

Maryland Rural Health Association

Issue 18

Summer (June-July-Aug) 2005



For more information on MRHA call 410.226.5527

Or visit our web site at:

WWW.MDRURALHEALTH.ORG

2005 Events:

10th Annual Skill-building Workshop for State Rural Health Associations; July 19-20, 2005; Lied Lodge & Conference Center; Nebraska City, NE. Contact Eli Briggs for more information: briggs@NRHArural.org

2005 Maryland Rural Summit

this year's theme is "Workforce Development: Investment in our Future", to be held October 27-28, 2005; Wisp Resort at Deep Creek Lake, MD. For more information call 410.226.5527 or email aoc@shore.intercom.net

4th Annual NRHA Critical Access Hospital Conference and Rural Health Clinic Conference; October 5-7, 2005. For more information visit www.nrharural.org

Presidents Message:

Rural Health care and Rural Health Programs are threatened as never before due to funding cuts and program eliminations proposed by the Federal House of Representatives. Programs proposed for elimination or substantial funding cuts include Title VII Health Professions Training which includes many programs directed at medical training of rural health care work force including those under the banner of the AHEC program.

Also threatened are programs such as the National Health Service Corps., Rural Health Grant programs, Rural Hospital Flexibility programs, community access health programs, and rural health research and assistance services.

The Senate Appropriations Subcommittee on Labor, Health and Human Services, restored funding to several key programs which is a great start - but there remains a long way to go including full Senate approval and reconciliation with the House.

A fuller discussion of this issue is found on the inside of this newsletter but it is absolutely critical that the rural voice is heard - and continues to be heard and reheard - by Congress to maintain these programs. The MRHA will keep you closely posted but the ball is literally in each of our courts - all of us in rural Maryland and those who support rural health must make and maintain contact with our legislators. Loud and clear all of us must speak for rural health and rural health care needs and advocate for our Legislators to support us and these programs. Nothing else will do and nothing else will succeed!

Jacob F. Frego

President

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Please feel free to submit information to be included in this newsletter and on the Calendar of Events.

2005 BOARD OF DIRECTORS:

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Rural Maryland Council

Grace Zaczek

Director
DHMH-Office of Primary Care and Rural Health

You may reach our Executive Offices at the following address:

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SpotLight Article:

We Did It!

Thanks to all of your phone calls, e-mails, and even face to face meetings with Senators and their staff, the Senate Appropriations Subcommittee on Labor, Health and Human Services (HHS), Education and related agencies restored funding to several key rural programs (see list below) at the July 13th session. The full Senate appropriations committee is expected to take up the Labor, HHS, Education, and related agencies spending bill tomorrow. Thanks to a monumental effort by NRHA members and rural supporters, we have every reason to believe that the Senate will continue to support these vital rural programs. Please remember to send your thanks to those in the Senate with whom you spoke or met.

But Stay Tuned.....

We are not out of the woods yet! After the Senate passes their version of the Labor, HHS, and Education Appropriations bill, they will have to reconcile their version of the bill with the version already passed by the House of Representatives. As you know, the House voted to drastically cut funding to rural programs. We will need your help in the coming weeks to ensure that the final appropriations bill that is passed by both the House and the Senate will support the programs on which rural Americans depend. We will send you specific information for that next effort as soon as the Conference Committee Members are named.

Senate Appropriations Subcommittee on Labor, HHS, Education, and related agencies Mark-Up Summary 7/11/05:

Title VII & VIII Health Professions Training: \$454,000,000 (.9% increase from FY05)

National Health Service Corps: \$126,796,000 (3.5% decrease from FY05)

Outreach Grants: \$39,278,000 (same as FY05)

Rural Hospital Flex Grant: \$64,180,000 (63.8% increase from FY05)

Rural Policy/Research: \$8,825,000 (same as FY05)

Rural and Community Access to Emergency Devices: \$8,927,000 (same as FY05)

State Offices of Rural Health: \$8,321,000 (same as FY05)

Rural Telehealth: \$3,888,000 (.7% decrease from FY05)

Medlearn Matters article on the new Medicare prescription drug coverage was released on Friday, July 1, 2005. "*More Web-based Educational Products Available on Medicare Prescription Drug Coverage – The Fifth in the Medlearn Matters Series*" describes new fact sheets and other educational resources available on www.medicare.gov on the web. Visit <http://www.cms.hhs.gov/medlearn/drugcoverage.asp> to view the article and other drug coverage resources for Medicare providers.

This article reprinted from NRHA Email News, July 13, 2005

MARYLAND RURAL HEALTH ASSOCIATION NEWS

 NRHA NEWS 

CALL FOR PRESENTATIONS

The Call for Presentations for the 12th Annual Rural Minority and Multicultural Health Conference "*Kaleidoscope of Rural Minority and Multicultural Health Care Issues*" to be held May 16, 2006, in Reno, Nevada, is now available on the NRHA website. Hard copies will also be mailed soon. The deadline for submission of proposals for presentations for this conference is September 16th, 2005.

PHYSICIAN RECRUITING INCENTIVES: A MOVING TARGET

By Joseph Hawkins, for HealthLeaders News

<http://www.healthleaders.com/news/feature1.php?contentid=68989>

In May 2005, the Association of American Medical Colleges held a national conference on the physician work force. Many of the leading academics and government officials who track physician supply and demand trends were there. With a few exceptions most these individuals formerly were in the group that, for years, had projected a physician surplus. It was in part as a result of these projections that Congress set a cap on the number of medical residency slots that the federal government would fund through CMS. The cap was included in the Balanced Budget Act of 1997. Until such time as the cap is lifted, it is likely that the number of physicians entering the work force each year will remain static, as it has for more than two decades. (Note how small the increase is for family practice physicians.)

 IN OTHER NEWS 

Medicaid Cost-Sharing Could Increase Uninsured, Senate Witnesses Warn

Increasing Medicaid cost-sharing through increased premiums or co-payments could deter low-income Americans from enrolling in the program and increase the number of uninsured seeking care from hospital emergency departments, health care and policy experts warned a Senate panel yesterday. The Special Committee on Aging convened the hearing on optional and mandatory Medicaid populations and benefits to solicit advice on ways to improve the program without making changes that will cost taxpayers more in the long run. Testifying on behalf of the Catholic Health Association of the United States, Sister Karin Dufault, CHA chairperson and vice president of mission leadership for Providence Health System, said the share of "uninsured patient activity" in the emergency departments of the seven Providence hospitals in Oregon has increased from 16% to 20% since the state imposed a \$6-\$20 monthly Medicaid premium and other policy changes on poor adults in 2003. The hospitals' uncompensated care had doubled over that two-year period, she said.

*This article reprinted with permission from *AHA News Now*, June 29, 2005

Cancer Information Service

US residents may wish to call the National Cancer Institute's Cancer Information Service (CIS) for personal & confidential help. The CIS is a source for the latest accurate cancer information for patients, their families, the general public, and health professionals. To talk with an information specialist, in English or in Spanish, please call 1-800-4-CANCER (1-800-422-6237). For deaf and hard of hearing callers with TTY equipment, the number is 1-800-332-8615. CIS information specialists also offer online assistance through the LiveHelp link at <http://www.cancer.gov/help>.