

RHRC Staff Members

Board Members:

- Brock Slabach
- Greg Leis
- John Lewis
- John Myers
- Dr. Lauren Hughes
- Lisa Davis
- Raymond Prushnok
- Sheilah Borne

RHRC Staff Members

PARHM Participants:

- Armstrong County Memorial Hospital
- Aetna Health Plan
- Barnes-Kasson County Hospital
- Butler Health System (DBA Clarion Hospital)
- Chan Soon Soon-Shiong Medical Center at Windber
- Centers for Medicare & Medicaid Services
- Endless Mountains Health
- Systems
- Fulton County Medical Center
- Geisinger Health Plan
- Geisinger Jersey Shore Hospital
- Highlands Hospital
- Highmark Health Plan
- Highmark Wholecare
- Indiana Regional Medical Center
- Meadville Medical Center
- Monongahela Valley Hospital
- Olean General Hospital (DBA Bradford Regional Medical Center)
- Punxsutawney Area Hospital
- Penn Highlands Tyrone Hospital
- UPMC Health Plan
- UPMC Kane Hospital
- Washington Health System at Greene
- Washington Hospital
- Wayne Memorial Hospital

EMCHIIP Participants

- Allegheny Health Network
- Emergency Health Services Federation, Inc. Education Institute
- Pennsylvania Highlands
- Community College
- Southern Alleghenies
 Workforce Development
 Board
- Tri-County Workforce Investment Board, Inc.

PREP Participants

- Alcohol & Drug Abuse Services, Inc.
- Armstrong Indiana Clarion
 Drug & Alcohol Commission
- Blair County Drug & Alcohol
 Program
- Clearfield-Jefferson Drug & Alcohol Commission
- Crawford County Drug & Alcohol Executive Commission, Inc.
- Lackawanna Susquehanna Office of Drug & Alcohol Program
- Pitt-PERU
- Trehab

REH-TACParticipants

Anonymous

NBR-TAC Participants

- Northeastern Vermont Regional Hospital
- Community Memorial Hospital
 - Vermont Hospital
 - Association

Partners:

- Centers for Medicare and Medicaid Innovation
- Center for Rural Pennsylvania
- EMS Premier Consulting
- Hall Render
- Healthcare Council of Western
 PA

- Hospital and Healthsystems
 Association of PA
- JSR Strategies
- Mathematica
- New England Rural Health Association
- PA Department of Health
- PA Department of Human Services
- PA Insurance Department
- PA State Office of Rural Health
- Rural Health Value
- Stroudwater Associates
- Veralon

Funders:

- Health Resources and Services
 Administration
- Northern Border Regional Commission
- P.A. Department of Labor & Industry

Donors:

- Anna Anna
- Anonymous
- Angie Slemok
- Asha Varghese
- Bill Bizzaro
- Bob & Janice Walters
- Brock Slabach
- Candice Talkington
- Dan & Patti Simmons
- Doug & Kelly Barney
- Gerard Egan
- Iack Sisk
- John Kolodziej
- John 'Gary' Rhodes

Lauren Hughes

Michelle Trotz

RJW Solutions

Stacy LoCastro

Susan Pascarella

Thomas Harlow

23

Steven Davis

Susie Aft

Justin & Tracey Dorff

- Iosh Miller
- ISR Strategies

•

•



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> > Published January 2024

