June 25, 2020

COVID-19 Update for Rural Hospitals and Health Systems

View stories from the field and important resources

As cities and states begin the process of re-opening, AHA remains committed to helping rural hospitals and health systems combat and recover from the COVID-19 public health pandemic. We are aware that many rural health organizations are resuming non-emergency, in-person care to treat patients; know that we are here to help you make that transition as smooth as possible. The AHA created a national ad highlighting how hospitals are safe havens for treatment even during these unprecedented times.

In addition, the AHA is urging Congress to provide more funding and additional assistance to hospitals to help address the challenges COVID-19 has wrought, including full forgiveness of accelerated payments, liability protection, funding for front-line health care heroes, coverage for additional telehealth services and many more rural specific priorities. You can view the full list detailing those items here.

The AHA also is hosting a virtual advocacy day June 30 at 2 p.m. ET with a live presentation with AHA President and CEO Rick Pollack and AHA Executive Vice President Tom Nickels as they give the latest updates on the next COVID-19 relief package and provide resources and ways you can engage with your lawmakers virtually. As Congress considers additional COVID-19 relief actions, we need to make sure hospital and health systems’ priorities are at the top of the list. Click here to register.

In this edition of the Rural Health Services special newsletter, you’ll find the latest resources to help you navigate the new normal. Any questions or concerns may be shared with John Supplitt, AHA’s senior director of member engagement at jsupplitt@aha.org.

NEW TOOLS AND RESOURCES
This case study on St. Landry Parish, a mostly rural area 60 miles west of Baton Rouge, La., shares how it effectively collaborated with Opelousas General Health System, the area’s largest health care provider, to enlist the community and local government to address the area’s rapidly rising cases of COVID-19.

This case study shares how St. James Parish Hospital in rural Lutcher, La., anticipated the pandemic’s dangers and began its preparations for COVID-19’s spread throughout the community.
View AHA’s updated Rural Health Services webpage for a full compendium of resources.


**TELEHEALTH UPDATES**

**AHA highlights actions needed to extend telehealth flexibilities.** AHA June 15 identified legislative and regulatory actions needed to maintain or extend telehealth flexibilities implemented during the COVID-19 public health emergency. Read the AHA Fact Sheet (https://www.aha.org/fact-sheets/2020-06-15-fact-sheet-making-telehealth-flexibilities-permanent-legislation) for more information.

AHA also is lending its support to a bipartisan, bicameral bill to expand telehealth access, the Health Care Broadband Expansion During COVID-19 Act.

**CDC releases guidance on telehealth benefits, strategies, safeguards.** The Centers for Disease Control and Prevention recently released guidance on using telehealth to expand access to health care services during the COVID-19 pandemic and beyond.

**FCC: Establishing a 5G fund for rural America**

The Federal Communications Commission May 26 issued a proposed rule to retarget universal service funding for mobile broadband and voice in the high-cost program to support the deployment of 5G services by establishing the 5G Fund for rural America.

**LEGISLATIVE AND REGULATORY UPDATES**

**HHS funding for hospitals serving high numbers of Medicaid and uninsured patients**

The Department of Health and Human Services June 9 announced that it will distribute $10 billion from the Public Health and Social Services Emergency Fund to hospitals that serve a disproportionate number of Medicaid patients or provide large amounts of uncompensated care. AHA issued a Special Bulletin with information on criteria for acute-care and children's hospitals' eligibility.

In addition, HHS June 11 released its methodology for the funds' distribution; see AHA's June 11 Special Bulletin for more details.

**HRSA updates guidance on COVID-19-related 340B hospital outpatient sites**

The Health Resources and Services Administration June 4 updated its guidance related to COVID-19 for 340B hospitals registering outpatient sites. HRSA also posted a COVID-19 FAQ on 340B hospital eligibility criteria, noting that it does not have the authority to waive current law 340B eligibility criteria. The AHA has advocated for greater flexibility in administering the 340B program during the COVID-19 public health emergency, including waiving the 340B hospital eligibility rules.

**AHA makes rural maternal health policy recommendations to CMS**

The AHA May 28 responded to a Centers for Medicare & Medicaid Services request for information by offering solutions for improving maternal and child health in rural communities, suggesting a number of specific actions while emphasizing the need for funding for clinician simulation and unconscious-bias training programs and highlighting strategies that rural hospitals have implemented to improve maternal health.
UPCOMING OPPORTUNITIES
AHA Leadership Team Award – August 31
AHA is accepting applications for the [AHA Rural Hospital Leadership Team Award](#), which AHA’s Rural Health Services presents to one group of individuals who has guided its hospital and community through transformational change on the road to health care reform.

HRSA funding for rural communities to treat neonatal abstinence syndrome – July 20
HRSA’s Federal Office of Rural Health Policy has released a [notice of funding opportunity](#) for the Rural Communities Opioid Response Program-Neonatal Abstinence Syndrome, for which approximately 30 grants will be awarded to rural consortia.

Technical assistance for rural hospitals – July 31
Rural hospitals can [apply](#) for targeted technical assistance to improve quality of care, maintain access to care and address the challenges that are unique to small hospitals and the towns they serve.

Apply to be a National Health Service Corps site – July 21
Health care facilities can now apply to be approved as a [National Health Service Corps](#) site. Eligible sites includes those that provide outpatient, ambulatory and primary health care services (medical, dental, and behavioral health) to people living in high-need urban and rural areas.