



# Think Big. Act Rural.

## Rural Health Conference 2019

Sunday River | Newry, Maine | Nov. 6-7

### CONFERENCE AGENDA

## Schedule At-A-Glance

Wednesday	Thursday
11:00-12:00 Registration and Continental Lunch	7:00-8:00 Registration and Continental Breakfast
12:00-1:00 Keynote Address	8:00-8:30 Membership Meeting
1:00-2:45 Federal Panel & Small Group Discussions	9:30-9:00 Break
2:45-3:15 Break	9:00-11:00 Breakouts (see below)
3:15-5:15 Breakout Sessions (see below)	11:00-12:00 Brunch
5:30-7:30 Reception, Small Plate Dinner, Entertainment	12:00-2:15 Breakout Sessions (see below)

*Note: This is a draft agenda that is subject to change.*

### Wednesday 3:15-4:15

**Ready, Steady, Balance: Effective Strategies to Reduce Falls in Older Adults** Falls are a threat to the health and wellbeing of older adults. Evidence-based fall prevention programs can dramatically reduce one's fall risk. This workshop will discuss innovative strategies to effectively screen and refer individuals into sustainable fall prevention programs in rural communities. *Dawna Pidgeon, Dartmouth Hitchcock Medical Center (DHMC), NH and Renee Pepin, Dartmouth Centers for Health and Aging, NH*

**The Oxford County Resiliency Project: Creating and Sustaining Trauma-Informed Schools** The Oxford County Resiliency Project has focused on engaging and empowering youth, to promote resiliency and healthy coping strategies. With a focus on our public-school system, this project has identified the need for increased behavioral health support within schools, providing consultation regarding the impact of trauma on learning, behavior and social-emotional health. *Stephanie LeBlanc, Oxford County Resiliency Project, ME and Brendan Schauflyer, Oxford County Wellness Collaborative, ME*

**Developing Rural Health Competencies in Colleges of Nursing** The health disparities that persist among rural populations can in large part be attributable to lack of access to healthcare providers and agencies. Colleges of Nursing are uniquely suited to address these disparities by focusing on the needs of this vulnerable population with special courses and content. *Maeve Howett, College of Nursing, UMass Amherst, MA*

**Innovative Approaches to Expanding Opioid Addiction Treatment in Rural Communities** Opioid addiction has reached epidemic proportions in the US, particularly in rural areas struggling with limited treatment options. This talk will focus on evidence-based methods for expanding delivery of life-saving treatment, including novel treatment models and innovative methods for reducing risk of overdose and infectious disease. *Stacey Sigmon, University of Vermont, College of Medicine, VT*

**Humans and Technology; Hand in Hand for Higher Quality Healthcare** Learn how to transform your healthcare organization using best practices in health technology and innovation. *Kasey Harding, The Center for Key Populations, CT and Marwan Haddad, Community Health Center, Inc., CT*

**Innovation in Primary Care: An Interdisciplinary Model for Chronic Disease Prevention** This presentation focuses on the development and implementation of an interdisciplinary primary care practice model that focuses on patient behavior change to reduce the risk of chronic disease and mental health disorders. An outline of the model and implementation strategy will be provided. *Scott Durgin, Springfield Medical Care Systems, VT and Adam Amele, Springfield Health Center, VT*

**Accountable Communities for Health: Big Strategies for the Local Communities in Rural Vermont** In 2016, 10 Vermont communities began implementing Accountable Communities for Health with the vision that all sectors impact and are responsible for a community's health. Learn about the implementation process and hear two case studies. Leave with resources to engage cross-sector partners on a sustainable, whole community approach to health. *Nicole Lukas, Vermont Department of Health, VT and Moira Cook, Vermont Department of Health, VT*

Oral Health Workshop TBD

## Wednesday 4:20–5:20

**Development of a novel rural residency training track for internal medicine through a rural-urban medical education partnership.** To better serve their communities and address the rural physician workforce shortage, graduate medical education programs in rural states must find innovative ways to promote careers in rural practice. In this workshop Maine Medical Center and Western MaineHealth present a first-of-its kind model for a rural residency track for internal medicine. *Thomas Gearan, Maine Medical Center, ME and Brian Nolan, Western MaineHealth Primary Care, ME*

**How to Bring BIG Ideas to Rural Communities** Want to deliver a new idea to your rural community? Worried about how it will be received? Get tips and tools on how you can best present your BIG idea, program or service to an unsure community. Move past the NIMBY (not in my backyard) mentality to find community champions that will help you better deliver your message to a welcoming crowd – ensuring success for you and your organization! *Jill Kimball, Ammonoosuc Community Health Services, Inc., NH*

**Project Prenatal** Project Prenatal aims to increase dental Medicaid utilization amongst pregnant mothers in Massachusetts. To do this Project Prenatal has created an A.I. automatic, patient-centered, referral technology system between medical and dental providers. Project Prenatal is looking to partner with medical and dental providers, hospitals, community-health centers, and health care organizations. *Sameer Atrash, Alka White, MA*

**A New System for Improving New England's Rural Health and Care Problems** This session describes a unique individual digital health and care system that brings rural residents, their health coaches and clinicians together through a common communications, data, analytics and guidance platform for managing each person's health and care in a more efficacious, efficient and effective manner. *George Reigeluth, Prosumer Health, ME and Charles Burger, Prosumer Health, ME*

**Gettin' By: How Scarcity Shapes Peoples' Lives and Health** The game, Gettin' By, gives players a first hand experience of how poverty changes a person's brain. See social determinants of health from an entirely new vantage point. You will never look at poverty the same again. *Linda Riddell, Health Economy, LLC, ME*

**How Bridgton Took on Stigma and Evaluated the Ripple Effects** Bring Change 2 Mind is a community campaign based in Bridgton, Maine. It focuses on encouraging conversation to build understanding and acceptance of mental health challenges and substance use disorders. In 2018, intentional community partnerships were developed to create a cross-sector planning team that facilitated 10 anti-stigma related events, engaging over 300 community members. This campaign brought people together to connect and share stories on the impacts of stigma and increase belief in hope and recovery. Participants of this learning session will learn about an effective approach to mental health and substance use disorder stigma in a rural community and understand the process and value of utilizing a Ripple Effects Map as part of a comprehensive evaluation plan. *Jana Richards, The Opportunity Alliance, ME and Dani Mooney, Lakes Region Substance Awareness Coalition, ME*

**Hierarchical Condition Category Coding (HCC) and Risk Adjustment – What Rural Providers Need to Know** In this session you will learn how HCC ICD-10 diagnosis coding is used to create risk adjustment factors (RAFs) for your patients that accurately reflect their disease burden. This RAF methodology is used to calculate costs for several Medicare programs including Merit-based Incentive Payment System (MIPS), and Medicare Shared Savings Programs (MSSP). Additionally, it is used to award a Complex Patient Bonus to MIPS and MSSP practices who render care to complex patients. In this breakout session, we will discuss provider coding strategies that will accurately capture your patients risk scores and ensure that the appropriate costs are allocated for them. Rural Health Centers and Federally Qualified Health Centers that participate in MIPS or with Accountable Care Organizations (ACOs) are affected by these cost methodologies and may receive the Complex Patient Bonus as an addition to the Quality Payment Program final score. *Susan Whittaker, Healthcentric Advisors, ME and Michael Pancook, Healthcentric Advisors, ME*

**Foundations of a Think Big, Act Rural Community Health Worker Program: Building the Model** is an interactive, audience focused presentation that shares the building blocks of a successful rural Community Health Worker Program that thinks big by partnering with all the critical access hospitals in the region along with Primary Care and Social Service providers, to improve patient and community health and wellness, reduce costs and fill the needs created by healthcare workforce shortages. *Annette Carboneau, North Country Health Consortium, NH*

## Thursday 8:30–9:30

**Improving Children's Oral Health in Rural Maine through Community Health Worker Outreach in Primary Care and Community Settings** MGMC's Prevention and Healthy Living Department is addressing oral health access for rural children ages 0-9 and pregnant women through proactive Community Health Worker outreach and collaboration with primary care and community partners. PHL adopted a multi-faceted strategy including EHR enhancements. A CHW will share case studies and lessons learned. *Anne Conners, Maine General Medical Center, Prevention and Healthy Living, ME and Jane Allen, Maine General Medical Center, ME*

**Engaging Policymakers to Support Healthy Aging in Our Communities** This session will describe the role that rural service providers, consumers, and community members can play in advocating for strong communities that promote healthy aging. Tips and tools for identifying and engaging lawmakers, policymakers and data sources will be provided as well. *Dan Hobbs, NH Alliance for Health Aging, NH and Martha McLeod, New Futures, NH*

**Paradigm Shifts: Moving from Illness to Wellness in Rural Behavioral Health** Explore how one rural behavioral health center is shifting their community from an "illness" paradigm to embrace "wellness" and improve health outcomes through the adoption of life-long behaviors. Learn "what works" integrating social & wellness programming into community-based care that result in life-changing outcomes. *Dean Leanna, United Services, Inc., CT and David Olsen, United Services Inc., CT*

**Understanding Trends in Telehealth Use: An All-Payer Claims Analysis in Maine** As one of the first states to establish an All-Payer Claims Database, ME offers a unique opportunity to examine trends in telehealth use. This session will present research on telehealth use in Maine, examining how use has changed in rural and urban areas, by payer, and by service type. *Yvonne Jonk, Maine Rural Health Research Center, University of Southern Maine, ME and Martha Elbaum Williamson, Cutler Institute for Health and Social Policy, University of Southern Maine, ME*

**A Web-Based Approach to Diabetes Prevention** Vermont's National Diabetes Prevention Program is free of charge to participants. Barriers to attendance still include travel distance, transportation, and immobility. Vermont stakeholders have collaborated to pilot online delivery using webinar format. We are excited to share our process, successes, and lessons learned. Discover how your organization can get with the (online) program! *Rebecca O'Reilly, VT Department of Health, VT*

**Grassroots Initiative to Improve Pediatric Emergency Care – a Success Story and Lessons Learned** This session will review a grassroots initiative to expand pediatric emergency care coordinators throughout New England. We will cover the importance of pediatric emergency care coordinators as well as review tips for grassroots outreach initiatives including getting off the ground, participant engagement and project expansion. *Ashley Foster, Boston Children's Hospital, MA and Joyce Li, Boston Children's Hospital, MA*

**The Secret Sauce of Community Health** Utilizing engaging activities such as Regional Summits, Data Walks, World Cafés, and Learning Collaboratives, you can harness the expertise and commitment of community partners to create a collective impact framework for your Community Health Improvement Plan. The experiences of Mt Ascutney Hospital in rural VT will be highlighted. *Jill Lord, Mt. Ascutney Hospital and Health Center, VT and Sandra Knowlton Sobo, One Care Vermont, VT*

Telehealth Workshop TBD

## Thursday 10:00–11:00

**Planning Ahead – Assisting Isolated Older Adults in an Emergency** Older adults often are affected disproportionately by disasters. This presentation will look at ways that community-based organizations who serve older adults can form partnerships and plan ahead so they will be better positioned to assist older adults during an emergency. *Rbonda Schwartz, U.S. Administration for Community Living, MA*

**Wellness Solidarity: A Model for Rural Access to Complementary and Alternative Medicine** This session discusses accessibility models the VT Center for Integrative Herbalism (VCIH) in Montpelier, Vermont, uses to expand services for herbal wellness and health education in rural central Vermont. *Charis Boke, Community College of Vermont, VT*

**Statewide Oral Health Challenge Set to Increase Fluoride Varnish Rates** Due to the plateauing rate of fluoride varnish application rates across Maine pediatric and family medicine practices, From the First Tooth developed the Healthy Smiles Statewide Challenge and recognition program. This program is designed to re-energize staff, increase oral health assessments and fluoride varnish application rates throughout participating practices. *Audrey Patin, MaineHealth, ME and Elizabeth Blair, MaineHealth, ME*

**Marijuana: The Toke of the Town** There is a great deal of cannabis confusion. This session will focus on marijuana as well as the growing interest of cannabidiol (CBD) products. Many questions exist about the safety of marijuana and the increasing popularity of CBD products. What are the public health concerns that need to be addressed? *Gayle Finkelstein, Northern New England Poison Center, VT*

**Implementing Telehealth for Reproductive Health: Using Technology to Decrease Barriers** Telehealth services are a way to improve health care access, patient and provider satisfaction, and meet the demand of a rapidly changing healthcare workforce and infrastructure. We will explore how various models of telehealth service delivery are implemented in the case of reproductive health care in the state of Maine. *Leah Coplon, Maine Family Planning, ME*

**Workforce Pipeline: Effectively Train Health Professions Students** Looking to launch or advance health professions student (HPS) training? Health center education programs are essential to creating a pipeline of qualified providers but limited capacity and resources present challenges to working with students. In response to these challenges, Community Health Center, Inc. developed a playbook that helps organizations evaluate, replicate, and sustain HPS training. This session will provide steps for establishing a sustainable training program and review best practices for eliminating obstacles to improve student trainee processes. *Amanda Schiessl, Community Health Center, Inc., CT*

**Sepsis Awareness Train-the-Trainer Program: Every Minute Counts** According to the Centers for Disease Control and Prevention, sepsis kills more than 258,000 Americans every year. Early recognition and treatment are absolutely necessary to decrease morbidity and mortality. This train-the-trainer workshop is intended to educate those that would like to spread the knowledge to others in their organization. The goal is to provide the most up to date education on sepsis and provide a toolkit and resources for properly educating your clinical and non-clinical staff on sepsis. *Amanda Gagnon, Healthcentric Advisors, ME*

## Thursday 12:00–1:00

**Harpwell Aging at Home: A Community Initiative to Safely Age in Place** Join Healthcentric Advisors to discover interventions used in Harpswell to provide age friendly home modifications and resources to meet the needs of their aging community. In this interactive session, participants will be given a case study, a Home Assessment and Modification List (HAML), and a resource list to practice determining options for aging in place. *Ann Marie Day, Healthcentric Advisors, ME*

**Too Many Treasures – Hoarding Disorder, Clutter, and Home Safety** Clutter in living quarters can present significant safety challenges. The root causes of clutter can be a transitory phase, a pattern of behavior associated with another condition, or Hoarding Disorder. This program will provide an overview of these, with a focus on approaches to treatment of Hoarding Disorder. *Lora Gerard, Northern New England Geriatric Education Center, NH*

**Avengers Game** Mental health in the Marvel Universe is an exploration in the effects that such a widely popular film, such as Avengers: Endgame, can have on the public's view of mental illnesses and discusses how to use the points touched upon in the film to help youth (and adults!) recognize mental health issues as something not to discriminate against but to accept and take steps to treat in healthy ways. *John Goodman, United Services, Inc., CT*

**Simple Strategies for Prevention of Oral Disease** Prevention of oral disease in rural areas can be overwhelming where a lack of dental providers is a reality. This presentation will provide simple strategies any member of the healthcare team can employ to reduce incidence of oral disease in their communities. *Courtney Vannah, University of New England, ME*

**Leveraging Science, Technology, and Creativity to Improve Rural Health** This presentation synthesizes data from epidemiological studies, clinical trials, and community-based participatory research surrounding efforts to improve rural health, with a focus on innovative, technology-based approaches to reducing cigarette smoking. *Allison Kurti, Vermont Center on Behavior and Health, University of Vermont, VT*

**Rural Health Clinic Financial Performance and Operational Improvement** This session will explore the costs of RHCs relative to Medicare payment limits for different types and sizes of RHC providers; describe the characteristics of counties served by RHCs; and highlight strategies for optimizing RHC service mix, improving financial performance, and adapting to the changing healthcare environment. *Zachariah Croll, Maine Rural Health Research Center, University of Maine, ME and John Gale, Maine Rural Health Research Center, University of Southern Maine, ME*

**Implementation of Mobile Integrated Healthcare – Community Paramedicine in Rural New England** Mobile Integrated Healthcare – Community Paramedicine (MIH-CP) is an exciting new opportunity for rural healthcare. MIH builds upon the existing resources and expertise of area Emergency Medical Service (EMS) providers to deliver a range of home health services for a population in need. This session will provide a framework for the development of MIH-CP programs in a rural setting. *Nicholas Valentini, Geisel School of Medicine, NH and Karissa LeClair, Geisel School of Medicine at Dartmouth, Upper Valley Ambulance, NH*

## Thursday 1:15–2:15

**Navigating a Path to Healthcare Coverage: Bob's Story** The Access to Care team, a division of MaineHealth, works to ensure comprehensive, affordable healthcare and improve the quality of life in our communities. This session will highlight the journey of Bob, a fictional uninsured patient living in rural Maine, as he navigates the complexities of applying for coverage, needing immediate medication assistance and even help affording transportation to and from his doctor appointments. In demonstrating Bob's nonlinear path toward a positive health outcome, we will emphasize the unique needs of our rural areas and the ways comprehensive health coverage programs like those at Access to Care are a model for these communities. *Carol Zechman, Access to Care – MaineHealth, ME*

**Catalyzing Innovation in ME's Rural Health Care System** The MaineHealth Foundation's Rural Health Transformation Grant program is designed to bring together partners in rural communities to pilot innovative ways to deliver essential health services. This session will provide an overview of the program and spotlight the work of several grantees. *Charles Dwyer, Maine Health Access Foundation, ME and Sara Kahn-Troster, Maine Rural Health Research Center, ME*

**Taking the Next Bite Out of an Oral Health Initiative for Children in Rural Maine** Recent initiatives identified head start and elementary school children in need of preventive oral healthcare. An interdisciplinary approach addressed the need by utilizing University of New England health profession students to provide oral screenings, fluoride varnish applications and dental sealants. A model was developed for reaching rural and underserved children. *Jennifer Gunderman, Maine AHEC, ME and Ian Imbert, University of New England, ME*

**The Treatment Trifecta: The Intersection of Behavioral Health Integration, Trauma-Informed Care, and Substance Use Disorders** In this interactive session, you'll learn how Healthcentric Advisors is supporting providers with the Treatment Trifecta by creating a safe environment for their patients to acknowledge and address their trauma and begin the path to recovery. *Jennifer McCarthy, Healthcentric Advisors, ME*

**Maximizing Rural Emergency Care with TeleEmergency** TeleEmergency allows board-certified ED physicians and experienced ED nurses to join the bedside team on demand, 24/7, utilizing audiovisual technology. It's designed to assist in any manner, including help with ED surges, acuity/staffing; second set of eyes for challenging cases, nursing documentation, transfer assistance. This presentation includes clinical case reviews. *Julie Pelton, Dartmouth Hitchcock Medical Center, NH and Dave McDermott, Mayo Regional Hospital, ME*

**Leveraging Clinical and Community Partnerships to Increase Access to Healthy Food** Learn how a Maine-based integrated healthcare system is partnering with their statewide food bank to screen primary care patients for food insecurity, connect them to ending-hunger resources, and distribute healthy food. Presenters will share useful screening tools, tips, resources and recommendations around sustainability to foster replication in other rural communities. *Laura Vinal, Good Shepherd Food Bank, ME and Gina McKenney, MaineHealth, ME*

**For Our Health: Collaborations in Maine** How are successful collaborations between clinical and public health organizations formed and sustained after conducting Shared Community Health Needs Assessments? Will share research findings from Maine and solicit feedback from participants on how health improvement planning happens after CHNA efforts in their communities. *Jo Morrissey, MaineHealth, ME*

**Manifesting Motivation** This session will serve as an intentional planning time for leveraging the inspirational ideas that have been shared during this year's conference and creating an action plan to implement at individual organizations. Participants will identify their "why" as they pinpoint the key motivation for acting rural in a meaningful way. *Frank Bailey, EMMC/UNE College of Osteopathic Medicine, ME and Katie Petersen, EMMC/UNE College of Osteopathic Medicine, ME*