

Rural Health Association of Tennessee

September 10, 2019

Millennium Maxwell House Conference Center

Pigeon Forge, TN

Tennessee Legislative Initiatives

▶ Medicaid Expansion

- ▶ Idaho, Nebraska, and Utah all voted to expand Medicaid and passed
- ▶ Tennessee does not have the option of a ballot initiative (would require legislatively referred constitutional amendment), but we do have a new governor and new legislators who need to know that a majority of Tennesseans want to expand Medicaid

▶ Medicaid Work Requirements

- ▶ RHA of TN submitted a letter and provided public testimony on impact Work Requirements would have on rural providers

▶ Medicaid Reimbursement Proposed Rules (RHC & FQHC)

- ▶ TennCare Bureau withdrew proposed rules with future intent to revisit the topic with stakeholders

Tennessee Legislative Initiatives

▶ Medicaid Block Grant

- ▶ TennCare Bureau given 180 days to draft a submission to transition Medicaid into a Block Grant
- ▶ Tennessee will ask the federal government to block grant roughly half the cost of its Medicaid program
- ▶ Such an arrangement would be the first of its kind in the nation, and a political win for the Trump administration
- ▶ Lee said a draft of the plan will be unveiled in mid-September
- ▶ To meet the legislatively imposed deadline, the waiver must be submitted for review by Nov. 20
- ▶ Carving out roughly 50% of \$8 Billion current spend in the following services

Tennessee Legislative Initiatives

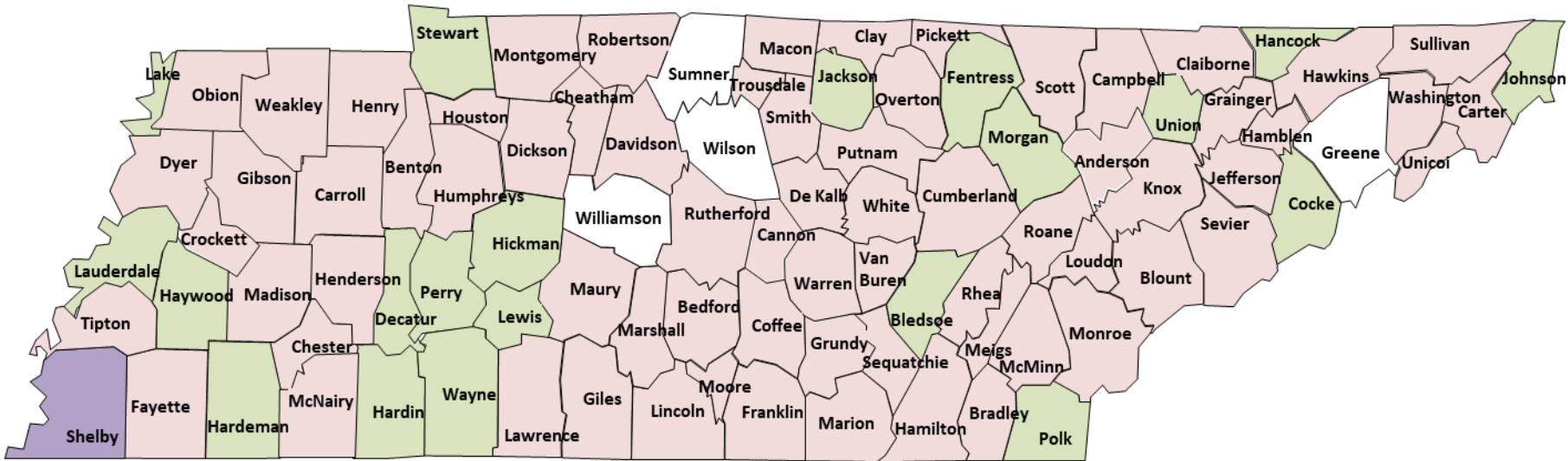
▶ Medicaid Block Grant Continued

- ▶ Carving out roughly 50% of \$8 Billion current spend in the following services
 - ▶ TennCare's administrative costs.
 - ▶ Uncompensated care payments to hospitals.
 - ▶ Prescription drugs.
 - ▶ Services through the Department of Intellectual and Developmental Disabilities.
 - ▶ Care for children in the custody of the Department of Children's Services.
 - ▶ Individuals dually eligible for TennCare and Medicare.
- ▶ Once details are released, TennCare will host a 30 day listening tour for public comments

Gov Lee's Healthcare Task Force

- ▶ Gov Bill Lee's Administration has hosted a series of Listening Meeting / Task Force Meetings throughout Tennessee
 - ▶ July 10 - Cleveland
 - ▶ July 24 - Clarksville
 - ▶ July 31 - Memphis
 - ▶ Aug 12 - Nashville
 - ▶ Aug 13 - Linden (Rural Opportunity Summit)
- ▶ Purpose was to hear from industry leaders from Provider, Payor & Patient perspective of ways to address issues in Rural Healthcare delivery, Healthcare Transparency & Healthcare Innovation
- ▶ In addition, during the week of Aug 12 National Healthcare partners from CDC, CMS, HRSA, FORHP & NRHA came to TN for a statewide tour of healthcare delivery systems to bring back ideas for grants, healthcare policy and advocacy

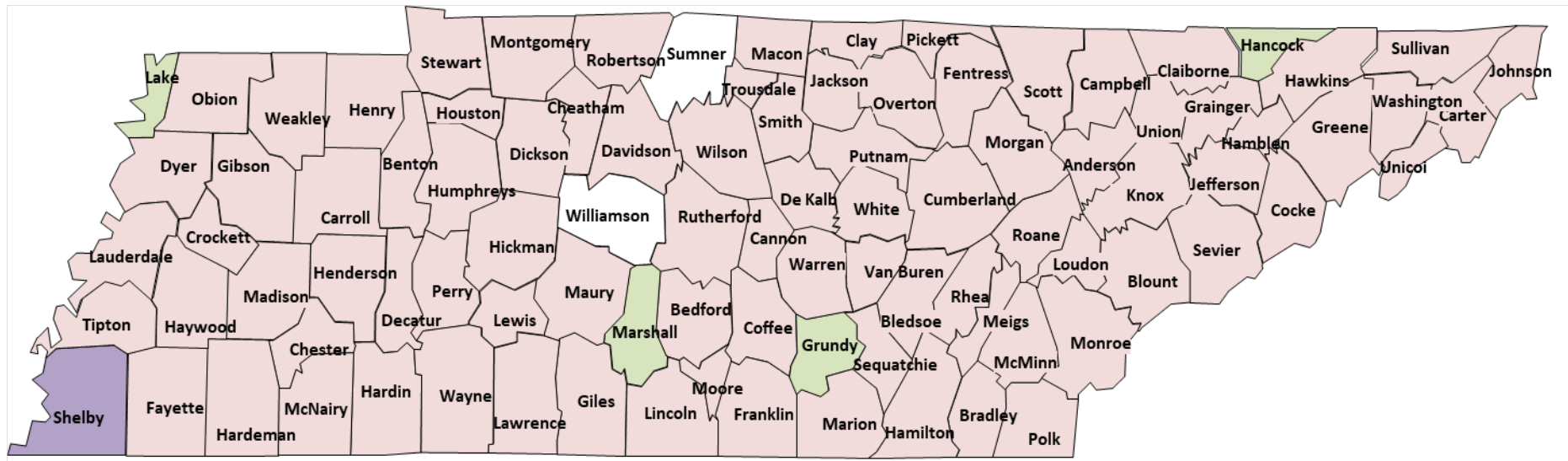
Federal Health Professional Shortage Areas Primary Care April, 2018



Designation : Whole County Low-Income Population Partial Low-Income Population Whole County Geographic

Data Source: Health Resources and Services Administration, U.S. Department of Health and Human Services, 2018

Federal Health Professional Shortage Areas Dental April, 2018



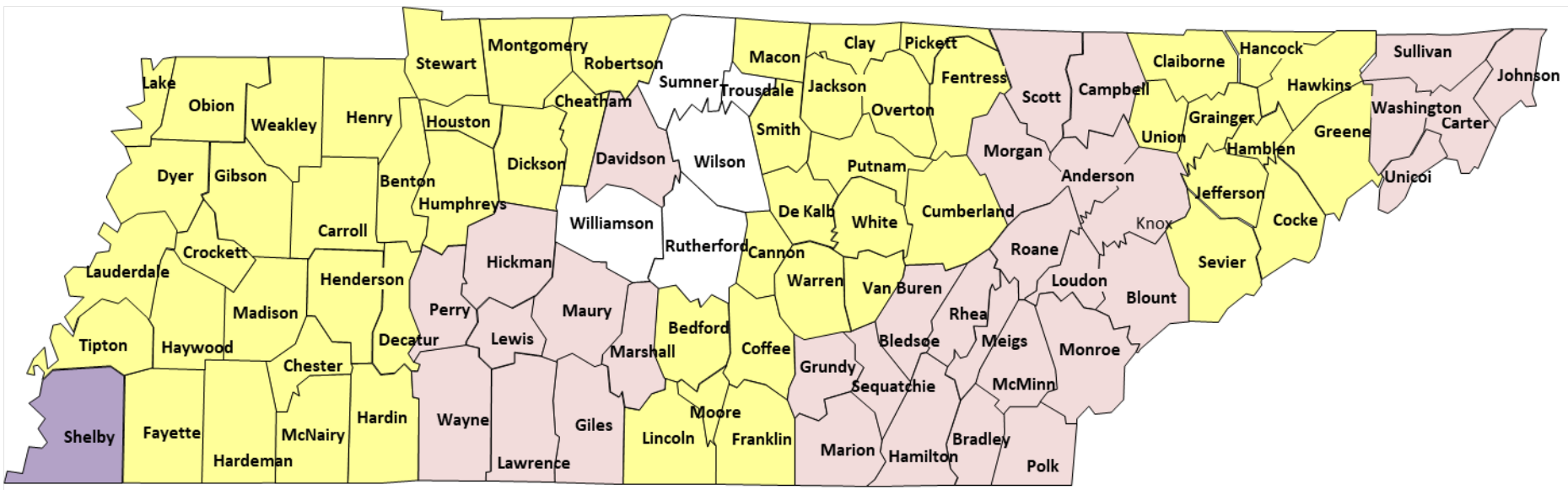
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Federal Health Professional Shortage Areas

Mental Health

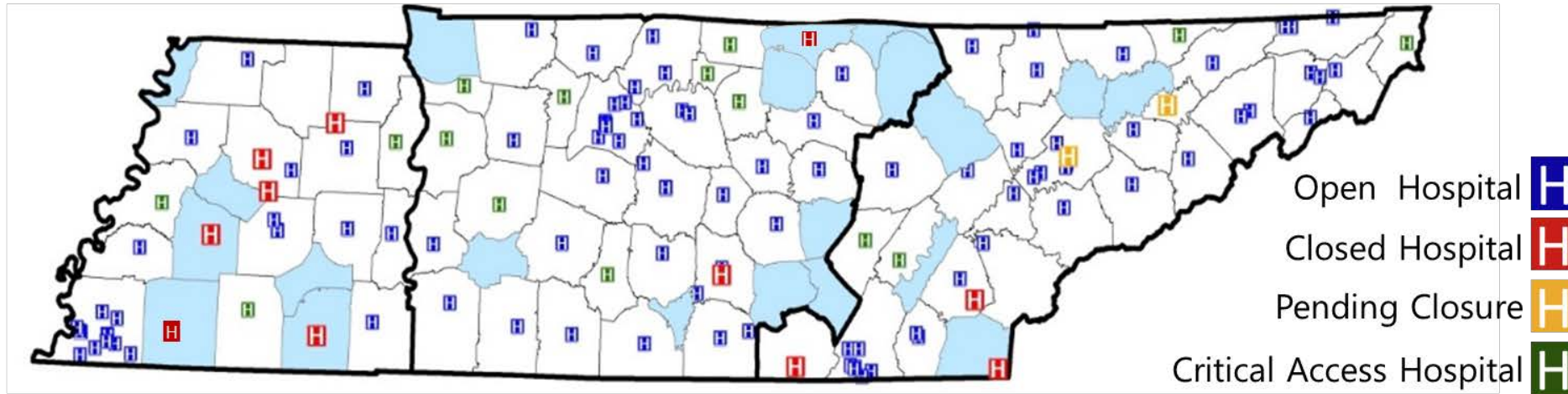
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TN Rural Hospital Closures 2013 - 2019



 20 TN Counties without a Hospital
Over 300,000 TN live in these Counties

- East TN: Grainger, Meigs, Morgan, Polk and Union
- Middle TN: Clay, Grundy, Jackson, Lewis, Moore, Pickett, Sequatchie, Stewart and Van Buren
- West TN: Chester, Crockett, Fayette, Haywood, Lake and McNairy
- Rural Hospitals provide well over \$100M annually in Charity Care as Safety Net Facilities in TN

Access to Health Care is a Challenge for Many in Tennessee...

...And the way we deliver health care—especially in rural areas—is changing, too.

Registration for Conference is open at WWW.RHAT.ORG/EVENTS

25th Annual Conference
November 20-22, 2019



Collaboration & Disruptive Innovations

What we have been doing may no longer fit.

Music Road Resort
Pigeon Forge, TN

Invite Your Friends To Join Us

Rural Health Association of Tennessee Membership



- | | | | |
|-----------------------|---------|---------------|-------------|
| ■ Association | ■ CAH | ■ Clinics | ■ CSH |
| ■ EMS | ■ FQHC | ■ Health Dept | ■ Hospitals |
| ■ University/students | ■ Other | | |

Fellow of Rural Health Assoc (FRHA) of TN

- ▶ Must have at least 3 years or rural-specific professional experience
- ▶ Must complete a minimum of 60 hours of Fellow Approved continuing education
- ▶ Must complete a Quality Improvement Project or Regulatory/Policy Position Paper
 - ▶ The Quality Improvement Project must create a benefit specific to one's respective community in rural Tennessee and must be presented in written format (a project paper). The project paper must be a minimum of 4 pages, use supporting literature or research, and contain results from the project.
 - ▶ Regulatory/Policy Position Paper must address emerging regulatory or policy initiative specific to rural health in Tennessee. The paper must be a minimum of 4 pages, use supporting literature or research and contain an impact analysis of the position on rural communities.
- ▶ To maintain Fellow status, must complete an additional 60 hours of Fellowship Approved continuing education over a 3 year period
- ▶ Recertification required every 3rd year
- ▶ \$100 application fee - submit applications to RHA of TN Board of Directors

Get Involved – Join a Committee

- ▶ Survey will be sent out following Annual Conference
- ▶ Opportunity to take part in following committees
 - ▶ Grand Division Committees (West, Middle & East TN)
 - ▶ Legislative Regulatory Policy Council
 - ▶ Annual Conference Planning Committee
 - ▶ Poster Subcommittee
 - ▶ Awards Subcommittee
- ▶ Consider Nomination to Board of Directors
 - ▶ 4 Board seats open in 2020
 - ▶ Must be member of good standing for 1 year prior to seeking nomination
 - ▶ Recommended prior committee/council experience
 - ▶ Recommended prior engagement with Assoc sponsored activities

Thank You For Your Support of OUR Assoc

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