

A scenic view of a mountain range with a wooden boardwalk in the foreground. The boardwalk is made of dark wooden planks and is set on a grassy slope. In the background, there are rolling hills and mountains under a cloudy sky. The text is overlaid on the image.

33rd Annual Oregon Rural Health Conference

September 28-30, 2016
Portland, Oregon



The 33rd annual conference will showcase examples of how rural Oregon health care organizations are forging ahead with health care reform and meeting the challenges head-on. We hope the information shared will be a catalyst for your local solutions.

The conference begins with a follow-up to last year's *Creating a Blueprint for Rural Health in Oregon*. The session will update you on what we found when we asked rural Oregonians what minimum level of health care services they expect in their local communities. The first keynote speaker is Ian Galloway, Senior Research Associate & Oregon state community development field manager at the Federal Reserve Bank of San Francisco. Mr. Galloway's keynote is titled *Investing in the Nonmedical Determinants of Health in Rural Communities*. Tina Castanares and Margaret Neal will walk us through the realities of aging in rural Oregon, and how to plan for aging in our communities.

This year's concurrent sessions will enlighten us on home health, behavioral health, data, and recruiting for a new generation of providers. Other sessions include integration of oral health into primary care, the impact of the 2016 elections on rural health, preventing opioid overdoses, the findings of the Lewin Group's report on Oregon's incentive programs, and much more! Synopses detailing conference sessions and speakers are on the pages following the conference schedule.

Objectives

- Provide an opportunity to exchange ideas, information, and expertise among individuals and organizations engaged in or concerned with rural healthcare issues.
- Equip participants with the tools to decide the best course of action for their community.
- Provide information on changes affecting the provision of healthcare from community, state and national perspectives.
- Disseminate information and strategies on rural health policy, research, management, and practice issues.

Who Should Attend?

Rural health advocates including healthcare providers, community leaders, clinic and hospital administrators, board members, policy makers, public health professionals, and healthcare students. This is a great networking opportunity. If you are involved in rural healthcare, this conference is for you!



Lodging

A block of rooms is being held until **September 6** at The DoubleTree Hilton Portland.

Conference lodging rates per night are as follows:

- **Standard Room**
Single or Double Occupancy
\$152
- **Premium Room**
Single or Double Occupancy
\$162

To receive conference rates, reservations must be made by September 6. You must identify yourself as an attendee of the Oregon Rural Health Conference. To make a reservation, go to the reservations page:

<http://doubletree.hilton.com/en/dt/groups/personalized/R/RLLC-DT-HSU-20160927/index.jhtml>

You must make reservations by September 6, 2016 to guarantee the group rate and ensure room availability.

Registration

Registration is available here:

<https://orh.webconnex.com/2016conference>

Questions

If you have questions, please e-mail Linda Pepler at peplerl@ohsu.edu, or call her at the Office of Rural Health, 503-494-4450. We look forward to hearing from you and hope you will join us.

Fun Activities in Portland

The conference conveniently ends at 12 noon on Friday, so bring the family and plan to spend the weekend playing, shopping or sight-seeing in and around Portland, Oregon. You'd be amazed at how much there is to do! Check out Travel Portland for fun, educational, and entertaining activity suggestions!

<http://www.travelportland.com/>

33rd Annual Oregon Rural Health Conference Sessions

Wednesday September 28, 2016

Pre-Conference Meetings and Workshops

- 8 AM Registration Table Opens | [Holladay Foyer](#)
- 8:30 AM - 12 PM Rural Health Clinic (RHC) Workshop | [Holladay](#)
- 9:30 - 3 PM Statewide Area Health Education Centers (AHEC) Advisory Board Meeting & Lunch (invitation only) | [Halsey](#)
- 10 AM - 12 PM Oregon Association of Hospitals and Health Systems (OAHHS) Rural Health Reform Initiative (RHRI) Small and Rural Hospital Meeting | [Broadway/Weidler](#)
- 12 - 1:30 PM OAHHS, AHEC & RHC Workshop Networking Buffet Lunch | [Broadway/Weidler](#)

Full Conference

- 1:30 - 1:45 PM Welcome & Opening Remarks | [Holladay](#)
Scott Ekblad, Director, Oregon Office of Rural Health
- 1:45 - 3:30 PM Creating a Blueprint for Rural Health in Oregon: A Progress Update | [Holladay](#)
Harvey Licht, Senior Associate, Varela Consulting Group & Scott Ekblad, Director, Oregon Office of Rural Health
Come and learn about the progress toward creating a Blueprint for Health in Rural Oregon. People from around the state have been convening monthly since last year's conference to inform our decisions. What did stakeholders determine is the minimum level of services that rural Oregonians should expect to have available in their communities? What services were discussed and what opinions were expressed? Which communities don't offer the minimum level of health care services? Join us to find out all of this and more!
- 3:30 - 4 PM Refreshment Break & Exhibit Viewing | [Willamette](#)
- 4 - 5:30 PM Investing in the Nonmedical Determinants of Health in Rural Communities | [Holladay](#)
Ian Galloway, Senior Research Associate & Oregon state community development field manager, Federal Reserve Bank of San Francisco
- 5:30 - 7 PM Conference Reception & Exhibit Viewing | [Willamette](#)
- 7 - 8:30 PM Oregon Rural Health Association (ORHA) Board Meeting | [Weidler](#)

Thursday September 29, 2016

- 7 AM Registration Table Opens | [Holladay Foyer](#)
- 7:30 - 8:15 AM Breakfast with the Oregon Rural Health Association | [Multnomah](#)
- 8:15 - 8:30 AM Introductions and Announcements | [Multnomah](#)
Scott Ekblad, Director, Oregon Office of Rural Health
- 8:30 - 9:45 AM Our Aging Neighbors—Are We Ready? | [Multnomah](#)
Tina Castanares, Convener, Aging in the Gorge Alliance, & Margaret Neal, Director-Professor, PSU Institute on Aging
10,000 Americans turn 65 every day, and this unprecedented demographic bulge is even bigger in most rural areas. The fastest growing demographic group is age 85 and up (age 100 and older is the third fastest growing). Two third of elders have at least one significant disability. Where will they live? Who will take care of them? And who will look out for the caregivers? As a society, we're not well prepared now. But we can get there together if we do good planning and program development – quickly. The presenters will share experiences and challenges of a new grassroots group in rural Oregon working on just these issues.

Thursday September 29, 2016 Continued

9:45 - 10:15 AM

[Refreshment Break & Exhibit Viewing | Willamette](#)

10:15 - 11:30 AM

**Access to Home Health Care in Rural Oregon:
Challenges Facing Rural Home Health Agencies**

[Broadway/Weidler](#)

Three Rural Home Health Agencies: TBD

Home Health Agencies are a critical resource for homebound people to receive care without leaving their communities. There are currently 31 rural Home Health Agencies in Oregon. Eight rural counties do not have an HHA; three of these are frontier counties. Some Home Health Agencies are reporting challenges with the scale and efficiency that is needed to meet administrative and regulatory requirements and two HHAs have recently closed. This session will present findings from ORH's recent assessment of the financial and operational strengths and weaknesses of Oregon's rural HHAs. Staff from three rural HHAs will talk about their community needs and their current challenges in meeting them.

**Charting New Territory: Integrating Behavioral Health in Rural Group Practice with
Community Partnerships | [Holladay](#)**

Shay Stacer, Behavioral Health Provider, North Bend Medical Center

This presentation will discuss implementation of integrated behavioral health services into primary care at North Bend Medical Center in Coos Bay, a multi-specialty for-profit group practice. The information will address our successes and roadblocks over the past 2 years of implementation and contribute ideas to the road map for other rural Oregon healthcare sites. Points of discussion will include stakeholder buy-in, funding and sustainability, recruiting, barriers, and the challenging goal of narrowing the gap between medicine and mental health and moving toward flexible integrated team-based models of care.

Oral Health Equity: Integrating Oral Health with Primary Care Across the Lifespan | [Halsey](#)

Tony Finch, Executive Director, Oregon Oral Health Coalition and Karen Hall, Oral Health Educator, Oregon Oral Health Coalition

The treatment of oral disease is one of most expensive medical expenditures in the United States, second only to heart disease. Because of medical and dental insurance disparities, much of that money came out of the pocket of the consumer. Oral disease is painful, both physically and economically.

12 - 1:30 PM

[Awards Luncheon - Rural Health Hero of the Year and Hospital Quality | Multnomah](#)

1:30 - 1:45 PM

[Break](#)

1:45 - 3 PM

Election 2016—What does it mean for Rural Oregon? | [Multnomah](#)

*Maggie Elewaney, Vice President of Government Affairs & Policy, National Rural Health Association—Invited: **Senators Wyden and Merkley***

This session will provide a review of the federal challenges in rural health care delivery as well as federal legislative attempts to improve rural health care. It will also detail the political landscape and discuss how we can advocate together to help improve federal laws, regulations and reimbursements.

3 - 3:30 PM

[Refreshment Break & Exhibit Viewing | Willamette](#)



Thursday September 29, 2016 Continued

3:30 - 5 PM

Data Rocks! No Really it Does! | [Broadway/Weidler](#)

Paul McGinnis, Integrations Director, Greater Oregon Behavioral Health, Inc. (GOBHI) and **Ari Basil-Wagner**, Director of Organizational Development, GOBHI

For the first time, clinics in rural Oregon have access to integrated data including mental health, oral health and physical health about their patients thus fulfilling the promise of Coordinated Care Organizations of whole person care. Now that we have it, what can be done? Learn about your readiness and how to prepare to review this type of data. Interactive format allows your thoughts to be shared.

Telehealth Innovation in Rural Oregon | [Holladay](#)

Allison Lindauer, Nurse Practitioner & Researcher, OHSU Layton Aging & Alzheimer's Disease Center, **Marie Dorsey**, Pharmacist, HIV Alliance of Eugene, **Geoffrey L'Heurex**, Pharmacist, Pharmacist Medication Adherence, **Linda Mann**, Director, Community Outreach, Capitol Dental Care, **Melody Ayers**, NW Region Grants Manager, Adventist Health, and **Keith Cheung**, Chief Medical Officer, Trillium Family Services

In 2014, the Oregon Health Authority, in partnership with ORH, funded five telehealth pilot projects. This session is a facilitated discussion with all of the awardees to hear from them about their project implementation, their challenges and how their project may continue or be replicated.

Adventist Health Tillamook Medical Group

Using hot spots placed in ambulances, Community Paramedics visited high readmission risk patients and communicated directly with the Care Coordinator or provider from the patient's home.

Capitol Dental Care

Led by an Expanded Practice Dental Hygienist, telehealth-connected oral health teams to provide dental diagnostic, prevention and early intervention services to children in the Central School District of Polk County.

HIV Alliance

Telehealth and collaborative practice agreements to improve coordinated care for persons living with HIV/AIDS in rural eastern and southern Oregon.

Oregon Health & Science University: Layton Aging and Alzheimer's Disease Center

A direct-to-home telemedicine program to establish the reliability of clinical measure tools when used with telemedicine, and establish the feasibility and usability of direct-to-home video dementia care.

Trillium Family Services

Telehealth to provide psychiatric assessments, follow-up and medication management for children in residential treatment, secure inpatient programs and rural school settings.



Thursday September 29, 2016 Continued

3:30 - 5 PM

Recruiting for a New Generation | [Halsey](#)
TBA

This session focuses on how you can create a recruitment and retention strategy to attract both current and future candidates coming through training programs in Oregon. What is recruitment and retention and why is it important to focus on even when you're not hiring? Learn about ways to engage with students, what their priorities are when choosing a practice site and how to utilize community partnerships to support your work.

5 - 7 PM

Clinic & Student Reception (Invitation Only) | [Willamette](#)

Friday September 30, 2016

7:30 AM

Registration Table Opens | [Holladay Foyer](#)

8 - 9:15 AM

Networking Breakfast and Rural Student Community Research Project Presentations | [Holladay](#)

9:15 - 10:15 AM

CMS Payment Updates—New Quality Payment Program and more... | [Ross Island/Morrison Terry Cumpton](#), *Regional Rural Health Coordinator, CMS Seattle Office*

If there's anything constant, it's change, and keeping up with the latest information from CMS is important. Find out the latest on CMS's implementation of key payment rules, the latest on projects at the Innovation Center and what that means for rural providers, and get a rundown on the priorities and activities of the CMS Rural Health Council. There will be plenty of time to ask your questions.

Preventing Opioid Overdose in Oregon | [Broadway/Weidler](#)

Katrina Hedberg, *Health Officer & State Epidemiologist, Oregon Public Health Division*

In Oregon, more drug overdose deaths involve prescription opioids than any other type of drug, including alcohol, methamphetamines, heroin and cocaine. In 2013, almost 1 in 4 Oregonians received a prescription for opioid medications and Oregon ranks 2nd among all states in non-medical use of prescription pain medication. Reducing prescription drug overdose is a complex problem that will require coordinated implementation of a comprehensive set of solutions. This presentation will present data on the opioid overdose in Oregon, and outline the strategies needed to reduce prescription opioid overdose, misuse and dependency.

Oregon Incentive Review — The Lewin Report and Recommendations from the Oregon Health Policy Board | [Halsey](#)

Marc Overbeck, *Director, Primary Care Office, Health Policy and Analytics Division, Oregon Health Authority*

The 2015 Oregon Legislature directed the Oregon Health Policy Board (OHPB) to review all health care provider incentive programs and advise the 2017 Legislature on potential changes and future direction. This is your opportunity to learn what those recommendations are, how they may impact current incentive programs and how these changes might impact your health care workforce.

10:15- 10:30 AM

Break | [Holladay Foyer](#)

10:30 - 11:30 AM

Concluding Keynote | [Holladay](#)

Lynne Saxton, *Director, Oregon Health Authority*

Impact of public health modernization on rural Oregon and/or the 1115 waiver request and what it means for rural Oregon.

11:30 AM - 12 PM

Wrap-up, Prizes, & Adjourn | [Holladay](#)

Please click here to see a listing of all of this year's speakers.