RURAL HOSPITAL INTERVENTIONS FOR COVID-19
Resources and References

Figure 1: Nursing staff at Wilson Medical Center, Neodesha, KS

May 28, 2020

COVID-19 Update for Rural Hospitals & Health Systems

View stories from the field and other resources
The AHA remains committed to helping rural hospitals and health systems address the COVID-19 pandemic in their communities. Many states are removing restrictions under new local, state and federal guidelines, and hospitals are resuming non-emergency procedures.

In this newsletter, you’ll find a wealth of new assets to help you meet your communities’ needs amid the shifting COVID-19 landscape. Thank you for all you do. You are our hospital heroes.

New AHA fact sheet: Rural Community Hospital Demonstration
The Rural Community Hospital demonstration tests an alternative payment model for small rural hospitals in response to concerns that these facilities face financial difficulties with Medicare’s inpatient prospective payment system. In this AHA fact sheet, read the basis for our position that Congress should extend the RCH program for an additional five years and require a case mix adjustment be applied to the target amount in order to account for fluctuations in patient acuity.

Letter from Rural Health Services advocate
In this letter to rural health care leaders, Marty Fattig, CEO of Nemaha County Hospital in Auburn, Neb., shares the value of support from AHA’s Rural Hospital Executive Community. “The feedback continues to be positive and we encourage our colleagues from across rural America to use this resource for problem solving and knowledge transfer,” Fattig writes. “This is a safe and secure platform to examine key operational and management priorities with input from rural health care subject matter experts and thought leaders.”

New Pathways to Recovery resource
The AHA recently shared with members COVID-19 Pathways to Recovery, an updated resource which includes considerations, questions and checklists for hospitals and health systems to consider as they work toward a safe, orderly return to providing comprehensive health care services to their communities. A recently formed AHA Board Task Force led the development of the compendium, drawing from input from many association members.

New AHA Connect App
The AHA has a new members-only app designed to help you stay current with the latest health policy news and legislative updates. The app offers a personalized experience through customization according to your issue interests, enables you to contact your congressional representatives with a single tap and participate in discussion groups. The app includes a link to the AHA Rural Forum digital community. Learn more here (https://www.aha.org/advocacy/2020-04-16-introducing-ahas-new-app-my-aha-connect#download).

A panel of 4 experts discussed federal policy emerging from Congress and the Administration under COVID-19 focusing on rural health priorities and took questions from the audience. They reviewed emergency funding, Medicare and Medicaid payment improvements, telehealth, regulatory relief, 340B drug pricing, access to PPE and steps toward recovery.

AHA webinar on rural hospitals’ efforts to manage COVID-19 - Replay
The AHA April 14 hosted a webinar with speakers from two rural hospitals sharing their real-time experiences and promising practices as they deliver care to COVID-19 patients. The webinar included an opportunity for questions and answers. A replay of this highly evaluated program is available at http://sponsored.aha.org/2020-04-14-Managing-COVID19-in-RuralCommunities-webinar-replay.html.

Webinar replay: Alliance for Health Policy rural health leaders discuss COVID-19
The Alliance for Health Policy’s April 22 webinar featuring rural health experts discussing the COVID-19 crisis is now available for replay. Panelists discussed how rural hospitals and health care entities are responding to the COVID-19 pandemic, with insights from Scott Graham, CEO of Three Rivers & North Valley Hospitals in Washington state, Jacob Warren, director at the Center for Rural Health and Health Disparities at Mercer University, and Mike Brumage, medical director at Cabin Creek Health Systems. View the replay here (http://www.allhealthpolicy.org/covid-19-webinar-series-session-11-rural-health-system-response/).
Rural Hospital Interventions for COVID-19 Podcasts

As the COVID-19 outbreak evolves, AHA has captured seven inspirational stories and lessons learned of how rural hospitals and health systems are working to increase access points, deliver care, improve safety and meet the needs of the residents of their communities. These form a growing compendium of case examples on rural hospital interventions for COVID-19.

We have interviewed the CEOs from some of these case examples and in their own words, they share their planning, implementation and lessons learned so that others may benefit from their experiences. They are provided as podcasts as part of the AHA Advancing Health series.

Preparation for a COVID-19 Surge and its Aftermath – Marshall Medical Center
May 13, 2020
For this podcast we hear the story of hospital heroes from the perspective of Siri Nelson, CEO of Marshall Medical Center located in the foothills of the Sierra Nevada Mountains in Northern California. Marshall is a full service, 125-bed not-for-profit hospital with a Level 3 trauma center serving El Dorado and its neighboring counties.

Kings’ Daughters Medical Center: Meeting the Challenge of COVID-19
May 6, 2020
For this podcast, we honor our hospital heroes and focus on surviving the surge from the perspective of Alvin Hoover, CEO, King’s Daughters Medical Center, Brookhaven, Mississippi, a 99-bed sole community hospital.

Surviving the Coronavirus Surge – Margaret Mary Healthcare, Batesville, Ind.
Apr 29, 2020
For this podcast, we honor our hospital heroes and focus on surviving the surge from the perspective of Tim Putnam, CEO, Margaret Mary Healthcare, Batesville, Indiana, a 25-bed Critical Access Hospital.
April 9, 2020

Resources to Help Rural Hospitals and Health Systems Navigate COVID-19

View stories from the field and other resources

The AHA is hard at work advocating for the needs of rural hospitals and health systems amidst the COVID-19 pandemic, working with Congress and the administration to ensure the frontlines of health care – hospitals, physicians and nurses – remain a priority for federal assistance.

During these unprecedented times we know that there are many challenges, especially for rural hospitals. But we're inspired to see so many rural hospitals stepping up to meet this moment in our history. Below are some case studies featuring rural hospitals that may help you quickly implement your own solutions to help care for patients and your community, as well as additional resources that you may find helpful.

Case Studies

- A case study from Opelousas General Health System in St. Landry Parish explains how its associated community health consortium confront the challenges of the COVID-19 pandemic in rural Louisiana.
- A case study from St. James Parish Hospital demonstrates how local government and community partners accelerate coordinated communications efforts to slow the virus' spread in rural Lutcher, Louisiana.
- A case study from Wilson Medical Center, Neodesha, Kan., which identifies consumer conscious approaches to testing and caring for patients and community collaboration to acquire PPE.
- A case study from Marshall Medical Center, Placerville, Calif., which outlines four stages of planning and implementation the hospital has undertaken to prepare for COVID-19.
- A case study on key lessons learned from Katherine Bethea Shaw Hospital in Dixon, Ill., which used its ambulance garage as its drive-through site to rapidly test patients for COVID-19.
- A case study from Southern Humboldt Community Healthcare District (SoHum Health), in Garberville, Calif., on how it is proactively addressing social determinants of health for seniors during the COVID-19 pandemic.
- A case study from Margaret Mary Hospital in Batesville, Ind., a not-for-profit, critical access hospital on how it is handling its COVID-19 surge.
- A case study from King’s Daughters Medical Center in rural Mississippi, on how it is implementing a variety of strategic and operational shifts in anticipation of an April surge of COVID-19 patients.
- A case study on how Riverwood Healthcare Center in Aitkin, Minn., deployed a virtual care model for patients amidst the COVID-19 pandemic.

For the full compendium of resources, view AHA’s updated Rural Health Services webpage.

April 1, 2020

Summary of CARES Act Provisions to Help Rural Hospitals; CMS to Host April 2 Call on Medicare Accelerated Payment Program

View the provisions that support the needs of rural hospitals.
The Coronavirus Aid, Relief, and Economic Security (CARES) Act, signed into law on March 27, provides resources and flexibility for rural hospitals. The legislation will help rural hospitals and critical access hospitals that are in dire financial need due to this pandemic.

While this legislation is an important first step forward, more will need to be done for rural providers, patients and communities to deal with the unprecedented challenge of this virus. The AHA will continue to work with Congress and the administration to make sure providers and personnel on the front lines – hospitals, physicians and nurses – remain prioritized for future federal assistance as the COVID-19 pandemic spreads.

View the AHA’s two-page fact sheet outlining provisions to help rural hospitals. The AHA has urged the Department of Health and Human Services and Centers for Medicare & Medicaid Services to directly and expediently distribute to hospitals and health systems funds from the Public Health and Social Services Emergency Fund that were designated for providers in the CARES Act.

For additional information, please contact Erika Rogan at erogan@aha.org.

Additional Resources

Small-town community and hospital confront COVID-19 together
When COVID-19 arrived in the small town of Cynthiana, Kentucky, the residents of this hardworking community refused to let fear set in. They leaned on Harrison Memorial Hospital to provide accurate and easy-to-understand information about the virus and its potential spread, education and resources to stay safe and a sense of calm to help people cope. In return, the community responded. Read about how the community returned the favor.

Arizona hospital uses social media to help with behavioral health care during pandemic
Summit Healthcare, a nonprofit medical center in rural Navajo County in Arizona, launched a video series on the hospital’s YouTube channel about managing stress during these unprecedented and unnerving times. Read more about the resource that uses a Navajo story to make the resource highly relevant to its audience.

A small, rural hospital shows impact of COVID-19 on its community
At small rural hospitals, the challenges of fighting COVID-19 can be particularly intense. Staff on the front lines at Margaret Mary Health (MMH) in Batesville, Ind., shared “A View from the Frontlines of the COVID Pandemic” with their community. MMH has had 37% of lab tests come back positive for COVID-19, much higher than the 20% the state of Indiana had observed, on average.

A CAH shares tips for managing COVID-19
Wilson Medical Center, a Neodesha, Kan.-based hospital, transformed its care delivery following the state’s stay-at-home order because of the pandemic. Read more about what the leaders and staff learned.
Wellness pod nurtures health care workers
Cody Regional Health in Wyoming created a wellness pod for hardworking staff to care for themselves while fighting COVID-19. The wellness area includes a meditation room, eight bedrooms, laundry and shower facilities, on-site access to licensed therapists, games and an exercise area. Read more.

Trustees share messages with rural hospital staff
At Coffey Health System in Burlington, Kans., the board of trustees took time to create a video of heartfelt messages to show its appreciation to hospital staff working particularly hard during the COVID-19 emergency. Read more about the overwhelming response.

CMS COVID-19 State Medicaid & CHIP Telehealth Toolkit.
Although telehealth services have been available in many states for decades, the recent public health emergency (PHE) resulting from COVID-19 has accelerated the interest in service delivery through telehealth. The purpose of this document is to identify for states the policy topics that should be addressed in order to facilitate widespread adoption of telehealth services, especially when they reside outside the immediate authority of a Medicaid or CHIP program. https://www.medicaid.gov/medicaid/benefits/downloads/medicaid-chip-telehealth-toolkit.pdf

Tool to Estimate Hospital Surge Capacity: CDC released COVID19Surge, which is a spreadsheet-based tool that hospital administrators and public health officials can use to estimate the surge in demand for hospital-based services during the COVID-19 pandemic. A user of COVID19Surge can produce estimates of the number of COVID-19 patients that need to be hospitalized, the number requiring ICU care, and the number requiring ventilator support. The user can then compare those estimates with hospital capacity, using either existing capacity or estimates of expanded capacity.

AHA releases updated resource for members on COVID-19 pathways to recovery. The AHA today shared with members an updated resource, COVID-19 Pathways to Recovery, which includes considerations, questions and checklists for hospitals and health systems to consider as they work toward a safe, orderly return to providing comprehensive health care services to their communities. The second installment of this resource focuses on support and ancillary services, plant operations/environment of care, financial management and governance. The first part of the resource covered workforce, testing and contact tracing, internal and external communications, and the supply chain.

Information on Contact Tracing: CDC released new information on Contact Tracing : Part of a Multipronged Approach to Fight the COVID-19 Pandemic. Contact tracing, a core disease control measure employed by local and state health department personnel for decades, is a key strategy for preventing further spread of COVID-19. Immediate action is needed. Communities must scale up and train a large contact tracer workforce and work collaboratively across public and private agencies to stop the transmission of COVID-19. The information highlights basic principles of contact tracing to stop COVID-19 transmission; detailed guidance for health departments and potential contact tracers is forthcoming.

Maintaining financial viability: Stroudwater Associates developed a sample 26-week cash planning document hospitals should use to prepare cash projections and identify resources for the coming weeks during the COVID-19 pandemic. Visit this link to download the workbook.

Administration urged to increase number of doctors in rural, medically underserved areas
A bipartisan group of senators and representatives this week urged the administration to resume premium processing for physicians seeking employment-based visas to provide rural communities with access to foreign physicians who have just completed their medical training in the U.S. In March, the U.S. Citizenship and Immigration Services suspended premium processing of all I-129 and I-140 forms, including those needed for Conrad State 30 program waivers, due to the COVID-19 crisis. In a statement, AHA said it supports this effort "because it will increase the number of physicians on the front lines providing care to patients during the ongoing public health emergency."
Groups launch 'Protect the Heroes Campaign'
The Creative Coalition, Association for Healthcare Philanthropy, and the AHA April 7 launched the "Protect the Heroes" campaign, which allows the general public to make direct impact donations to America's hospitals and health systems. Every dollar raised from Protect the Heroes goes directly to the donor's choice of local hospital to purchase personal protective equipment and other support for their local health care workers to fight COVID-19. Individuals can visit the website to be connected to a local hospital of their choosing and contribute to hospital emergency relief funds. Each hospital will determine where funds should be applied.

Businesses offer free and discounted services for front-line health care workers
As the women and men in America's hospitals and health systems heroically fight COVID-19 on behalf of their patients and communities, a number of companies are offering free and discounted services to front-line health care workers. Participating groups include Hilton, Marriott, United, Delta, Starbucks and Uber. Find more information here. Please note that the AHA is sharing information, but is not in a position to guarantee free or discounted services.

501(c)(3) hospitals invited to apply for Novartis US Foundation COVID-19 local-relief funds
The Novartis US Foundation has established a $5 million fund to support local initiatives and communities impacted by the COVID-19 crisis. Hospitals that are verified 501(c)(3) organization are invited to apply for grants in the range of $100,000 to $250,000 for programs that strengthen local and national health care infrastructure to meet increased demand and protect frontline health workers; help establish digital platforms for COVID-19-related data collection, remote delivery of health care and effective dissemination of important public health information; and create or enhance new community health programs specific to the pandemic response. Research and development efforts related to COVID-19 are not eligible.

App links PPE donors with potential recipients
The AHA has partnered with Microsoft, Kaiser Permanente, consulting firm Kearney, Merit Solutions and UPS to launch Protecting People Everywhere, an app-powered initiative that matches individuals and organizations donating personal protective equipment with local hospitals based on need. The HealthEquip™ app also will track PPE donations and manage shipping through UPS to hospitals. The AHA is sharing the app with hospitals through its 100 Million Mask Challenge. Read more details

For additional information, please contact John Supplitt at jsupplitt@aha.org.

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