

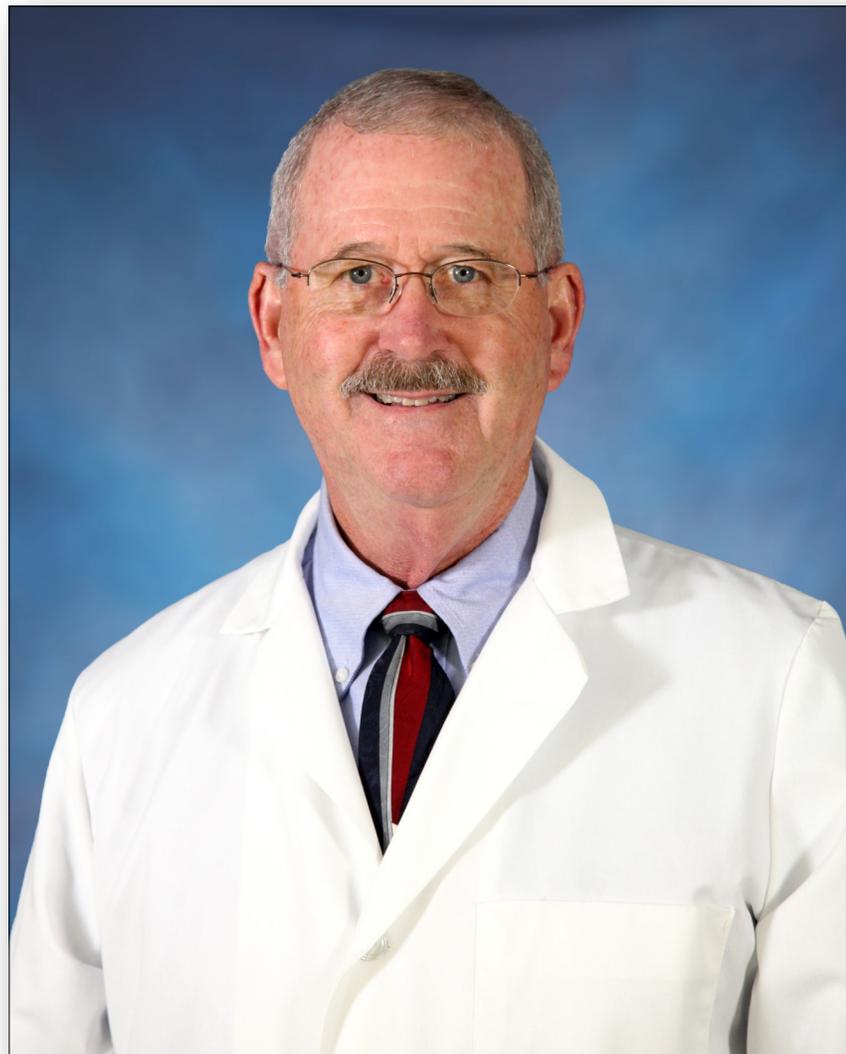


**Fall 2020**

***IL RURAL HEALTH ASSOCIATION NEWSLETTER***

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**Dr. Boyd A. McCracken of Greenville Named  
2020 IRHA Physician of Excellence**



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**On October 22, Dr. Boyd A McCracken received the 2020 IRHA Physician of Excellence Award at a “socially distanced” ceremony with immediate family and staff at the Smart Center in Greenville. *(Continued on following page.)***

## Dr. Boyd A. McCracken of Greenville Named 2020 IRHA Physician of Excellence (Cont.)

With a grandfather and two uncles who were dentists and a father who was also a family practice physician, Dr. McCracken’s family has been providing medical care to the Greenville community for over 100 years. After medical school, Dr. McCracken returned to his Greenville roots in 1977 and joined the Five Provider Family Practice and provide care to Utlaut Memorial Hospital, which later became HSHS Holy Family.

For the next 43 years, Dr. McCracken served as a “Renaissance man” to patients in Bond County, delivering babies, assisting in surgery, working as an ER physician, all while serving as president of the medical staff and suffering numerous state and local boards and tending to his office practice.

Dr. McCracken was also presented with a copy of House Resolution 922, introduced in Springfield by Rep. Blaine Wilhour (R-Effingham) and a senate congratulatory certificate from State Senator Jason Plummer (R-Edwardsville).



**Pictured 1<sup>st</sup> row seated:**  
**Mrs. Janet McCracken and**  
**Dr. Boyd McCracken**  
**2<sup>nd</sup> row standing: CEO of HSHS**  
**Holy Family Hospital Kelly Sager,**  
**Director of Clinical Services for**  
**HSHS Medical Group Tammy**  
**Allen and IRHA Executive Director**  
**Margaret Vaughn**



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## RHC Billing and Telehealth: Beyond the Public Health Emergency

Many of us are rightly concerned about what the future looks like for RHCs and Telehealth once the Public Health Emergency terminates. (We all look forward to that day!!) The Public Health Emergency (PHE) was extended, effective 10/23/2020, for another 90 days. This extension preserves Medicare guidance for RHC-FQHCs as Distant Site, G2025 payable at \$92.03 (for better or worse!), 1135 location waivers, and telephone-only encounters via telehealth. The current PHE extension will terminate 1/23/2021.

Illinois has already adopted an RHC-FQHC encounter definition that includes Telehealth services. Our encounter definition also allows for encounters via “school-based” programs. (Something for which the author has long hoped.) What will likely not be made permanent is our ability to bill telephone-only services to IDPA patients as RHC-FQHC encounters.

For Medicare, these changes go away. None of the telehealth advances made at the federal level have yet been preserved. There have been no federal legislative or policy changes to preserve RHC as distant site or telephone encounters. There is language in the House version CARES Act Phase IV that extends PHE Telehealth provisions (G2025, \$92.03, Distant Site, etc.) for five years. While this is something, it is not optimal.

The most desirable outcome is a legislative remedy that raises the existing RHC cap, recognizes RHCs as Distant Site providers, implements paying the All-Inclusive Rate for Telehealth Visits, includes telehealth visits in the productivity denominator, and allows telephone only visits in some capacity. Ultimately, the telephone only visits will be demoted back to Virtual Communication services. Legislators and policy makers are skeptical of long-term loosening of virtual service definitions. Many fear that telehealth services will replace the in-person visit. (Would that really be so bad?)



**Charles James**  
**President and CEO**  
**North American Healthcare**  
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**Conclusion:** It is imperative, as always, that RHCs reach out to their legislators, both state and federal, to argue for what we need. They DO listen. IRHA continues to reach out to legislators and policy makers to convey the urgency of these changes.

### **Medicare G2025 Telehealth Claims and Payments**

G2025 payment amounts have confounded many of us. We mistakenly believed that CMS was paying G2025 improperly. RHCs are being reimbursed \$92.03, in total, for G2025 Telehealth Encounters. The Medicare payment and patient co-insurance, when combined, will equal \$92.03.

*(Continued on following page.)*

## RHC Billing and Telehealth: Beyond the Public Health Emergency (Cont.)

The payment formula for G2025 payment is directly affected by the charge amount reported for G2025 claims. MACs adjudicate G2025 claims so that *the TOTAL payment received from Medicare and the patient is equal to \$92.03.*

Many of us were under the impression that the MACs were paying these incorrectly. Our interpretation was wrong. As the G2025 charge amount goes up, the Medicare payment amount goes down, and the patient co-insurance amount increases. Please see Figure 1.

**Figure 1**

	Medicare	RHC	Notes
Clinic G2025 Charge	\$92.03	\$232.00	Medicare pays \$92.03 MINUS Coinsurance
Coinsurance	(\$18.40)	(\$46.40)	20% of Charge
Medicare Payment	(\$73.63)	(\$45.63)	(\$92.03 - Coinsurance)
Contractual Adjustment	\$0.00	(\$139.97)	(Fee minus \$92.03)
<b>Total Payment</b>	<b>\$92.03</b>	<b>\$92.03</b>	<b>Coinsurance Plus Medicare Payment</b>

The more the facility charges for this service, the less Medicare pays, and the more the patient pays. We hope this helps clarify any confusion. Please let us know if your facility is seeing something different.

### RIMSAP Helps Future Doctors. RIMSAP Helps Rural Communities.

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At Pekin Hospital, cash incentives from the Ameren Illinois Energy Efficiency Program helped them complete a series of energy-efficiency projects that quickly began cranking out some serious energy savings. Ameren Illinois incentives covered more than 80 percent of project costs to survey steam traps and replace faulty ones. These measures, combined with new energy-efficient lighting and boiler equipment, are saving the hospital more than \$84,000 every year!

### More Money for Your Mission

Every dollar saved through energy efficiency is a dollar that can be put toward other priorities, such as patient care and new equipment. Energy savings could offset the budgetary impact of the rising minimum wage, or help your organization avoid staffing cuts — maybe even grow your workforce.

### Allies in Efficiency

A team of Ameren Illinois Energy Advisors is available to evaluate your facility and identify opportunities to save. When you're ready to move forward, a statewide network of specially trained local contractors, known as Program Allies, are at your service to help with everything from paperwork to equipment installation.

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To learn more, visit [AmerenIllinoisSavings.com/Healthcare](http://AmerenIllinoisSavings.com/Healthcare) or call **1.866.800.0747** to connect with an Energy Advisor or Program Ally in your area.



## IRHA 31<sup>st</sup> Annual Educational Conference Held Virtually

Even though an in-person Conference was out of the question, IRHA did not want to let the logistical challenges of a virtual conference, stand in the way of bringing educational opportunities to our members and believed that this year it was especially important for everyone to share best practices and stay abreast of the latest developments impacting the rural health practice environment. After two months of preparation and a lot of behind the scenes meetings and logistical coordination with our special team of IT consultants, we were pleased with outcome of our **Oct. 6-7 Educational Conference** and were happy to report we received all positive evaluations on the overall conference experience.



The great part about Whova, the Conference software provider we used, is that attendees are able to log back into the conference platform for several months to access conference video presentations and review exhibitor info as well as contact info of other attendees.

We would like to thank our sponsors: ***Gibson Area Hospital and Health Services, SIU School of Medicine, SIU School of Medicine Dept. of Psychiatry, Ameren, ICAHN, the IL Farm Bureau, Meridian Health, the National Center for Rural Health Professions and PJ Hoerr and STL Communications*** for their generosity in sticking by us during these difficult times as well as our additional exhibitors: ***American College of Education, ARS / Magnet Solutions, Cancer Centers of America, Farnsworth Group, Inc., Herzing University Kenosha Campus, IL HIV Health Connect, ILLINOIS HELPLINE for Opioids and other Substances, Mothers' Milk Bank of the Western Great Lakes, Principal Financial Group and The Compliance Team.***

The revenue brought in through our Annual Conference is what keeps IRHA afloat financially and though we usually have close to 40 exhibitors, we capped the number at 18 this year to give them the maximum exposure. Though we don't have meals or hotel rental fees, there is still significant cost to putting on a virtual conference especially over a two-day period with over 20 presentations and an exhibit hall.

In addition to sessions ranging from RHC Telehealth Billing, COVID Tracing, Agriculture and Mental Health as well as our Federal Rural Health Update, we provided attendees an opportunity to network and share their experiences coping with COVID in separate round table discussions for hospitals, RHCs, public health departments and educational institutions. At press time, **our 2021 Conference is scheduled for August 10-11<sup>th</sup>** at the I-Hotel in Champaign but we will be holding it virtually, if we need to during that same time frame.

**IRHA Appreciates the Generosity of the Sponsors  
of Our 2020 Annual Conference:**

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Team*™

## **Public Health Dental Hygienists are Improving Access to Care in Illinois**

The legislation passed regarding the training guidelines for Public Health Dental Hygienists (PHDH) in 2019. Seventy-three registered dental hygienists have received their certification to date. These certificate holders are registered dental hygienists, licensed to practice in Illinois, with 2 years of full-time clinical experience or an equivalent of 4,000 hours of clinical experience, and have completed 42 clock hours of additional structured courses in dental education in advanced areas specific to public health dentistry.

The role of a PHDH includes various aspects of patient care including: clinician, patient management, oral health educator, program manager, and interprofessional collaborative practice. The locations where PHDHs can benefit patients are: Federally Qualified Health Centers (FQHC); Federal, State and local public health facilities, Head Start, special supplemental nutrition programs for Women, Infants, and Children (WIC) facilities; and certified school-based health centers or school-based oral health programs.



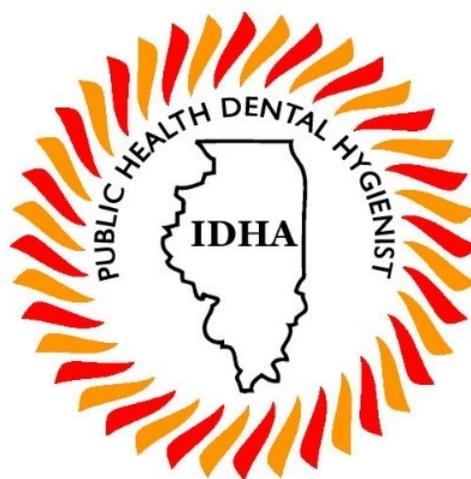
**Laura M. Scully CDA, RDH,  
PHDH, MS  
Adjunct Faculty Malcolm X  
College – City Colleges of Chicago  
IDHA Access to Care / Public  
Health Committee Chairman**

The Illinois Dental Practice Act prohibits Registered Dental Hygienists from providing dental hygiene services without a dentist first examining the patient and being present in the facility during treatment. With the PHDH certificate, that barrier of care is removed for patients who meet certain requirements such as Medicaid eligible, uninsured and household income not greater than 200% of the federal poverty level. With a collaborative agreement with a dentist, PHDHs can provide preventative services including: prophylaxis procedures, radiographs, intraoral photographs, oral cancer screenings, periodontal assessments, sealants, fluoride applications, and oral hygiene instructions without a dentist present at the facility. The collected records can be share synchronously or asynchronously with a dentist providing services at another location. A dentist may supervise and sign collaborative agreements with two PHDHs, this is in addition to the four dental hygienists per dentist practicing in a dental office.

Data regarding the number of patients, and types and locations of services rendered in 2020 will be submitted to the Illinois Department of Public Health via the “Annual Report of Public Health Dental Hygienist Services” in January 2021.

There is a great need for PHDHs throughout the state of Illinois. Currently, the southernmost county with a PHDH is St. Clair. We are seeking candidates from Union and various counties in southern Illinois. If you are a dentist looking for a PHDH or an RDH seeking additional information regarding PHDHs, please don’t hesitate to contact the Illinois Dental Hygienists’ Association at [mail@idha.net](mailto:mail@idha.net) or 800-550-4342.

Thank you Illinois Rural Health Association for the opportunity to share our update.



## IRHA Welcomes New Student Board Member Aubree Schmitt

IRHA is proud to have Aubree Schmitt as their newest Board member. Aubree is currently a University of Illinois at Chicago (UIC) graduate student working towards a Master of Healthcare Administration.

She is a youth advisor for the Path2Purpose (P2P) national social media mental health campaign and assists in implementing the P2P research study addressing adolescent depression and anxiety prevention working in conjunction with KSB Hospital.

She is extremely enthusiastic and has worked to get as much experience in a variety of healthcare settings including Erie Family Health Centers, Shirley Ryan AbilityLab, CGH Medical Center, and the Mabley Developmental Center. Aubree grew up in Montmorency Township about 10 miles south of Rock Falls in rural Whiteside County.



Aubree Schmitt  
IRHA Student Board Member



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## **Speaking Up about HIV Stigma: Illinois HIV Care Connect Launches “Speaking Up About HIV Stigma” Campaign in Spanish to Encourage Social Media Engagement**

Illinois HIV Care Connect launched its “Speaking Up About HIV Stigma” campaign in Spanish in late October. The campaign features persons living with HIV speaking frankly about HIV stigma, how it has affected their lives, and what they believe needs to be done to overcome HIV stigma in society.

“The campaign builds upon the initial series of interviews featured in English with additional interviews being added throughout the year in both English and Spanish,” said Melvin Laureano, the Assistant Director of HIV Programs.

“Our ‘Speaking Up About HIV Stigma’ campaign provides persons living with HIV a forum for talking about an important topic,” said Michael Maginn, the Illinois HIV Care Connect project manager. “We hope to create a public conversation to discuss issues relating to HIV stigma, how it remains unnecessarily harmful to those living with HIV, and what we can do to make HIV stigma a thing of the past.”

The campaign has special relevance during a time when many individuals living with HIV are also dealing with racial discrimination and the COVID-19 pandemic. “I feel like I’m living through three epidemics: COVID, racism and HIV,” said Chris Wade, who provided a testimonial as a person living with HIV for the campaign. “When you look at all this, you can see that we’re finding ourselves in the same position, dealing with the same population. There’s clear indications of the social determinants of health within certain populations, and we need to start addressing that.”

“Speaking Up About HIV Stigma” is the seventh campaign from Illinois HIV Care Connect on issues affecting persons living with HIV in Illinois. Previous HIV-centered campaigns included mental health, staying in care, viral suppression, treatment as prevention, social determinants of health, and youth. Illinois HIV Care Connect is funded by the Illinois Department of Public Health.

“In all of our campaigns, our goal is to create a better acceptance of HIV as a condition that can be prevented and treated, just as any other medical condition,” said Jeffery Erdman, associate executive director of the Illinois Public Health Association, which administers the program. “Persons with HIV can live long, healthy and fulfilling lives, thanks to improvements in care and the dedication of healthcare professionals who treat and support them.”

Illinois HIV Care Connect is a statewide network providing medical case management, health care and support services to people living with HIV. Illinois HIV Care Connect’s eight lead agency offices serve people living with HIV in all of Illinois’ 102 counties. Individuals wishing to add their voices on this topic can comment on Twitter and Instagram via the handle, ILCareConnect, and on the Facebook pages, ILCareConnect and ILCareConnectSpanish. For more information, please visit: <https://hivcareconnect.com>.



**Melvin Laureano  
Assistant Director, HIV  
Programs  
Illinois Public Health  
Association**



## Mental Health Campaign Aims to Build Teen Resilience During COVID and Beyond

*Path 2 Purpose (P2P) Campaign Looks to Help Teens in Rural Communities Through Crisis*

Researchers at UIC College of Medicine have been studying ways to build resilience and prevent depression among teens for years, thanks to major funding from organizations like the Patient-Centered Outcomes Research Institute. Now they are expanding their work to include a public health campaign to build resilience among youth ages 13-18 during the COVID-19 pandemic.

Path 2 Purpose (P2P), a mental health campaign for youth ages 13-18, aims to teach teens to manage stress and beat the blues with mindfulness, stress-reduction, and relationship-building skills online. Drawing on two decades of research into adolescent depression, P2P uses digital media, toolkits, blog posts, and even comic books to help teens struggling with depression and anxiety cope, now also during the COVID crisis.

Earlier in the summer, a [Centers for Disease Control and Prevention \(CDC\) survey](#) of 5,412 young adults between the ages of 18 and 24 found that 25.5% of respondents reported having seriously considered suicide in the previous 30 days.

“Depression, anxiety, and even suicide have been increasing across the country,” observes Diane Potts, MA, MEd, site investigator for the Path 2 Purpose, “It is alarming and our rural communities are especially vulnerable.” Potts notes that stigma around mental health needs and a lack of resources are factors that make these issues more acute for rural communities. “Having the P2P Campaign reach youth online through social media in areas where there is a lack of mental health resources could have a major impact on teens experiencing symptoms of depression and anxiety.”

The Path 2 Purpose Campaign is based on a long-term adolescent depression prevention study using public health strategies for mental health by enhancing community supports. The study component is ongoing and currently accepting young people, ages 13-18, in Illinois, Kentucky, and Massachusetts. The P2P digital platform based at <https://www.path2purpose.info/> is nationwide and will be updated with new tips, suggestions, and COVID-specific storylines every week.

A P2P campaign outreach group, consisting of rural high school students, college students, social workers, teachers, and counselors, is focused on assisting with the address of mental health within rural communities throughout Illinois.

You can help spread the word online by sharing the website <https://www.path2purpose.info/>, encouraging involvement in the study <https://bit.ly/3jKigu9> or promoting P2P through your organization’s digital channels at Instagram ([https://www.instagram.com/path2purpose\\_campaign/](https://www.instagram.com/path2purpose_campaign/)), Facebook (<https://www.facebook.com/path2purposecampaign>), and Twitter (<https://twitter.com/Path2Purpose>).

Evidence-based mental health tips and techniques to help cope with the COVID outbreak, the stay-at-home blues, depression, anxiety, and more can be found at <https://www.path2purpose.info/> Learn more about the free, voluntary research study called Path 2 Purpose (P2P) at 1-877-268-PATH (7284); <http://path2purpose.uic.edu> or [path2purpose@uic.edu](mailto:path2purpose@uic.edu). Use this link to sign-up today: <https://is.gd/path2purpose>.



**Diane M. Potts, MA, MEd**  
**IRHA Board Member,**  
**Secretary**

## IRHA Scholarship Recipient Providing Rural Social Work Services

In the spring 2020, Mary Adams received a Behavioral Health Scholarship that went towards her master's in social work degree from the University of Illinois. We caught up with Mary recently and were please to learn that she is putting her degree to work in a rural setting. Ms. Adams is a family therapist in the Adoption Support and Preservation program with The Baby Fold. As part of their services, they provide individual and family therapy, parent education, and advocacy and referral to other providers for holistic care to children who have been adopted and their families. Many clients have co-occurring health conditions and are located in rural communities, so being able to connect them with healthcare providers who understand the developmental impacts of childhood trauma is vital. Some of the rural counties the Baby Fold serves include:



Mary Adams

- Christian
- Clark
- Coles
- Cumberland
- DeWitt
- Douglas
- Edgar
- Ford
- Iroquois
- Logan
- Macon
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