



RURAL HEALTH ADVISORY COMMISSION

NEBRASKA OFFICE OF RURAL HEALTH
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MINUTES of the Rural Health Advisory Commission

Friday, September 20, 2019

**Nebraska State Office Building
Lower Level Conference Room C
301 Centennial Mall South
Lincoln, Nebraska**

Members Present: April Dexter, N.P.; Marty Fattig; Jessye Goertz; Cherlyn Hunt; Lynette Kramer, M.D.; Mark Pyle; Rebecca Schroeder, Ph.D.; Roger Wells, PA-C

Members Not Present: Sheri Dawson R.N.; Benjamin Iske, D.D.S.; Michael Sitorius, M.D.

Vacant Positions: Family Practice Resident; Medical School Representative

Staff Present: Nikki Krause; Deb Stoltenberg; Rachael Wolfe

1. Call Meeting to Order; Open Meetings Act and Agenda Posted; Adopt Agenda; Approve Minutes of June 21, 2019, Meeting; Introduce Members and Guests

Chairman Marty Fattig called the meeting to order at 1:30 p.m. with the following members present: April Dexter, N.P.; Marty Fattig; Jessye Goertz; Cherlyn Hunt; Lynette Kramer, M.D.; Mark Pyle; Rebecca Schroeder, Ph.D.; Roger Wells, PA-C

Mr. Fattig announced that the Open Meetings Act and today's Agenda are posted by the door. Roger Wells moved to adopt the September 20, 2019, meeting agenda with no changes. Mark Pyle seconded the motion. Motion carried. YES: Dexter; Goertz; Hunt; Kramer; Pyle; Schroeder; Wells. NO: None. ABSTAIN: None. EXCUSED: Dawson; Iske; Sitorius.

Dr. Lynette Kramer moved to approve the June 21, 2019, Rural Health Advisory Commission meeting minutes. Jessye Goertz seconded the motion. Motion carried. YES: Goertz; Kramer; Pyle; Schroeder. NO: None. ABSTAIN: Dexter; Hunt; Wells. EXCUSED: Dawson; Iske; Sitorius.

Members, staff, and guests introduced themselves.

2. Administrative Items

- **Next Meeting: Friday, November 22, 2019, 1:30 p.m.
State Office Building Room LLB, Lincoln, NE**

Rachael Wolfe announced that the RHAC meetings for 2020 will be scheduled at the November meeting and proposed moving the meetings from Friday afternoons to Friday mornings. Those with a distance to travel could come into town on Thursday evening and stay at a hotel. There are funds available for hotel stays. The consensus was to meet 9:30 a.m. to 12:00 p.m.

For the *outside of Lincoln* meeting, Ms. Wolfe stated that next year it could be held in Kearney in conjunction with the Annual Rural Health Conference. However, if someone would like to host the meeting at another rural location, the meeting could be moved. The group felt that Kearney was a good site for the RHAC meeting as it is centrally located, but that waiting until April may mean going too long without a meeting.

If anyone is aware of potential date conflicts or would like to host the RHAC meeting, please email Ms. Wolfe so she can compile the information and have it available at the November meeting.

- **Update on Vacant Positions: Family Practice Resident, Medical School Representative**

Ms. Wolfe announced that the ORH has received one application for the vacant Family Practice Resident position and there is the possibility of receiving one more. The goal is to have someone in place by the next meeting.

For the Medical School Representative, Creighton forwarded a name to Ms. Wolfe. She has forwarded the resume/CV to the Governor's Office. Again, the goal is to have someone in place by the next meeting.

- **Update on Other Commission Members' Status**

Members requesting reappointment [April Dexter, Marty Fattig, Benjamin Iske, Lynette Kramer, and Jessye Goertz] have submitted their applications.

- **Other Announcements**

DHHS welcomed Dr. Gary Anthone, Chief Medical Officer and Director of Public Health, on September 3, 2019 (refer to Agenda Item #2). Mark Pyle stated that Dr. Anthone was unable to attend today, but plans to attend in the future.

3. Office of Rural Health Activities

- **Website/Lookup Tool Updates – Demo**

Rachael Wolfe announced that due to technical difficulties, the *Website/Lookup Tool Updates* demonstration would have to be postponed. The Loan Repayment items have been consolidated into one page and some FAQs and responses are listed below the map links. The maps are now interactive. The ORH has been working with Rural Health Intern, Chanhyun Park, and the GIS specialist at DHHS, to list rural health sites with HPSA scores and display shortage areas in a clearer way. RHAC Members can go to the page and review the changes: <http://dhhs.ne.gov/Pages/Rural-Health-Nebraska-Loan-Repayment-Programs.aspx>

- **National Rural Health Day – November 21st**

Ms. Wolfe announced that National Rural Health Day is November 21st (refer to Agenda Item #3). Included in today's packet is a handout on *Ways to Celebrate National Rural Health Day*. This is a national effort by the State Offices of Rural Health.

4. Review Current Federal & State Legislative Activities Impacting Rural Health

At the federal level, Marty Fattig reported that in his opinion, one good thing and one bad thing came out of the *Outpatient Perspective Payment Program* which was passed on August 19th. Regarding the problem where CMS required *direct supervision* for some therapeutic procedures; the wording was changed from *direct supervision* to *general supervision*. This language change will help rural hospitals immensely. The bad thing is that there is a big push for transparency on pricing at the federal level. So starting at the first of 2018, healthcare entities had to post their *Charge Master* in a machine readable format on their websites. Any patient could review the *Charge Master* and look up the charge for a particular service. The problem is, patients do not pay the price listed on the *Charge Master*, most likely a negotiated rate is paid. This year, through an Executive Order from the President, healthcare entities are to post on their websites the *gross charges and payer specific negotiated charges for all items and services*. When negotiated rates are posted on the internet, there will no longer be any negotiated rates. The American Hospital Association deems this as illegal as it is contrary to specific federal statutes. If this continues to move forward, the American Hospital Association will file a lawsuit and that may be the only way to stop this as this is an Executive Order.

At the state level, Mr. Fattig reported that over the last week DHHS has released dozens of hearing dates for proposed regulation changes. Mr. Fattig wanted to make everyone aware of this.

Roger Wells reported that the ORH assisted him financially to attend the National Rural Health Association's Critical Access Hospitals Conference in Kansas City, Missouri. Mr. Wells will have a formal report on the conference, but wanted to present a summary. The opioid epidemic in Nebraska is not the same as seen in other places in the United States. In Nebraska, there has been an increase in opioid related deaths, but opioids are

seen in combination with other substances such as meth or heroin. Outside prescribers will be getting a letter in November from CMS indicating that they are outside the guidelines for routine and customary prescribers. Most prescribers have an opioid policy but there are a lot of prescribers who do not have an opioid policy.

Mr. Wells stated that Dr. John Cullen spoke on OB services and that the number of deliveries in rural America is decreasing significantly. However, he brought data showing that people were safer in having a delivery in rural America than in urban America. The reason is because most of the OB deaths occur the week before delivery or the week after delivery up to a year, not during labor and delivery which is contrary to what people thought. The lack of intervention by individuals at the larger centers has been associated with higher death and mortality with deliveries.

Mr. Wells spent 6-8 hours in *Documentation*. When a provider documents, it is necessary to document *why the patient is there* and *what is the severity of illness*. Then the document goes to a coder who codes the severity of illness, then to a biller, then out to a payer, and then comes back with either an acceptable rate or not. What is being found is a *hierarchy of conditions*. The sicker the patient is the more you can code. However, in rural America, they do not code to a level that is actually showing the illness. So it looks like central Nebraska is healthy and there is not much illness. The purpose of this was to provide education to providers with these documentation aspects for chronic conditions. What happens is when Medicare finds out the provider has a sicker patient, they are willing to reimburse at a higher level. With the higher level, the facility receives a better reimbursement and more profit.

Mr. Wells explained the other big issue is regarding Accountable Care Organizations (ACOs). Accountable Care Organizations look at a provider or a group of providers with more than 900 patients to try to keep the population healthy. 80% of the population of health is determined by *social determinates*, what happens at home and not by what happens in a providers office. ACOs are trying to identify if patients are smoking, if there is food available, do patients have a job, transportation, an education, etc. ACOs are showing providers how to intervene with a team approach. With Affordable Care, if providers do a better job and the costs for the patient is less, the provider gets to share in the money. If the costs are higher, providers get to lose money. The problem is that no rural areas have been associated with good outcomes with risks.

In regards to *social determinates*, Mr. Fattig stated, within the city of Lincoln, from one zip code to another zip code, there is a 20 year difference in life expectancy.

Dr. Lynette Kramer stated that the theory for value based health and population health is excellent. The trouble is with the execution. There are varying quality measures which makes it hard to care for patients. There have been talks about aligning quality measures.

5. Rural Health Systems & Professional Incentive Act Program Updates

- **RHAC Annual Report**

Rachael Wolfe passed around the Kansas Annual Report. Kansas prints and distributes a 25-page color, magazine type publication. Ms. Wolfe asked the Commission if we should consider a new format for the Annual Report. The Nebraska Annual Report could be shorter, and it would need to be submitted to the printer 4-6 weeks ahead of distribution. The number of printed copies would be limited by attaching the publication to the Rural Health Advisory Commission webpage. There is an approximate budget of \$5,000 and this includes printing, hotel accommodations, and other costs.

Mark Pyle mentioned that the Legislature would like to receive documents electronically as opposed to printed. It was added that lengthy reports are not read in their entirety.

The Commission would like for Ms. Wolfe to look into redesigning the Annual Report.

- **RHAC Recommendations**

Ms. Wolfe explained that the Commission Recommendations have not been updated since 2016 and asked the Commission if they should be updated at this time. In the meeting packet is two pages from a 2015 contract with Dave Palm *to assist the ORH and RHAC in identifying problems in rural Nebraska and the development of rural health recommendations by holding and facilitating four meetings and assisting in the preparation of a written report* (refer to Agenda Item #5a). Ms. Wolfe explained that the recommendations are generally released in the Annual Report in December. However, if an in-depth review of the recommendations is done, more time may be needed for the review.

Marty Fattig stated that if recommendations are included in the Annual Report, they need to be approved every year to account for changes. Mr. Fattig suggested utilizing the services of Dave Palm again, and for Mr. Palm to have a meeting prior to the November RHAC meeting so he can report on the progress.

Roger Wells moved to form a committee to rewrite the recommendations with the acquisition of Dave Palm. Rebecca Schroeder seconded the motion. Motion carried. YES: Dexter; Goertz; Hunt; Kramer; Pyle; Schroeder; Wells. NO: None. ABSTAIN: None. EXCUSED: Dawson; Iske; Sitorius.

- **Review Budget**

Ms. Wolfe explained that the ORH is looking for additional funds. Mr. Pyle stated that he is also looking for additional funds for another program. A request has been submitted to Medicaid for Medicaid Reinvestment dollars, but a response has not yet been

received. If nothing else, work needs to be done to build a case to increase the appropriation for the next biennium budget.

Ms. Wolfe reviewed the program budget (refer to Agenda Item #5b). For FY 2019-20, the planned total obligation is \$1,062,669.53. The last individual who will receive payment has an *Expected/Eligible Start Date* of July 1, 2021.

There was a request from Sidney Regional Medical Center (SRMC) (refer to Agenda Item 5c) to provide certain practitioners tax free dollars for their student loans. SRMC would donate the whole amount of loan repayment without State match. This would not be allowable. Ms. Wolfe will prepare a letter for Mark Pyle's signature to SRMC.

Roger Wells recommended a letter from the Commission should be drafted identifying that the Commission is in a bad situation with funding and the Commission is waiting two years before providing funding to people who may or may not continue to provide services in rural healthcare and may or may not continue to stay there due to the lack of commitment from the state and alternate funds are need immediately. Mr. Pyle mentioned that funding for the program needs to be sustainable over time as people will continue to be added to the Loan Repayment Waiting List.

Roger Wells moved to have the Commission Chair draft a letter on behalf of the Commission encouraging urgent acknowledgement and action on a solution to medical providers. April Dexter seconded the motion. Mr. Fattig will draft a letter and send it to Commission members for review before submitting it. Motion carried. YES: Dexter; Goertz; Hunt; Kramer; Schroeder; Wells. NO: None. ABSTAIN: Pyle. EXCUSED: Dawson; Iske; Sitorius.

6. CLOSED SESSION

April Dexter moved to go into Closed Session at 2:29 p.m. Jessye Goertz seconded the motion. Motion carried. YES: Dexter; Goertz; Hunt; Kramer; Pyle; Schroeder; Wells. NO: None. ABSTAIN: None. EXCUSED: Dawson; Iske; Sitorius.

Marty Fattig announced that the Rural Health Advisory Commission would go into Closed Session at 2:29 p.m. to review loan repayment applications and updates on current recipients. Mr. Fattig asked guests to please wait outside the room.

7. OPEN SESSION

Mark Pyle moved to go into Open Session at 2:40 p.m. Rebecca Schroeder seconded the motion. Motion carried. YES: Dexter; Goertz; Hunt; Kramer; Pyle; Schroeder; Wells. NO: None. ABSTAIN: None. EXCUSED: Dawson; Iske; Sitorius.

Ms. Schroeder motioned to approve the following loan repayment applications with estimated loan repayment start dates and loan repayment amounts as indicated or as determined by the Office of Rural Health staff, based on issuance of license and/or loan

documentation, practice time in the shortage area, and the availability of funds for the state match.

Status	Date Complete App Received	License	Name	Actual Practice Date	Expect/Eligible Start Date	Specialty	County (Community) of Practice	Total Loan Repayment (State and Local)
Application - State	4/1/2019	111983	Cassandra Wood	4/1/2019	7/1/2020	NP (Ped)	Box Butte (Alliance)	\$13,590.00
recommend federal funds	5/28/2019	112079	Kylee Meyer	1/1/2019	9/1/2020	NP (FP)	Otoe (Nebraska City)	\$7,135.00
Application - State	7/8/2019	112476	Stephanie Green	5/22/2018	7/1/2021	NP (FP)	Cheyenne (Sidney)	\$69,438.62
recommend federal funds	7/22/2019	112847	Michaela Ostdiek	7/1/2019	9/1/2020	NP (FP)	Brown (Ainsworth)	\$13,210.00
Application - State	8/5/2019	112803	Bobbie Jo Miller	5/6/2019	7/1/2021	NP (FP)	Pierce (Osmond)	\$33,200.00
Application - State	8/26/2019	pending	Kailee Kelly	9/25/2019	7/1/2021	NP (FP)	Box Butte (Alliance)	\$60,488.00
recommend federal funds	8/26/2019	31817	Hayli Karbowski	8/19/2019	9/1/2020	MD (FP)	Thayer (Hebron)	\$100,000.00
recommend federal funds	9/11/2019	7308	David Seger	6/20/2014	9/1/2020	DDS (Gen)	Madison (Norfolk)	\$100,000.00
Application - State	9/12/2019	pending	Kensly Williams	2/1/2020	7/1/2021	PA (FP)	Jefferson (Fairbury)	\$79,288.00
Application - State	9/13/2019	pending	Alexis Erbst	9/1/2020	7/1/2021	MD (FP)	Aurora (Hamilton)	\$180,000.00

And Roger Wells seconded the motion. Motion carried. YES: Dexter; Goertz; Hunt; Kramer; Pyle; Schroeder; Wells. NO: None. ABSTAIN: None. EXCUSED: Dawson; Iske; Sitorius.

8. Other Business

Referring to the September 17, 2019, letter from *UNMC regarding the UNMC Rural Health 2030: 2019-2020 Action Plan*, Roger Wells was glad UNMC was looking into rural activities, but was not sure if they would work parallel to the Commission. It would be advantageous for UNMC to work with the Commission. Marty Fattig knows Nicole Carritt and Dr. Dele Davies and is trying to schedule a meeting for them to come to Auburn to discuss this plan.

The next meeting of the Rural Health Advisory Commission will be November 22, 2019, in Lincoln, Nebraska.

9. Adjourn

Dr. Lynette Kramer motioned to adjourn the meeting at 2:53 p.m. Meeting adjourned.