

2019 Annual Educational Conference

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ILLINOIS RURAL HEALTH ASSOCIATION 30th Annual Educational Conference

1989-2019

30 Years of Improving Rural Health

Highlights include:

- Rural Hospital Renaissance
- Rural Health Clinic Comingling
- Federal Rural Health Update
- Value of Community Health Workers

...and much more!



August 7-8, 2019
Hilton Garden Inn · Champaign

SCHEDULE AT A GLANCE

WEDNESDAY, AUGUST 7th

8:30 - 10:45 a.m. – Exhibitor Set-Up

11:00 a.m. - 12:30 pm. - Registration, Exhibit Time, Box Lunch

12:30 p.m. – Opening Session - Annual Meeting & Keynote Speaker Brian Lee

2:15 - 3:00 p.m. – A SESSIONS

3:00 - 3:15 p.m. – Break & Exhibit Time

3:15 - 4:00 p.m. – B SESSIONS

4:00 - 4:15 p.m. – Break and Exhibit Time

4:15 - 5:00 p.m. – C SESSIONS

5:30-10:00 P.M.– Evening Socials

The Clark Bar | 207 W. Clark | Champaign

5:30-7:00 P.M. – Dinner Buffet

7:15 P.M. – Trivia

9:00 P.M. – Open Mic Comedy Night

THURSDAY, AUGUST 8th

8:00 - 9:00 a.m. Breakfast Buffet & Exhibit Time

9:00 a.m. – National Rural Health Association Federal Update

10:00 a.m. – Door Prize Drawings & Exhibitor Tear Down

10:15 - 11:00 a.m. – D SESSIONS

11:05 - 11:50 a.m. – E SESSIONS

Noon - 1:20 p.m. – ANNUAL HEALTHCARE AWARDS LUNCHEON

1:20 - 2:00 p.m. – Closing General Session - CMS Update

All attendees and exhibitors invited to all meals and receptions.

*Hilton Garden Inn 217-352-9970 (code IRHA19), Homewood Suites 217-352-9960 (code RHA) and Home2Suites 217-355-6468 (RHA) have rooms available at a discounted rate of \$119 until 07/06/19.



Illinois Rural Health Association

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**IRHA 30th ANNUAL EDUCATIONAL CONFERENCE AUG 7-8th, 2019
HILTON GARDEN INN* in CHAMPAIGN - REGISTER ONLINE at**

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____ Gold Sponsor: \$6,000 - Umbrella/Tote Bag Sponsor includes choice of logo on umbrella or tote bag for each participant. Booth, announcement at opening and closing sessions, full page program ad, 5 registrations/5 annual memberships, name on welcoming banner, website/newsletter recognition.

____ Silver Sponsor: \$3,000 - Meal Sponsor includes signage and announcement at meal, booth, 3 conference registrations/3 annual memberships, full page program ad, and website and newsletter recognition.

____ Bronze Sponsor \$1,500 - Break Sponsor includes booth - 3 conference registrations/3 annual memberships, signage at breaks, 1/2 page program ad, and website/newsletter recognition.

____ For Profit -Exhibitor: \$800 - Includes exhibit space and up to 2 registrations, 2 annual memberships, program/website/newsletter recognition.

____ Non-For Profit Exhibitor - \$600 - Includes exhibit space, 1 registration, 1 annual membership and program/website/newsletter recognition.

____ Full Page Program Ad - \$500 (includes one registration/membership)

____ 1/2 Page Program ad - \$250

____ Individual Registration-Member: \$195

____ Non-Member: \$250 (includes 12 month membership) _____ Student: \$50

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WEDNESDAY, AUGUST 7TH

8:30 A.M. – 10:45 A.M. – Exhibitor Set-Up

11:00 A.M. – Exhibit Time, Box Lunch & Registration

**12:30 P.M. – Opening Session - Annual Meeting & “Rural Hospital Renaissance” by
Keynote Speaker Brian Lee**

2:15-3:00 P.M. • Concurrent Sessions A

A-1

It's Time...Reducing the Stigma of Mental Health in Rural Communities

Heather Hintz, M.Ed., Director of Behavioral Health, Carle Foundation Hospital

For years, mental health diagnoses and treatments have carried a stigma. Carle Foundation Hospital believes "It's Time...". It's time to start talking, time to share information, and time to break through the stigma of mental health and put mental health at the forefront of our discussions. This presentation will focus on the challenges of identifying and treating mental health symptoms in the rural population and how Carle Foundation Hospital is taking on this challenge. We will review symptomology, how to start conversations about mental health, use of telemedicine, consultation and collaboration as well as the importance of community education.

A-2

The Challenges and Successes of Care Coordination in Rural Communities

Amy Jones, M.S., Ed., University of IL at Chicago - Division of Specialized Care for Children

Many of us are familiar with the term care coordination and understand that it can be used in many different ways from sharing information to helping individuals achieve their health goals. Care coordination in rural communities can pose many challenges including limited access to specialists and other providers, challenges with transportation resulting in missed appointments, and lack of community resources. Care coordination should be centered on the individual and strength-based to empower families to achieve their goals. In this presentation we will take a look at those challenges and give specific examples of how care coordination results in success.

A-3

Building Age Friendly Primary Care

Elaine Jurkowski, MSW PhD, Southern Illinois University Carbondale

The Age Friendly Health System initiative (Institute for Healthcare Improvement - IHI) strives to optimize healthcare for patients, families, caregivers, health care providers and the healthcare system through its four pillars of "what matters", mobility, medication and mentation. This panel presentation will showcase how clinical settings have been transformed using the IHI approach to optimize care for an aging population.

WEDNESDAY, AUGUST 7TH (CONTINUED)

2:15-3:00 P.M. • Concurrent Sessions A (Cont.)

A-4

Rural Trauma Care: Challenges and Opportunities

Timothy Pohlman, M.D., F.A.C.S.

Trauma Surgery, Surgical Critical Care, and Neurocritical Care

Optimal care of a trauma victim in rural Illinois faces several challenges on many levels. Consequently, mortality due to injury may be significantly higher in rural areas compared to cities. This presentation exams death rates due to trauma in various Illinois counties to assess the magnitude of survival disparity between rural and urban Illinois residents. Opportunities to minimize this difference are identified, and suggested approaches to improve rural trauma care will be reviewed.

3:00 - 3:15 P.M. – Break & Exhibit Time

3:15-4:00 P.M. • Concurrent Sessions B

B-1

Handle with Care: Working Together and Saving Lives to Combat the Opioid Crisis

Angie Hampton, MS, CEO & Liz Cooley, Education Health Program Manager—Egyptian Health Department

Egyptian Health Department will share best practices for developing a rural response to the opioid crisis through comprehensive and collaborative approaches. This venture started with COMPASSION and then planning to address this epidemic in our communities. By leveraging knowledge as well as local, regional, state and national resources and funding opportunities, Egyptian Health Department strives to address the pillars, priorities and strategies in the State of Illinois Opioid Action Plan. A strong recovery oriented system of CARE is being built in these communities by engaging persons with lived experience and other community partners.

B-2 Dementia Panel Discussion

Is it Dementia or Just Normal Aging?

Dee Mayfield, CDP, CADDCT, Certified Alzheimer's Disease and Dementia Care Trainer, Mayfield Health Care Seminars

Knowing the differences between normal aging, dementia, and Alzheimer's disease; helps us respond to patient needs faster and with flexibility even when we don't personally know the diagnosis. Most families, of newly diagnosed patients want health professionals to understand and explain what is currently happening and what to expect. Knowing and sharing common communicating behaviors and possible approaches, as well as some of the available resources, we can truly support dementia caregiver families in our communities and health settings.

WEDNESDAY, AUGUST 7 (CONTINUED)

3:15-4:00 P.M. • Concurrent Sessions B (Cont.)

B-2 Dementia Panel Discussion (Cont.)

BCBAs as Clinicians For Behavioral Health Management In Dementia Care: An Innovative Community-Based Model For Rural Care

Maranda Trahan, PhD, BCBA-D, Abilities Behavioral Services

Behavioral health issues like anxiety, depression, noncompliance, aggression, wandering are the most challenging and costly aspects of dementia care, causing re-hospitalizations, increased psychoactive medications, and caregiver burnout. Research has proven that behavior therapy like Applied Behavior Analysis (ABA) is a safe and effective approach to managing these difficult behaviors. Abilities Behavior Services is addressing this major public health issue head on, utilizing Board Certified Behavior Analysts (BCBAs) to assess and intervene upon these behaviors, coaching caregivers one-on-one during troublesome routines. In this workshop, learn about BCBAs as in-home clinicians, case examples, barriers to care, and next steps.

B-3

Qualitative Study Findings—What Rural Kids Think About Healthy Eating

Anne Scheer, Ph.D., SIU School of Medicine

Many interventions want to improve children's health, especially children's eating and activity patterns, but most fail to reach their goals. As a qualitative childhood sociologist at a medical school, my research seeks to learn about the views and voices of those we serve: What do children think about health and well-being? What factors influence their health-related behaviors? Do our adult definitions of healthy overlap with theirs? This presentation presents findings from a qualitative study conducted with fifth-grade students in a rural Illinois district. The study consists of ethnographic observations and student interviews that explore these questions.

B-4

Trends in Telehealth

Gurpreet Mander, M.D., M.B.A., C.P.E., ITN Network Director & HSHS St. John's Hospital CMO and Julie Edwards, M.B.A. ITN Network Director

The Illinois Telehealth Network (ITN) is comprised of 29 rural hospitals throughout Illinois, collaborating together to advance telehealth initiatives across our state, in order to address widespread medical provider and care shortages in rural, underserved and disadvantaged areas. The presentation will provide an overview of the work they have been doing in a variety of specialties, as well a touch on the obstacles many rural providers still face in bringing telehealth services to their patients.

4:00 - 4:15 P.M. – Break & Exhibit Time

WEDNESDAY, AUGUST 7 (CONTINUED)

4:15-5:00 P.M. • Concurrent Sessions C

C-1

Rural Health Clinic Billing 101

Charles James, Jr., President and CEO, North American Healthcare Management Services

This session will provide a basic overview of RHC billing, reimbursement and compliance. We will cover basic RHC definitions, location requirements, services, and providers in this introductory session. Understand the basics of RHC claim reporting, encounter rates, CPT, and modifier usage. Distinguish Provider-based from Independent RHCs and their basic differences. We will discuss the new 2019 Virtual Communication Services and Chronic Care Management basics for RHC. We will review Medicare Preventive Services in an RHC.

C-2

Trauma, Substance Use, and HIV: Examining the Intersectionality and Rural Considerations

Nicholas Brady, HIV Care Connect Associate and Trauma-Free Illinois Initiative Coordinator, Illinois Public Health Association

Research regarding psychological trauma has been forthcoming since the late 1990's beginning with the publishing of the Centers for Disease Control and Kaiser Permanente Adverse Childhood Experiences study. Despite the overwhelming volume of research literature, understanding what trauma means for professional practice is sometimes challenging to articulate and integrate. This session will review pertinent research and examine the intersectionality of trauma with substance use and HIV. Moreover, specific interventions and therapy modalities which have or could be adopted into professional service settings will be considered.

C-3

AgrAbility Unlimited IL: Helping Farmers Keep Their Independence

Bob Aherin, Ph.D. & Professor, Department of Agriculture and Biological Engineering and AgrAbility Unlimited Program Director

The AgrAbility Unlimited program will be sharing a summary of the free services that the organization provides for farmers with disabilities throughout the state of Illinois and the countless ways that these services benefit family farms. We will also share some success stories from previous AgrAbility clients whose careers have been impacted by AgrAbility services with some research on Ag safety in how to prevent new or future injuries while working. The presenter will also share how local professionals can become involved in the program to help support farmers with disabilities and refer them to the program services.

C-4

Rural Health Career Student Roundtable

Clinicians and healthcare administrators will provide advice and feedback to students on how to develop and sustain a successful career in the rural health arena.

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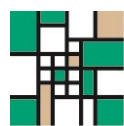


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NETWORKING RECEPTIONS**

5:30 - 10:00 P.M.– Evening Socials

The Clark Bar

207 W. Clark • Champaign

TRIVIA
Night

5:30-7:00 P.M. – Dinner Buffet

7:15 P.M. – Trivia

9:00 P.M. – Open Mic Comedy Night



THURSDAY, AUGUST 8TH

8:00 – 9:00 A.M. Breakfast Buffet & Exhibit Time

9:00 A.M. – National Rural Health Association Federal Update

10:00 A.M. – Door Prize Drawings & Exhibitor Tear Down

10:15-11:00 A.M. • Concurrent Sessions D

D-1

Success Factors and Barriers to Integration of Electronic Mental Health Screening in Primary Care

Carmen Mei, BSN, RN, DNP-FNP, Student, University of Illinois at Chicago

Currently only a third of primary care providers screen for substance use, which is a growing epidemic. Using Cerner Autotext to save and retrieve the screening text into a generic clinical note, it is possible for primary care providers to integrate the Drug Abuse Screening Test without Information Systems support into the electronic health record to increase completed screenings and provider interventions for positive screenings. Primary care providers can play an increased role in drug abuse treatment by independently electronically integrating drug abuse screening to provide timely intervention for patients with problems related to drug abuse.

D-2

Community Health Workers: a Value Driven Solution for Population Health

Kevin Atchason, D.O., MPH, IL. Public Health Association

The presentation will focus on the efforts that are being taken to promote long-term sustainability/reimbursement for Community Health Workers in Illinois. This effort is part of the IDPH 1815 Grant that focuses on reducing the burden of chronic disease through prevention strategies that focus on DMII, HTN, and Stroke prevention. A portion of the grant is designed to establish and expand the use of CHWs in IL. The presentation will cover the history of CHW movement in IL, national efforts for Medicaid reimbursement, evidence-based studies that have shown the benefit of using CHWs, and the progress and goals of the grant.

D-3

Follow-Up Procedures and Readmissions Panel Discussions

Inpatient/ED Discharge Follow-Up Calls

Cheri Fellers, CM/UR Manager, Horizon Health

This presentation will address our process of ensuring that follow up phone calls are made within 48 hours after the patient is discharged from either an inpatient stay or from a visit to our emergency department. It will also describe our process we follow for primary care physician (PCP) alignment when a patient reports to our emergency department without having a PCP.

THURSDAY, AUGUST 9 (CONTINUED)

10:15-11:00 A.M. • Concurrent Sessions D (Cont.)

D-3 Follow-Up Procedures and Readmissions Panel Discussion (cont')

Reducing Geriatric Readmissions

Ann Bogue, Student DNP, APRN, Horizon Health

The government has implemented a goal of reducing readmissions to acute care facilities. Aged adults living in long-term care homes are especially high risk for preventable hospitalizations and re-admissions. Horizon Health has started a program that increases communication and timeliness of care for these patients, successfully decreasing both rates.

Results of Successful Grant Project on Reducing Readmissions and ER Visits

Carol Ray, RN, Transitional Care Coordinator, Sarah Bush Lincoln Hospital

Sarah Bush Lincoln Hospital (SBLH) undertook a grant project to support transitions of care and increase engagement among Congestive Heart Failure and Chronic Obstructive Pulmonary Disease patients in an ambulatory setting to improve patient self-management. The results were so successful, SBLH received national recognition in July 2018, and received the "HRSA Quality Improvement Champion Award". The presenter will discuss how the project can be replicated to lead to improved health outcome as well as reduced hospitalizations and ER visits.

11:05-11:50 .M. • Concurrent Sessions E

E-1

Rural Health Clinic Commingling

Charles James, Jr., President and CEO, North American Healthcare Management Services

This session will provide an overview of commingling in an RHC. We will review the relevant regulatory guidance for commingling RHCs. The session will cover: what is, and is not, considered commingling; acceptable parameters "carving-out" non-RHC days from schedules; whether and under what circumstances space sharing arrangements between RHCs and non-RHC providers are acceptable; how posted hours of operation affect commingling considerations; and the difference between providing defined non-RHC services and commingling will also be discussed.

THURSDAY, AUGUST 9
(CONTINUED)

11:05-11:50 A.M. • Concurrent Sessions E (Cont.)

E-2

Measuring Interprofessional Collaboration Among Substance Use and Mental Health Treatment Providers

Jane L. Nichols, PhD, Southern Illinois University - Carbondale

Interprofessional collaboration is a key strategy for overcoming rural health challenges, particularly in the areas of behavioral health. To build a collaborative interprofessional workforce, an objective definition of this concept must be identified along with tools to measure its presence or absence. Two studies were conducted including professionals working in the field of substance use and mental health. This presentation will review the research findings which resulted in the identification of factors representative of collaborative practice, and an instrument which can be used to develop a model of rural inter-professional practice in clinical settings.

E-3

Is Your Patient Your Enemy? How Our Billing Practices Affect Customer Service

Thomas Jensen, CEO, Dignity Healthcare Collections

What is your patient's biggest complaint? Is it the quality of care? No Is it the wait times? A little but that's not the biggest concern. It is the communication between your office and your patient. 63% of the logged patient complaints in healthcare are with communication. How is the way we communicate with our patients affecting our customer service? This session is a fun, fact filled video and audio presentation that will evaluate what practices our billing office is doing and how we can better communicate with our patients.

Noon - 1:20 P.M. • Annual Healthcare Awards Luncheon

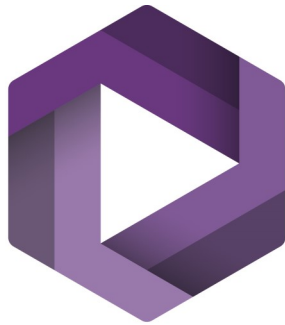
1:20—2:00 P.M. • Closing General Session
CMS Update

Dexter Glasgow, Centers for Medicare and Medicaid Services

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