



# RHC BRIEFS

January 2020

## Plan 2020 with RHC Educational Opportunities

**IRHA Public  
Policy Forum**

### **January 27, 2020 - Monday**

**Columbia Club, 121 Monument Circle, Indianapolis, IN 46204**

Agenda is attached. Registration: <https://www.indianaruralhealth.org/events/2020/01/27/in-person-events/2020-public-policy-forum/> No walk ins. Please register by January 23rd.

### **Webinars:**

#### **January 29: HRSA Technical Assistant Call – Regulatory updates to RHC program**

Nathan Baugh, NARHC Director of Government Relations, will discuss recent regulatory changes affecting RHCs and the patients you serve. Included will be information on the Medicare Appropriate Use Criteria Program and its applicability to RHCs, the new Principal Care Management program update and Revisions to Chapter 13 (Medicare Benefit Policy Manual).

Webinar link is <https://hrsaseminar.adobeconnect.com/fru-rhcs/>

Listen by computer speakers or by phone. 888-790-3413 Participant/Access Code: 702321

#### **January 29: Help Writing Telehealth Grant via Webinar**

FREE grant writing webinar for the United States Rural Utilities Services Distance Learning & Telemedicine Grant (USDA DLT Grant). This webinar will cover the basics of this program as well as tips and tricks to putting all of the worksheets together for a successful submission. 11:30 am – 3 pm (ET).

RSVP at <https://www.umtrc.org/events/2020/01/29/webinars/usda-dlt-grant-webinar/>

#### **Spring Into Quality – March 18<sup>th</sup>. Save the Date**

<https://www.indianaruralhealth.org/events>

#### **IRHA Annual Conference June 16-17 with RHC tract. Save the Date**

<https://www.indianaruralhealth.org/events>

#### **NARHC Spring Institute – San Antonio March 18-20**

<https://www.web.narhc.org/assnfe/ev.asp?ID=412>

## **NARHC Fall Institute – Phoenix Oct. 26-28**

<https://www.web.narhc.org/narhc/Events.asp>

**NARHC’s New Online Introduction to RHCs Course in 45 minutes** [Learn more](#)

**NARHC’s Certified Rural Health Clinic Professional** [Learn more](#)

## **News**

### **Rural Health Clinic (RHC) and Federally Qualified Health Center (FQHC) Medicare Benefit Policy Manual Chapter 13 Update**

If you have not viewed this MLN Matters MM11575, there are some significant changes for 2020. The underlined title is the link to the overview of changes, e.g. some incident to services, CCM patient consent, etc.

### **FDA raises smoking age of tobacco from 18 to 21**

Attention clinics that counsel teen patients on the use of tobacco. On December 20, 2019, the President signed new legislation to amend the Federal Food, Drug and Cosmetic Act, to raise the **federal minimum age of sale of tobacco products from 18 to 21 years**. It is now illegal for a retailer to sell any tobacco product – **including cigarettes, cigars and e-cigarettes** – to anyone under 21. FDA will provide additional details on this issue as they become available, and the information on this page will be updated accordingly in a timely manner.

The [2019 National Youth Tobacco Survey \(NYTS\) results](#)[External Link Disclaimer](#) on e-cigarette use show that **more than 5 million U.S. middle and high school students are current e-cigarette users** (having used within the last 30 days) – with a majority reporting cartridge-based products as their usual brand.

The FDA [issued a policy prioritizing enforcement](#) against certain **unauthorized flavored e-cigarette products that appeal to kids, including fruit and mint flavors**.

(source: <https://www.fda.gov/news-events/press-announcements/fda-finalizes-enforcement-policy-unauthorized-flavored-cartridge-based-e-cigarettes-appeal-children>)

### **Proposed Bills Focus on School-based Health Services**

Senate Bill 141, titled "**School Based Health Clinics and Medicaid**" would allow the Family and Social Services Administration to apply for a Medicaid state plan amendment to provide Medicaid reimbursement for health care services and school-based services provided by a school-based health

clinic. It would also allow FSSA to seek an amendment allowing for supplemental Medicaid reimbursement payments to qualified school-based health clinics under the fee for service Medicaid program. This could be an opportunity for RHCs to partner with schools.

Senate Bill 142, which is titled as "**Medicaid Reimbursement for Schools**" would allow schools to seek Medicaid reimbursement for a wide variety of services, including those provided under an Individualized Education Plan (IEP), behavioral intervention plan or an individualized healthcare plan. Also allowable under this proposed legislation would be nursing services, psychological testing, speech services, applied behavior analysis therapy, physical therapy and several other types of services.

(Source Covering Kids and Families)

## Access to Specialty Care in RHCs

New research from NRHA members Carrie Henning-Smith and Megan Lahr looks at [access to specialty care](#) in rural health clinics. The study found that more than one of five appointments for Medicare beneficiaries, in 111 surveyed RHCs across 27 states, results in outside referrals.

“Access to timely health care services has been a long-standing issue for rural communities. There are many barriers to care that make access difficult in rural communities, including health care workforce shortages, higher poverty rates and lower insurance coverage rates, and longer distances to health care facilities compared to urban residents.”

“Rural Health Clinics (RHCs) are an essential source of primary care services in rural communities; unfortunately most are not able to provide specialty services. Yet, specialty care is particularly important for Medicare beneficiaries, given that they tend to have more complex health care needs than the general population, including chronic health conditions and functional limitations.”

Response Rates from the 111 RHCs for the Most Difficult Specialties to Find Timely Referrals For:

Mental Health/Behavioral Health/Psychiatry	29%
Neurology/Neurosurgery	17%
Dermatology	11%
Endocrinology	8%
Rheumatology	8%
Pain Management	6%
Urology	4%
Others	4%

RHCs also cited dental, GI, cardiology, ENT, inpatient psychiatry, inpatient rehab, nephrology, orthopedics, orthopedic oncology, and pulmonology. An additional challenge with dental is that traditional Medicare does not cover dental. RHC providers identified barriers to access for these specialties: lack of specialty providers, limited appointment availability, distance and transportation, not accepting insurance, etc.

The study “found that mental health care is the greatest specialty care need for rural Medicare beneficiaries. This finding is consistent with previous studies showing this as a major issue for rural older adults and individuals with disabilities in need of long-term care.”

“There are over 6,000 Health Professional Shortage Areas for Mental Health providers in the U.S., and over 60% are in rural or partially rural areas that need over 4,000 additional practitioners.”

Recall that mental/behavioral health services are included in the scope of RHC services; various MH provider types are billable. The LCSW is the most common provider available for rural communities or a telehealth arrangement with a CMHC or private mental health practitioner.

The study suggested, “greater incentives to encourage specialists to practice in rural areas... and additional utilization of telehealth services for specialty care. These solutions could alleviate barriers of limited providers and appointment availability, as well as mitigate some of the distance and transportation issues faced by beneficiaries.” Other areas to work on would be for more specialties to accept Medicare and participate in some Medicare Advantage networks that are becoming more popular with rural seniors. Continue to look for solutions to the rural transportation dilemma. It was noted that some Medicare Advantage plans offer non-emergency transportation.

## Resources – Tools

### ICD-10-CM Browser Tool

Use the new National Center for Health Statistics [ICD-10-CM Browser Tool](#) to:

- Search for ICD-10-CM codes
- Understand how to use the codes
- Access multiple fiscal year version sets with comprehensive results

### Determine the Complexity of a Test - CLIA

<https://www.cdc.gov/clia/test-complexities.html>

<https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/Downloads/waivetbl.pdf>

### Indiana Rural Health Association

<https://www.indianaruralhealth.org/rural-health-clinics>

Dana Stidham RHC contact  
dstidham@indianarha.org