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LRHA Update

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LRHA Mission Statement:

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

CMS Releases Necessary Provider Ruling

CMS released its final rule on IPPS which includes instructions on CAH relocation and rebuilding. The final rule defines how a Critical Access Hospital (CAH) that was designated by a State as a "necessary provider," can retain that status after relocating its facility.

The Medicare Modernization Act of 2003 eliminated the authority of states to designate CAHs as "necessary providers." This designation allowed a CAH to be situated less than 35 miles from the nearest hospital. However, the MMA did not specify how existing CAHs with necessary provider status should be treated if they relocate. In response to comments, CMS is allowing a necessary provider CAH to relocate if the facility in its new location meets all three of the "75-percent" criteria. That is, 75 percent of the patients must come from the same service area as before the relocation; 75 percent of the services must be the same as at the prior facility; and 75 percent of the staff must be the same as at the prior facility.

"The Louisiana Rural Health Association worked with its membership and submitted formal comments and recommendations to CMS during the open comment period," stated Donna Newchurch, LRHA Executive Director. She continued, "the elimination of the time and distance requirements in the rule will enable all CAHs and their communities to make appropriate decisions on a timely basis."

CMS did not adopt provisions in the proposed rule that would have set a date by which a CAH must notify CMS of its intent to relocate or would have required that construction plans were under way prior to the enactment of the MMA. The final rule appeared in the August 12, 2005 Federal Register and can be found at www.cms.hhs.gov/providers/hipps/cms-1500f.pdf; the relevant pages are 779-793 and 867-869. The new policies and payment rates will become effective October 1, 2005.

St. James Parish Hospital, located in Litcher, would have been adversely affected by the prior IPPS rule and will now move forward with construction as planned. "Everyone at SJPH was excited to learn that CMS had changed the more stringent guidelines for the relocation rule. This means that we can move forward with the building of the replacement hospital and we plan to break ground in October 2007. More importantly, though, this change means hope for the rural hospitals in our state who had not yet begun to plan major projects," stated Joan Murray, Administrator, St. James Parish Hospital.

As evidenced by the 75% rule, CMS has made the preservation of quality patient care its only requirement for the relocation/reconstruction of a CAH.

A View from the Field . . .

While the title of my monthly column reflects my thoughts, it is also a literal description of the view from my office window. I have the exceptional opportunity to serve members of the Louisiana Rural Health Association but also the opportunity to live in a rural community.



Donna Newchurch
Executive Director

For the last three weeks, I have been watching from my office window our local farmers plant sugar cane for next year's harvest. Their efforts are, in many ways, much like those of our members, board of directors, and staff. Returns on our efforts are not often immediately available and sometimes take months to appear.

That was not the case, however, in our efforts to address the necessary provider regulation in the CMS IPPS rule. With the assistance of rural hospital administrators and board participation, we were able to communicate and justify to CMS the reasons why changes allowing for relocation of CAHs should be allowed. I applaud each of you who submitted a letter to CMS specific to the rule, thank those of you who contributed anecdotal information to me for our comment letter, and congratulate those of you who will benefit from the rule—not just the administrators and providers of CAHs but rural citizens as well.

We are continuing to move forward in our efforts to positively effect change in a different arena through our Quality Improvement Initiative. With the panel members in place and our first statewide meeting to be held September 1, we are already creating a system for proactive responses as opposed to reactive responses. I encourage you to join us.

One final reminder—and some dates to add to your planner—the fall conference will be held in Lafayette on October 9—11. The agenda is quite impressive and I thank Linda Welch, Chris Vidrine, Kristy Nichols, and Beth Millet for developing the program and identifying speakers and topics. More information about the conference is available in this edition of the update. I hope you will join us in October. I look forward to seeing you then,

Donna Newchurch
Executive Director

Medicare Part D Approaches & Outreach Efforts Continue

The Health Access Planning Network is a multi-parish partnership dedicated to developing a health access improvement plan specific to reducing the costs of prescription drugs for residents of Assumption, Iberia, Iberville and Pointe Coupee parishes. In response to the overwhelming requests for information regarding the Medicare Prescription Drug Plan which will begin on January 1, 2006, Stacy Fontenot, HAPN Coordinator, along with network partners scheduled and held educational workshops for Medicare beneficiaries. Erin Watson, LRHA Member Services Coordinator, presented the Medicare Part D Basics to seniors of Iberia, Vermilion, and Assumption parishes. A presentation was also made to the resident pharmacists of Assumption parish. This meeting targeted information specific to the pharmacists' role in the transition on Part D. Through this medium, LRHA was able to visit two local pharmacies providing individual counseling to beneficiaries exclusive to each person's unique situation. LRHA has also partnered with the Social Security Administration (SSA) and participated in two of their SSA sponsored events held in August, and plan to continue this effort throughout rural areas of Louisiana. If you are interested in holding an educational workshop in your facility, please contact Stacy or Erin at the LRHA office by calling (985) 369-3813.

The Louisiana Rural Health Association would like to recognize the resources and sources of support for these efforts. They include Southwest Louisiana Area Health Education System through a grant from Americorps, Southeast



Louisiana Area Health Education Center through a grant from the Federal Office of Rural Health Policy, the Louisiana Department of Insurance, Senior Health Insurance and Information Program through a contract with CMS, and the members and supporters of LRHA. It is through joint efforts and leveraging resources that much success has been and will continue to be realized.

Mark Your Calendars!

**2005 Rural Health Conference
Positioning to Lead: Rural Health in Louisiana
October 9—11, 2005**

LRHA Partners With Unisys and TrailBlazer Offers Billing Workshops

In response to member requests for education specific to reimbursement, LRHA partnered with Trailblazer and Unisys to offer these types of workshops for Rural Health Clinics and Federally Qualified Health Centers. The Trailblazer billing workshop was held on July 20, 2005 and the Uni-



Pamela Bellows with Trailblazer

sys billing workshop was held on July 26, 2005. Both events were held at the Baton Rouge Area Foundation

and were well attended and highly successful. Evaluations received from participants returned remarkable feedback.



Workshop Attendees "in Action"

LRHA would like to publicly thank Pamela Bellows with the TrailBlazer Health Enterprises and Erin McAlister of Unisys for providing a wealth of information for those members who were able to attend the workshops. In an effort to continue meeting the needs of the membership, LRHA will be developing outreach workshops specific to member requests. If you are interested or have any suggestions, please call the LRHA office at (985) 369-3813.

Healthy People 2010 Midcourse Review

HHS is inviting comment on the proposed changes to the *Healthy People 2010* objectives through the Midcourse Review. To view the proposed changes, go to www.healthypeople.gov/data/midcourse/comments/objectives.



Healthy People 2010 provides a set of 10-year evidence-based health objectives for improving the health of all Americans. Its two overarching goals are to increase the quality and years of healthy life, and to eliminate health disparities. *Healthy People 2010* serves as a model for state and international disease prevention and health promotion plans, and covers 28 focus areas with 467 specific objectives.

Midway through the decade, a Midcourse Review assesses the status of the national objectives. The Midcourse Review is the process through which the U.S. Department of Health and Human Services, Federal agencies, and other experts assess the data trends during the first half of the decade, consider new science and available data, and make changes to ensure that *Healthy People 2010* remains current, accurate, and relevant.

The proposed changes to the *Healthy People 2010* objectives take the form of: establishing baselines and targets for formerly developmental objectives; changing the language of objectives and subobjectives; deleting objectives and subobjectives; adding of new subobjectives; and revising baseline and targets.

Public comment on the proposed changes is open from 9:00 a.m. August 15 through 5:00 p.m., Eastern Daylight Time, September 15, 2005 and can be made by going to www.healthypeople.gov/data/midcourse/comments/account.asp.



Member Input Wanted and Welcome!

Contributions to the *LRHA Update*

by members are encouraged and welcome.

If you would like to submit an article for inclusion in the *Update*, simply forward your article or comments to Jeanne at the LRHA Office lrhaoffice@bellsouth.net

**2005 RURAL HEALTH CONFERENCE
POSITIONING TO LEAD:
RURAL HEALTH IN LOUISIANA**

The Louisiana Rural Health Association, the Louisiana Hospital Association, the Rural Hospital Coalition, and the DHH Bureau of Primary Care and Rural Health are pleased to invite you to participate in the 2005 Rural Health Conference to be held October 9 – 11, 2005 at the Hilton Hotel, in Lafayette, Louisiana.

Positioning to Lead: Rural Health in Louisiana — Gain new insights, direction, and discover opportunities for your organization and community, hear dynamic speakers from across the country, and network with state and federal leaders as well as colleagues and vendors. A registration form for the conference is included in this publication. The conference will provide rural health care professionals with an opportunity to gain insight into current state trends and policy while exploring opportunities related to partnerships. All sessions will focus on education of participants with opportunities for interactive dialogue while encouraging a multi-disciplinary approach to improving rural health systems.

Registration Forms have been mailed to all LRHA members and are available on the LRHA website at www.lrha.org.

Questions regarding the conference may be directed to Erin Watson or Adrienne Naquin of LRHA by calling (985) 369-3813.

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Louisiana Rural Health Association
Post Office Box 387
Napoleonville, LA 70390
(985) 369-3813 fax (985) 369-3630

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