



## RURAL HEALTH ADVISORY COMMISSION

NEBRASKA OFFICE OF RURAL HEALTH  
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**Minutes of the  
RURAL HEALTH ADVISORY COMMISSION  
Friday, February 20, 2015  
220 S. 17<sup>th</sup> Street, Conference Room LLA  
Lincoln, Nebraska**

Members Present: Brian Buhlke, D.O.; John (Andy) Craig, M.D.; Marty Fattig; Jessye Goertz; Mary Kent; Lisa Mlnarik, MSN, APRN, FNP; Jenifer Roberts-Johnson, J.D.; Rebecca Schroeder, Ph.D.; Roger Wells, P.A.-C.

Members Excused: Mark Goodman, M.D.; Noah Piskorski, D.D.S.; Mike Sitorius, M.D.; (vacant position – DHHS representative)

Staff Present: Margaret Brockman, Joni Delaney, Nancy Jo Hansen, Marlene Janssen, Tom Rauner, Deb Stoltenberg

1. Call Meeting to Order; Open Meetings Act & Agenda Posted; Adopt Agenda; Approve Minutes of November 21, 2014, Meeting; Introduce Members (if guests are present)

Chairman Marty Fattig called the meeting to order at 3:09 p.m. with the following members present: Buhlke, Craig, Fattig, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells.

Mr. Fattig announced that the Open Meetings Act and Agenda are posted by the door.

Roger Wells moved to approve the agenda with the following change: add to Agenda #5 “discuss student loan default interpretation.” Dr. Brian Buhlke seconded the motion. Motion carried. YES: Buhlke, Craig, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells. NO: None. Excused: Goertz, Goodman, Piskorski, and Sitorius.

Roger Wells moved to approve the November 21, 2014, Rural Health Advisory Commission minutes. Lisa Mlnarik seconded the motion. Motion carried. YES: Buhlke, Craig, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells. NO: None. Excused: Goertz, Goodman, Piskorski, and Sitorius.

Mr. Fattig asked the members and staff to introduce themselves and welcomed new member, Dr. John (Andy) Craig.

2. Administrative Items
  - Next Meeting: Friday, June 19, 2015; 1:30 p.m., Lincoln
  - Student Loan Interviews/Interviewers

- Other Announcements

Marty Fattig announced that the next commission meeting will be held on Friday, June 19, 2015, at 1:30 p.m. in Lincoln with student loan interviews to take place that morning prior to the meeting. The following members volunteered to interview student loan applicants: Dr. Rebecca Schroeder, Lisa Mlnarik, Marty Fattig, and Roger Wells. Marlene Janssen stated she would contact those members that were absent and ask if they would like to interview the applicants.

Mrs. Janssen reported that the commission must hold at least one meeting each year outside of Lincoln and Omaha. Since it was not going to work to hold the meeting during the Nebraska Rural Health Conference due to scheduling problems, the commission discussed other locations. Dr. Buhlke volunteered to “host” the September meeting in Central City on Friday, September 11, 2015, at 1:30 p.m.

Marlene Janssen asked the commission members to review the membership list. There is still one vacancy on the commission and that is the representative from DHHS (recommended by the CEO).

### 3. Federal & State Legislation

Marty Fattig reviewed a handout from the Nebraska Hospital Association summarizing certain bills in the Legislature. Mr. Fattig highlighted several of the bills.

- LB46, changes provisions of the Statewide Trauma System Act. The State of Nebraska has had a trauma system for a while but this bill provides for designation of trauma rehabilitation centers that meet accreditation. LB46 is currently on Select File.
- LB107 eliminates integrated practice agreements and provides for transition-to-practice agreements for nurse practitioners.
- LB108 appropriates funds to the University of Nebraska to fund behavioral health internships.
- LB129 require criminal background checks for applicants for initial nursing license.
- LB196 changes provisions of the Rural Health Systems and Professional Incentive Act based on recommendations for the Rural Health Advisory Commission.
- LB333 adopt the Health Care Services Transformation Act. This bill would create a 24-member healthcare transformation commission which would be housed within DHHS Division of Public Health and have representation from the Office of Rural Health. Mr. Fattig mentioned that he had submitted written comments to Senator Gloor about LB333.
- LB353 changes credentialing provisions for nursing home administrators.
- LB471 changes provisions relating to prescription drug monitoring.
- LB472 Medicaid Redesign Act to expand Medicaid.
- LB490 adopt the provider Orders for Life-Sustaining Treatment Act.
- LB549 adopt the Health Care Transformation Act. This bill is the result of the work done by the LR422 committee.
- LB573 adopt the Health Enterprise Zone act and provide for tax credits...this provides for tax incentives to practice in rural areas. This is basically what the rural incentive programs do for health professionals but actually provides for tax credits.
- LB625 adopt the Interstate placement for Involuntarily Admitted Patients Agreement Act.

Jessye Goertz arrived at 3:28 p.m.

Marty Fattig reported on federal legislation. With the recent congressional election we will see changes in the Affordable Care Act (ACA). While some congressional representatives would like to repeal the ACA, it is

more likely that we will see incremental fixes such as delay of the employer mandates and repeal of the following: medical device tax, independent payment advisory board (IPAB), individual mandates and restrictions on physician-owned hospitals.

Mr. Fattig stated that there are fiscal concerns that Congress keeps pushing down the road. These fiscal concerns include Medicaid physician payment increase, Medicare physician payment cuts (SGR (Sustainable Growth Rate)), and debt limit extension. The President's proposed budget would cancel sequestration but replace it with other cuts, strengthen the IPAB, reduce bad debt payment to 25 percent, reduce Graduate Medical Education (GME) and Independent Medical Exam (IME) payments by 10 percent, and provide changes to the Critical Access Hospital (CAH) program by reducing payments from 101 percent to 100 percent and the mileage requirement.

Other federal legislation affecting rural practices and hospitals include permanent fixes to the physician supervision requirement by adopting a default standard of general supervision for outpatient therapeutic services, removal of condition of payment requirement (96-hour rule), ICD-10 implementation, Meaningful Use Requirements, and quality/value payments.

4. Program 175 – Rural Incentive Programs
  - Updates on Student Loan/Loan Repayment
  - Accounts Receivable
  - Review Budget

Marlene Janssen reported that Dr. Michael Israel, who was approved by the commission for loan repayment, has requested that his application be moved to the waiting list while he applies for the National Health Service Corps Loan Repayment Program.

Ms. Janssen stated that at the last commission meeting, the commission tabled a request from Megan Moser, P.A. who is practicing in a clinic with a family medicine physician and a general internal medicine physician and asked me to obtain additional information about her primary supervising physician. Ms. Moser is practicing in a non-family practice shortage area but it is a general internal medicine shortage area. Marlene Janssen reported that Megan Moser's primary supervising physician is a family medicine physician.

Jessye Goertz moved to deny Megan Moser's eligibility to apply for the Nebraska Loan Repayment Program because her primary supervising physician is a family medicine physician and the area is not a family practice shortage area. Dr. Brian Buhlke seconded the motion. Motion carried. YES: Buhlke, Craig, Goertz, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells. NO: None. Excused: Goodman, Piskorski, and Sitorius.

Marlene Janssen provided the following rural incentive program Accounts Receivable report:

**Student Loan Update** (Contract Buyout and Defaults)

Michelle Bausch, LMHP – left shortage area/not practicing scope of practice of LMHP

Case is being referred to Legal for collection

Stephanie Ebke, dental student, – in-school buyout, payoff date 5/1/2015

Danial Hanlon, Dental – in-school buyout, PAID IN FULL 12/29/2014

Tamara Kenning, LMHP – defaulting, payments current

Tom Pratt, DDS – Paid-in-full (10/6/2014)

Andria Simons, med student – court judgment; has made several payments

Nick Woodward, DDS Ped – (left Nebraska after graduating...moved back to Nebraska and is now practicing in the Omaha metro area), payments current

**Loan Repayment** (Defaults – left shortage area for non-shortage area or left Nebraska)  
 Tiffany Contet, P.A. – had to resign for health reasons (5/2014); payments are current  
 Megan Faltys, M.D. – leaving shortage area as of 12/1/13; payments current  
 Paul Willette, M.D. (general surgeon) – left Nebraska, default 7/1/2013, Legal staff working  
 on collecting, no lawsuit filed yet

Marlene Janssen reported that the commission has enough funds to award a few loan repayment applicants currently on the waiting list with start dates set accordingly. This is the last year of the state’s biennium so any program funds not obligated by June 30, 2015 will be gone.

5. Closed Session
- Review Loan Repayment Applications
  - Discuss Student Loan Default Interpretation

Roger Wells moved to go to closed session at 3:46 p.m. Dr. Buhlke seconded the motion. Motion carried. YES: Buhlke, Craig, Goertz, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells. NO: None. Excused: Goodman, Piskorski, and Sitorius.

Marty Fattig announced that the Rural Health Advisory Commission would go into Closed Session at 3:47 p.m. to review the loan repayment applications and discuss the student loan default interpretation. Mr. Fattig asked Dr. Craig and guests to please wait outside the room. (Dr. Craig is applying for loan repayment.)

6. Open Session
- Motion(s) on Loan Repayment Applications

Dr. Buhlke moved to go to Open Session at 4:09 p.m. Dr. Rebecca Schroeder seconded the motion. Motion carried. YES: Buhlke, Goertz, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells. NO: None. Excused: Craig, Goodman, Piskorski, and Sitorius.

Jenifer Roberts-Johnson agreed to hold a meeting with appropriate DHHS staff to discuss the student loan default interpretation.

Roger Wells moved to approve the following loan repayment applications with estimated loan repayment start dates and loan repayment amounts as indicated or as determined by Office of Rural Health staff based on issuance of license and/or loan documentation:

<b>Applicant’s Name</b>	<b>Loan Repayment Start Date</b>	<b>Specialty</b>	<b>County (Town) of Practice</b>	<b>Total LR Amt. State &amp; Local</b>
Ladwig, Adam	03/01/2015	P.T.	Cedar County (Hartington)	\$20,004.00
Lanoha, Holly	03/01/2015	P.A. (FP)	Douglas County (Charles Drew CHC)	\$60,000.00
Baumert, Angie	03/01/2015	P.A. (FP)	Custer (Broken Bow), Sherman & Valley	\$60,000.00
Pierce, Rebecca	03/01/2015	Pharmacist	Thurston County (Pender)	\$60,000.00
Zimmerman, Jessica	03/01/2015	O.T.	Thayer County (Hebron)	\$60,000.00

Krikke, Amber	03/01/2015	P.A. (FP)	Burt County (Tekamah)	\$60,000.00
Harriger, Kevin	03/01/2015	N.P. (FP)	Morrill County (Bridgeport)	\$26,093.00

and move the following loan repayment applications to the waiting list due to state funds being obligated for this fiscal year:

<b>Applicant's Name</b>	<b>Estimated Loan Repayment Start Date</b>	<b>Specialty</b>	<b>County (Town) of Practice</b>	<b>Total LR Amt. State &amp; Local</b>
Miller, Hilary	08/01/2015	M.D. (FP)	Valley (Ord), Garfield, Sherman Cos.	\$120,000.00
Kuchar, Travis 0.9 FTE PART-TIME	07/01/2015	Pharmacist	Merrick County (Central City)	\$54,000.00
Beyer, Jonna Pending License	07/01/2015	P.A. (FP)	Kimball County (Kimball)	\$60,000.00
Bodyfield, Kasi	07/01/2015	Pharmacist	Valley (Ord), Sherman Cos.	\$43,231.00
Borrenpohl, Jessica (student loan obl. ends 1/31/16)	02/01/2016	P.A. (FP)	Jefferson Co. (Fairbury)	\$60,000.00
Craig, John	08/01/2016	M.D. (FP)	Kearney Co. (Minden)	\$120,000.00

Jessye Goertz seconded the motion. Motion carried. YES: Buhlke, Goertz, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells. NO: None. Abstained: Craig. Excused: Goodman, Piskorski, and Sitorius.

#### 7. Office of Rural Health/Primary Care Office Updates

Tom Rauner reported that one of the primary duties of the Primary Care Office is to designate federal shortage areas which have different criteria than the state-designated shortage areas. The Health Resources and Services Administration (HRSA) is implementing an online management system for federal shortage area designations this year. There will be delays in getting new shortage areas designated; however, HRSA has indicated current shortage areas will not lose their designation while the new process is being established.

Margaret Brockman reported that the Office of Rural Health received a National Health Service Corps (NHSC) State Loan Repayment Program (SLRP) grant effective September 1, 2014. Nancy Jo Hansen was hired to administer this grant and the Flex grant. (The Flex program provides funding to States for the designation of Critical Access Hospitals (CAHs) in rural communities.) Ms. Hansen began working at the Office of Rural Health in December 2014.

Nancy Jo Hansen stated that five SLRP awards have been made. Recipients include four physicians and one physician assistant. The SLRP grant is \$100,000 for each of the next four years. Recipients must practice in a federally designated shortage area. Marlene Janssen mentioned that SLRP recipients must practice a minimum of two years and may apply for two additional years. The SLRP award amount can be up to \$50,000 (\$25,000 federal SLRP funds plus \$25,000 community matching funds).

Margaret Brockman stated that the Office of Rural Health is working on an information sheet to put up on our webpage. This information sheet would show the different incentive programs and criteria for each program so staff may guide the health professional to the program that best fits and maximize state funds.

## 8. Other Business

Roger Wells reported on the National Advisory Commission of Rural Health and Human Services recent activities. This is Mr. Wells final year on this commission. He and, fellow commission member, Christina Campos, along with the Honorable Ronnie Musgrove were invited to meet with Sean Cavanaugh, Deputy Administrator and director of the Center for Medicare in Washington, D.C. The purpose of the meeting was to give insight to the healthcare delivery system in rural America. Four issues were identified which included (1) the 48-hour rule; (2) the 96-hour rule; (3) supervision requirements for outpatient services, and (4) reimbursement for Critical Access Hospitals (CAH) with the limitations identified in previous reform documents in 2012. According to Mr. Wells, this meeting provided a venue for understanding the delivery of rural health and the impact of changes made in Washington, D.C. which are counter to the intent of the rules.

At the previous RHAC meeting, the commission listened to a presentation from Dr. Dan Ullman and Dr. Mikel Merritt on the issue of creating a prescribing psychologist permit in Nebraska. Marlene Janssen reported that she attended the technical review committee for prescribing psychologists. One of the questions that was asked by the committee was “what medical entity says this proposal meets medical standards” and the answer given was there is not a medical body that has given a stamp of approval but physicians are included in the proposal being presented. For example, psychologist will be supervised by physicians and they will have limited formulary.

Another question that was raised is “is there a gap in service for patients needing mental health medication?” Dr. Rebecca Schroeder stated that if the patient wants to see a psychiatrist, yes, but the wait times are shorter for a nurse practitioner or physician assistant trained in psychiatry.

Marlene Janssen reported that the opposition stated on several occasions that “if psychologists want to prescribe they should go to medical school or a physician assistant or nurse practitioner program.”

Both groups mentioned the population base needed to support a prescribing psychologist and it was significant, like 10,000 or 15,000 or more for a viable practice. This population base is not available in rural areas of Nebraska. Marlene Janssen mentioned that a former RHAC member was on this technical review committee and understands the rural issue.

## 9. Adjourn

Roger Wells moved to adjourn at 4:37 p.m. (no second necessary – vote on immediately!) Motion carried. YES: Buhlke, Craig, Goertz, Kent, Mlnarik, Roberts-Johnson, Schroeder, and Wells. NO: None. Excused: Goodman, Piskorski, and Sitorius.