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LRHA Update

Partial funding for this publication is provided through a federal grant from the Office Rural Health Policy (HRSA) and the Louisiana Department of Health and Hospitals Bureau of Primary Care and Rural Health

Volume XII, Issue III

March 2005

LRHA Mission Statement:

To serve as a unified voice for the promotion of rural health care through advocacy, education, and leadership.

The 2005 Poverty Guidelines

On April 18, 2005, the Department of Health and Human Services (DHHS) released the 2005 Poverty Guidelines in the Federal Register Vol. 70, No. 33. There are two slightly different versions of the federal poverty measure— the poverty thresholds and the poverty guidelines.



The poverty thresholds are the original version of the federal poverty measure. They are updated each year by the Census Bureau. The thresholds are used mainly for statistical purposes—for instance, preparing estimates of the number of Americans in poverty each year. (In other words, all official poverty population figures are calculated using the poverty thresholds, not the guidelines.) Poverty thresholds since 1980 and weighted average poverty thresholds since 1959 are available on the Census Bureau’s web site (<http://www.census.gov/hhes/poverty/threshld.html>).

The poverty guidelines are the other version of the federal poverty measure. They are issued each year in the Federal Register by the Department of Health and Human Services. The guidelines are a simplification of the poverty thresholds for use for administrative purposes—for instance, determining financial eligibility for certain federal programs. The full text of the Federal Register notice with the 2005 poverty guidelines is available on the following site: <http://aspe.hhs.gov/poverty/05fedreg.htm> and on the LRHA website.

The poverty guidelines are sometimes loosely referred to as the “federal poverty level” (FPL), but that phrase is ambiguous and should be avoided, especially in situations (e.g., legislative or administrative) where precision is important.

2005 HHS Poverty Guidelines

Persons in Family Unit	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$9,570	\$11,950	\$11,010
2	\$12,830	\$16,030	\$14,760
3	\$16,090	\$20,110	\$18,510
4	\$19,350	\$24,190	\$22,260
5	\$22,610	\$28,270	\$26,010
6	\$25,870	\$32,350	\$29,760
7	\$29,130	\$36,430	\$33,510
8	\$32,390	\$40,510	\$37,260
For each additional person, add	\$3,260	\$4,080	\$3,750

SOURCE: Federal Register, Vol. 70, No. 33, February 18, 2005, pp. 8373-8375.

See Poverty Guidelines, page 3

A View from the Field . . .

With the release of the Governor's proposed budget earlier this month, a huge projected shortfall in health care funds on the state and federal level, and a President's budget that could adversely affect rural health funding, it remains incumbent on us – as rural health leaders – to continue to communicate effectively with our leadership on both the state and federal level. For that reason, LRHA has instituted the use of CapWiz, a communication system that allows LRHA members to respond to action alerts and e-mails with a direct link to their state and federal legislators. I do hope you have had an opportunity to use this system and recognize the impact your communication has on the legislative system.



Donna Newchurch
Executive Director

DHHS also recently released the 2005 Poverty Guidelines. These new guidelines have implications for our members who have adopted a sliding fee scale in their facilities such as RHCs and FQHCs. A short summary of the new guidelines appears in this edition of the newsletter; a link to the complete DHHS release can be found on the LRHA website.

As you review this month's newsletter, I hope you will recognize the growth of the association and realize our growth is in response to your suggestions, needs, and the opportunities to address them. I look forward to continuing to serve the membership with input and guidance from you all.

Donna Newchurch
Executive Director

LRHA and HFMA Partner to Offer Provider Based RHC Education Event

Louisiana Rural Health Association will partner with Healthcare Financial Management Association (HFMA) to offer a provider based rural health clinic education event.

TriSpan's presentation will cover the basic, intermediate, and advanced billing issues faced by provider-based Rural Health Clinics. Topics include: Direct Data Entry (DDE) overview, specific clinic personnel requirements for specialized staff, range of services that rural health clinics can provide, and billing for preventive services.

In addition, the presentation will cover the Comprehensive Error Rate Testing program, Medicare Fraud and Abuse, and the TriSpan and CMS web sites. Information provided will include specific CMS internet only manual references and TriSpan Health Services' bulletins.

The presenter will be Parren Clark, the Outreach Partner in the Provider Outreach and Education Department of TriSpan Health Services.

More information on the date and location will be mailed out to all LRHA members in the next few weeks. If you have any question, please contact Paula Schouest at the LRHA office at (985) 369-3113.

Better Health for the Delta—Phase II

The Delta States Rural Development Network Grant Program through the Federal Office of Rural Health Policy awarded Southeast Louisiana Area Health Education Center (SELAHEC) funding for Phase II of Better Health for the Delta



Activities. Through Phase II activities, SELAHEC has identified parishes that are either contiguous or linked by similar services and "clustered" them for greater impact through planning. The Louisiana Rural Health Association was awarded grant funds to develop a multi-parish network to create a comprehensive strategic plan that identifies the methods to improve access to health care in each participating parish. The multi-parish network will be known as the Health Access Planning Network (HAPN). The network will be comprised of the following Delta parishes: Assumption, Iberia, Iberville, and Pointe Coupee. The following partners have committed to work together to form HAPN: Louisiana Rural Health Association (LRHA), Assumption Community Enrichment (ACE), St. Gabriel Community Health Clinic, HOPE Ministry of Point Coupee, and Iberia Comprehensive Community Health Center. HAPN will strive to develop a multi-parish health access improvement plan that will result in improved access to health care in the identified rural service areas creating a transformation of change in the quality of life of the residents of each participating parish.

The first Phase II site visit has been scheduled for Tuesday, April 26, 2005 at the Assumption Community Hospital in Napoleonville. All network partners have been invited to participate in the Phase II site visit.

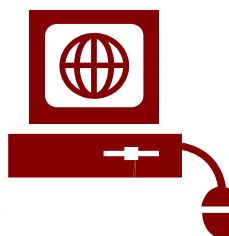
Any organization located in Assumption, Iberia, Iberville, and Pointe Coupee parishes that is interested in becoming a HAPN partner can contact Stacy Fontenot by calling the Louisiana Rural Health Association office at (985) 369-3813 or by emailing her at lrhahapn@bellsouth.net.

Website Offers Free Health Materials

Go to <http://www.healthyroadsmedia.org/> for more information.

Topics include abuse, asthma, dental health, cancer, diabetes, tuberculosis, high blood pressure, flu, exercise, health services, heart, immunization, nutrition, tobacco, and women's health.

This site contains free audio, written and multimedia health education materials in a number of languages. They are being developed to study the value of these formats in providing health information for diverse populations.



LRHA is Partnering with Unisys to Offer Training Workshops

LRHA is partnering with Unisys, the fiscal agent for Medicaid, to offer billing and coding training workshops for rural health clinics across the state. Mark your calendar now and plan to attend a workshop in your area.



April 28 (tentative)	Ruston, LA
May 26	Southeast AHEC Hammond, LA
June 28	DeQuincy Memorial Hospital DeQuincy, LA
July 26	Baton Rouge Area Foundation Baton Rouge, LA

The LRHA membership will receive detailed information about these workshops in the next few weeks. Please contact Paula Schouest at the LRHA office for more information (985) 369-3113.

Louisiana ACT 885 Automated External Defibrillator (AED) Summit

According to Senate Bill 100/ACT 885 passed in the 2004 legislature session, "The legislature of Louisiana finds that each year more than three hundred fifty thousand Americans die from out-of hospital sudden cardiac arrest. More than ninety-five percent of these Americans die, in many cases, because a lifesaving defibrillator did not arrive at the scene of the emergency in time." Therefore, on February 14, 2005, the Bureau of EMS held a meeting at the Baton Rouge Area Foundation to begin addressing concerns, issues, and recommendations for rules and regulations specific to ACT 885. ACT 885 requires physical fitness facilities and institutions of higher education that compete in intercollegiate sport contests to have an automated external defibrillator on its premises; and to provide for related matters. Nancy Bourgeois, BSN, Director of Emergency Preparedness/ Response, provided the history of automated external defibrillators (AED's). A second steering committee meeting was held on March 7th, 2005 to solicit input from interested parties to continue the rule making process. Louisiana Rural Health Association is excited to be on the AED steering committee and we look forward to working with the Bureau of EMS to draft definitions, policies and procedures for ACT No. 885.

As a member of LRHA, if you would like to participate on the committee, contact Stacy Fontenot, LRHA Project Coordinator at (985) 369-3813.

Poverty Guidelines (continue from page 1)

The separate poverty guidelines for Alaska and Hawaii reflect Office of Economic Opportunity administrative practice beginning in the 1966-1970 period. Note that the poverty thresholds — the original version of the poverty measure — have never had separate figures for Alaska and Hawaii. The poverty guidelines are not defined for Puerto Rico, the U.S. Virgin Islands, American Samoa, Guam, the Republic of the Marshall Islands, the Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, and Palau. In cases in which a Federal program using the poverty guidelines serves any of those jurisdictions, the Federal office which administers the program is responsible for deciding whether to use the contiguous-states-and-D.C. guidelines for those jurisdictions or to follow some other procedure.

The poverty guidelines apply to both aged and non-aged units. The guidelines have never had an aged/non-aged distinction; only the Census Bureau (statistical) poverty thresholds have separate figures for aged and non-aged one-person and two-person units.

Programs using the guidelines (or percentage multiples of the guidelines — for instance, 125 percent or 185 percent of the guidelines) in determining eligibility include Head Start, the Food Stamp Program, the National School Lunch Program, the Low-Income Home Energy Assistance Program, and the Children's Health Insurance Program. Note that in general, cash public assistance programs (Temporary Assistance for Needy Families and Supplemental Security Income) do NOT use the poverty guidelines in determining eligibility. The Earned Income Tax Credit program also does NOT use the poverty guidelines to determine eligibility. For a more detailed list of programs that do and don't use the guidelines, go to <http://aspe.hhs.gov/poverty/faq.shtml#programs>.

The poverty guidelines (unlike the poverty thresholds) are designated by the year in which they are issued. For instance, the guidelines issued in February 2005 are designated the 2005 poverty guidelines. However, the 2005 HHS poverty guidelines only reflect price changes through calendar year 2004; accordingly, they are approximately equal to the Census Bureau poverty thresholds for calendar year 2004. (The 2004 thresholds are expected to be issued in final form in August 2005; a preliminary version of the 2004 thresholds is now available from the Census Bureau.)

A more extensive discussion of poverty guidelines is available on the Institute for Research on Poverty's web site at <http://www.irlp.wisc.edu/faqs/faq7.htm>.

If your organization has an article or activity coming up that you would like published in the LRHA Update, please contact Paula Schouest at (985) 369-3113 or lrhaeducation@bellsouth.net.

Spring Education Event Held in Bossier City

The Louisiana Rural Health Association held its 3rd annual Spring Education Event, March 8 – 9, 2005 in Bossier City at the Horseshoe Casino and Hotel. Over 100 people, including participants and speakers attended the seminar.



As we begin to tally the evaluations from the event, it appears that an overwhelming majority of participants rated the conference as excellent. With such an excellent participation level, it is evident that the rural health community is looking for pro-active solutions to everyday challenges. LRHA strives to be responsive by providing members with education and opportunities to meet with their peers to work together and overcome these challenges.



*Alan Morgan
Interim Director
National Rural
Health Association*

The educational event was kicked off on March 7, 2005 with a Critical Access Hospital Advisory Committee Meeting held by the Bureau of Primary Care and Rural Health. The two-day educational event that followed offered members legislative updates, national updates and factors specific to the rural health care delivery. The meeting focused on and provided education with ample opportunities for networking with colleagues and rural health leaders.



LRHA's 2005 Partnership Sponsors were honored with plaques presented by Wayne Arboneaux, President and Donna Newchurch, Executive Director. Those honored were: McNeary, Inc, Diamond Partner; HSLI/The Benchmark Agency, Platinum Partner; LHC Group, Gold Partner; and Compass Healthcare, Inc., Bronze Partner. We'd also like to thank the following organizations for their support and contributions specific to the Spring Education Event: Correct Care Physician Staffing Service, Gachassin Law Firm, LA Department of Health and Hospitals, Bureau of Primary Care and Rural Health, The LHC Group, and Southwest Louisiana AHEC/Americorps.



*Wayne Arboneaux
LRHA Board
President*

If you were unable to attend, but would like to receive additional information or copies of session handouts, please call the LRHA office at (985) 369-3813 or email Erin Watson, lrhamembership@bellsouth.net.

LRHA Sponsors



McNeary, Inc. 2005 Diamond Sponsor

Pictured are Donna Newchurch, LRHA Executive Director and Brad Fife, McNeary Vice President.

McNeary, Inc. has been a leading provider of business insurance to hospitals and related healthcare providers since 1964. With offices in Charlotte, Atlanta, Orlando and Baton Rouge, McNeary is the southeast's largest hospital insurance specialist with over 250 clients and the endorsements of the North Carolina, Georgia and Florida Hospital Associations.

HSLI / The Benchmark Agency 2005 Platinum Sponsor

Pictured are Garrett Lejeune, HSLI Vice President, Donna Newchurch, LRHA Executive Director and Cindy Dolan, HSLI President and CEO



HSLI, service agent for the LHA Trust Funds since 1984, is a third party administrator providing claims administration for Malpractice, General Liability, Worker's Compensation, and Risk Management/Safety services to the health care industry. Benchmark is a licensed Louisiana insurance agency specializing in the retail sale of life, health, employee benefits, and property and casualty coverage.

LHC Group 2005 Gold Partner

Pictured are George Wyatt, Director of Business Development, Donna Newchurch, LRHA Executive Director, and Liz Regard, Area Manager



LHC Group operates Home Health Agencies, Long Term Acute Care Hospitals, Inpatient/Outpatient Rehabilitation, and Hospice Agencies. LHC Group is constantly looking for quality opportunities, i.e. Joint Venture opportunities, to expand its services.

Compass HealthCare, Inc. 2005 Bronze Partner

Pictured are Donna Newchurch, LRHA Executive Director, and Michelle Hughes, Compass Director of Business Development



Compass Healthcare is a comprehensive provider of inpatient psychiatric and inpatient rehabilitation services. They feature a short-term consultation package for distinct part units which include a comprehensive analysis of marketing, operational, and clinical functions along with recommendations.

Universal Services Update: Are You Missing Out?

Many of Louisiana's rural health care providers aren't taking full advantage of the Federal Communications Commission's Universal Services program. The program is designed to ensure that these providers don't pay more than their urban counterparts for telecommunications essential to the provision of services. The Rural Health Care Corporation is authorized to provide \$400 million annually to eligible entities, a number far above actual applications for support.



What's New?

The Commission has taken steps to increase use of the program. Recent changes adopted by the Commission:

- Redefinition of "rural" to include areas previously ineligible due to their proximity or inclusion on Metropolitan Statistical Areas.
- Increased discounts for purchase of mobile satellite communications services supporting mobile clinics.
- Streamlining the application process by setting an annual June 30th deadline for applications.
- Launch of a further rulemaking to examine whether a flat 25% discount for internet services is sufficient and whether infrastructure should be funded under the rural health care mechanism.

What's Covered?

As bandwidth hungry applications and services are on the rise, it pays to know the intricacies of what's eligible for subsidy. The program provides support for the difference between what a telecommunications service cost in a rural area, and what it would cost in an urban area. The difference in cost to provide the same service to a rural provider is the eligible amount. It's also good to know that there's no limit to the number of eligible telecommunications circuits included in the program. Eligible services include but are not limited to: mileage related charges, T1, T3, ISDN, frame relay, ATM, off-prem extensions, satellite services, Centrex, dedicated private lines, one-time (Installation) charges, 25% of internet services and charges.

What's Your Hourly Rate?

Spending several hours stepping through the application process could net you thousands every year. That's a hefty rebate you can't get many other places and very good return on the time it takes to apply.

To check out the program, go to <http://www.rhc.universalservices.org> or call 1-800-229-5476.

LRHA Receives National Rural Health Association Grant on Rural Health Care Quality

Louisiana Rural Health Association was awarded \$9500 by the National Rural Health Association to focus on promoting health care quality in rural America.



This grant is part of *Quality Through Collaboration: The NRHA Quality Initiative* and is aimed at helping state rural health associations implement the following recommendations of the recent Institute of Medicine Report *Quality Through Collaboration: The Future of Rural Health*:

- Establish a stronger quality improvement support structure to assist rural health systems and professionals
- Enhance human resource capacity of rural communities
- Ensure the financial stability of rural health care systems
- Build information and communications technology infrastructure
- Address personal and population health needs at the community level

LRHA proposes to use the grant funds to establish a stronger quality improvement support structure in Louisiana to assist rural health systems and professionals and enhance human resource capacity of rural communities. This will be accomplished by providing rural health leaders with information on how quality through collaboration can positively impact rural health in Louisiana at a statewide event to be held in at the end of the year.

The list of awardees includes:

- Louisiana Rural Health Association
- Arizona Rural Health Association
- Colorado Rural Health Center
- Florida Rural Health Association
- Nebraska Rural Health Association
- New England Rural Health Roundtable
- Ohio Rural Health Coalition
- Rural Health Association of Utah

"The NRHA is excited to support the initiatives of state rural health associations in furthering quality in rural America", said Alan Morgan, Interim Executive Director of the NRHA. "State rural health associations are an important partner with the NRHA in providing information on quality care to rural communities."

For more information on the grant award, please contact Paula Schouest at (985) 369-3113.

State Grants Management Section Regional Conferences



The States Grant Management Section of the Louisiana Office of Community Development has scheduled their first regional training conferences. As a service to state agencies, local governments and non-profit organizations, the conferences will provide

prospect research and grant writing training free of charge. During the conferences, attendees will go through a tree hour seminar on prospect research, a six hour seminar on grant writing and a three hour seminar of one-on-one attention regarding request for funding proposals (RFPs). The attendees are encouraged to bring a RFP related to their organization to analyze with the presenters during the last seminar of the conference. The first six regional conferences have been confirmed around the state and are listed below. Contact the State Grants Management Section at 225-342-7412 for more information or to sign up for the conferences.

When	District	Place
April 18-19	Lafayette	Chenier Center
May 23-24	Monroe	Louisiana Tech University, Ruston
June 6-7	Lake Charles	Jennings Convention Center
July 18-19	Shreveport	Minden
August 15-16	Alexandria	Pineville Town Hall
September TBA	Houma	TBA
October 6-7	New Orleans	TBA

The State Grants Management Section provides grant assistance to state agencies, local governments, and non-profit organizations in an effort to increase the awareness of federal and foundation funding in Louisiana. In addition to the regional conferences, the State Grants Management Section is in the process of creating a website to provide an in depth look at the function of the section. Also, grant writing assistance has become a focus of the section as they have been assisting organizations in writing and reviewing grants. For more information about the functions of this section, contact the State Grant Management Section at 225-342-7412.

Louisiana's Rural Hospitals Are Answering the Call

(Napoleonville, LA) – Louisiana Access to Benefits Coalition, a statewide partnership between rural health providers, Louisiana Department of Insurance and Louisiana Rural Health Association, has picked up steam with the recruitment of 13 rural hospitals throughout the State. The Coalition, being spearheaded by Louisiana Rural Health Association, is working to educate rural Louisiana Medicare beneficiaries about Medicare's Prescription Drug Discount Card and Part D starting January 2006.



Each rural hospital that has signed-on recognized the unique opportunity to make a difference in their community by reaching out to and educating Medicare beneficiaries with lower incomes about Medicare's new prescription drug savings program including the annual \$600 credit. According to Mark Chustz, Administrator of West Feliciana Parish Hospital, "Correctly prescribed, information becomes medicine – powerful medicine. Louisiana ABC allows us to provide this important information about Medicare's new prescription drug benefit to our older residents." In bringing ABC to Bunkie, Don Kannady, Administrator at Bunkie General Hospital stated, "We are always looking for ways to improve the access to quality healthcare in our community. That is why we are working with Louisiana ABC - educating our older neighbors about Medicare's new prescription drug benefit."

Similarly, Paula Walker, RT, BSN, RN/CEO at Franklin Medical Center acknowledged, "We feel that education related to the Medicare Prescription Drug Bill is very important for our Medicare recipients with lower incomes in Franklin Parish. We believe that Louisiana ABC will offer personal empowerment to make informed decisions. Knowledge can be a powerful tool, and we are anxious to begin this program in Franklin Parish with the assistance of our community."

Currently expressing an interest in working with Louisiana ABC Coalition are Assumption Community Hospital, Citizens Medical Center, Allen Parish Hospital, Morehouse General Hospital, West Feliciana Parish Hospital, Bunkie General Hospital, Richardson Medical Center, Natchitoches Parish Hospital, LaSalle General Hospital, Jackson Parish Hospital, Riverland Medical Center, Lincoln General Hospital, and Franklin Medical Center. However, there are still areas of the state that have not been covered. If your facility wants to avail itself of this free community service, please contact Erin Watson at the LRHA office at (985) 369-3813 or e-mail lrhamembership@bellsouth.net.

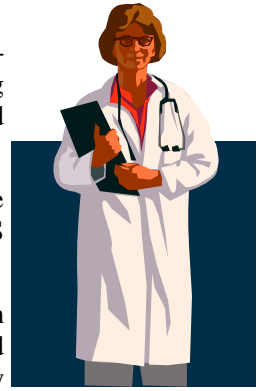
CMS Proposes New Program for Physician Administered Drugs

Proposed Rule Could Ease Burden on Physicians

Physicians who administer drugs in their offices to Medicare beneficiaries under Medicare's Supplementary Medical Insurance Program (Part B) could have the option of an alternative process for obtaining those drugs under a proposed rule issued on February 26, 2005 by the Centers for Medicare & Medicaid Services (CMS).

"This proposed competitive acquisition program offers physicians an option that could save them time and paperwork, while creating a competitive environment for the acquisition of Part B drugs," said CMS Administrator Mark McClellan, M.D., Ph.D.

Under the proposed rule, physicians could choose to obtain physician-administered Part B drugs from competitively selected vendors, who would then bill Medicare directly. Alternatively, physicians could choose to continue to purchase drugs directly in the market, as they do now, and be paid directly by Medicare.



The proposed rule deals only with drugs that are covered under Medicare Part B that are not a part of the Medicare prescription drug benefit that takes effect on January 1, 2006. The competitive acquisition provision, required by the Medicare Modernization Act of 2003, will become available for services beginning on or after January 1, 2006.

A vendor wishing to participate in the competitive acquisition program would have to submit a bid to Medicare for supplying drugs administered in a physician's office. To be eligible for a contract, a vendor would first have to demonstrate that it meets rigorous standards set out in the proposed regulation for quality, program integrity, financial stability, and service. After meeting those standards, winning vendors would be selected based on their bid price.

For physicians choosing to participate in the program, obtaining drugs from a vendor is simple and efficient. After enrolling with one of the winning vendors, physicians would order drugs needed for specific beneficiaries from the vendor, and administer them to the beneficiaries. The physician would not bill Medicare for drugs but would bill Medicare only for the administration services. The vendor, rather than the physician, would bill Medicare for the drugs and would be responsible for collecting any deductibles and coinsurance from the beneficiary.

Some physicians indicate that collecting coinsurance and deductibles is a burden to them and the beneficiaries they serve. By electing to obtain drugs from a vendor, a physician would no longer need to collect beneficiary coinsurance and deductibles for these drugs.

Currently, a physician purchases drugs for a beneficiary from a distributor or manufacturer. The physician then bills Medicare for the drug, which, in most cases, has a statutorily mandated payment rate of 106 percent of the manufacturer's average sales price (ASP). Medicare pays 80 percent of this rate, and the physician must collect a 20 percent coinsurance from the beneficiary.

Under the proposed rule, physicians will be given an opportunity once a year to elect to participate in the program and to choose a vendor to be the physician's sole source for the selected categories of Part B drugs. The proposed rule would allow a physician to obtain drugs elsewhere under specified emergency circumstances. For administering Part B drugs, a physician who obtained drugs from a vendor would receive the same Medicare payment as a physician who purchased drugs in the market.

The proposed rule specifically invites public comment on the drug categories to be included in the program, as well as the designation of competitive acquisition areas.

The proposed rule was published in the March 4 *Federal Register*. Comments will be accepted until April 26. The competitive bidding process will begin after a final rule is published by CMS later this year.

LRHA Member Satisfaction Survey

Membership Satisfaction Surveys have been sent to our membership through MagnetMail, our e-communication system. We have also have inserted the survey in the newsletter. Please take a few minutes to complete the survey and either submit it by email or fax it to the LRHA office at (985) 369-3630.

LRHA thanks you for giving us the ability to serve you as a member. We are working very hard to develop services and provide resources to assist our members. We appreciate your membership and want to make sure that your highest expectations are met. If you have any questions regarding the survey, please contact Paula Schouest at the LRHA office at (985) 369-3113.

Important Dates

April 2005

- April 4 Regional Health Consortium Meeting—Region 2
- April 6 Community-Based and Rural Health Program
Technical Grant Writing Support Session (Baton Rouge)
Bureau of Primary Care and Rural Health Annual Reception
(Baton Rouge)
- April 7 Grant program Applications
Program Development Workshop (Baton Rouge)
- April 11 Regional Health Consortium Meeting—Region 3
- April 12 Regional Health Consortium Meeting—Region 4
- April 18 Regional Health Consortium Meeting—Region 1
- April 20-21 Critical Access Hospital Regional Conference (Gulfport, MS)
- April 25 Legislative Session Begins
- April 26 Better Health for the Delta Phase 2 Site Visit
(Assumption Community Hospital, Napoleonville)
- April 28 Unisys Billing Workshop (Ruston, LA-tentative)

May 2005

- May 9 Regional Health Consortium Meeting—Region 3
- May 10 Regional Health Consortium Meeting—Region 4
- May 17 Regional Health Consortium Meeting—Region 7
- May 19-21 NRHA Annual Conference (New Orleans)
- May 23 Regional Health Consortium Meeting—Region 1
- May 26 Unisys Billing Workshop (Southeast AHEC, Hammond, LA)

For details on any of the dates, please contact Paula Schouest at the LRHA office at (985) 369-3113.

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