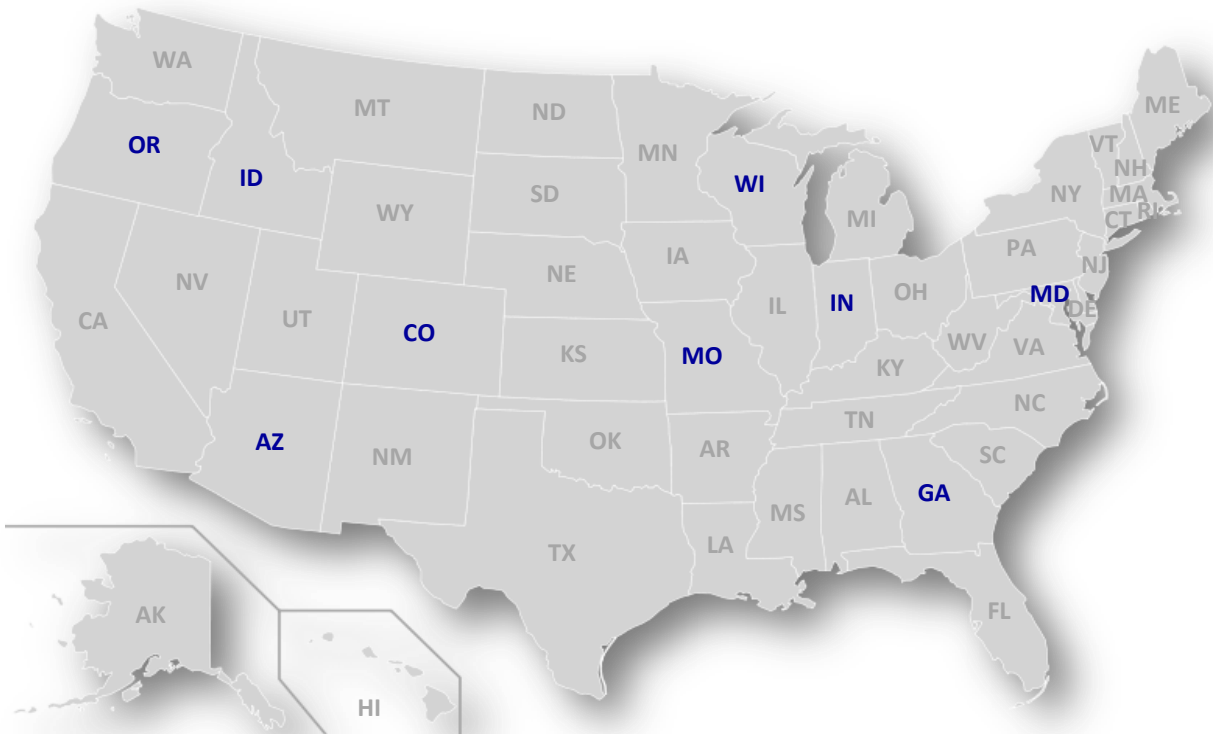




Grantee Directory

Rural Outreach Benefits Counseling Grant Program

2015 - 2018





U.S. Department of Health and Human Services
Health Resources and Services Administration



Grantee Directory

2015-2018 Rural Outreach Benefits Counseling Grant Program

The Rural Outreach Benefits Counseling Program is authorized by Section 330A of the Public Health Service Act (42 U.S.C. 254c), as amended. The Rural Outreach Benefits Counseling Program (Benefits Counseling Program) is a community-based pilot program targeted to improve outreach and service delivery in local and regional rural communities. The purpose of the three-year Benefits Counseling Program is to expand outreach, education and enrollment efforts to eligible uninsured individuals and families, and newly insured individuals and families in rural communities.

The overarching goals of this grant funding are to coordinate and conduct innovative outreach activities through a strong consortium in order to: 1) Identify and enroll uninsured individuals and families who are eligible for public health insurance such as Medicare, Medicaid, and Children's Health Insurance Program, qualified health plans offered through Health Insurance Marketplaces and/or private health insurance plans in rural communities; and 2) Educate the newly insured individuals in rural communities about their health insurance benefits, help connect them to primary care and preventive services to which they now have access, and help them retain their health insurance coverage.

Services of this program are delivered through consortiums. Consortiums bring together rural providers, agencies and community organizations to address health care problems that are not easily solved by a single entity. Activities funded under this grant focus on conducting outreach and education in settings where eligible uninsured individuals and families may be identified and enrolled in health insurance coverage. As health care increasingly moves toward a focus on enhancing value in health care delivery, applicants are encouraged to develop innovative and comprehensive approaches to improve health care coverage in their rural community.

This Directory provides contact information and a brief overview of the ten initiatives funded under the Rural Outreach Benefits Counseling grant program in the 2015 - 2018 funding cycle.

2015 - 2018 Rural Outreach Benefits Counseling Grant Program Recipients

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Arizona

Southeast Arizona Area Health Education Center, Inc. (SEAHEC)

Grant Number:	G09RH28754			
Organization Type:	Area Health Education Center			
Grantee Organization Information:	Name:	Southeast Arizona Area Health Education Center, Inc. (SEAHEC)		
	Address:	1171 W. Target Range Road		
	City:	Nogales	State:	AZ
	Tel #:	520-287- 4722		
	Website:	www.seahec.org		
Project Director's Contact Information:	Name:	Gail E. Emrick, MPH		
	Title:	Executive Director		
	Tel #:	520-287-4722		
	Fax #:			
	Email:	gemrick@seahec.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$74,954		
	August 2016 to July 2017	\$74,541		
	August 2017 to July 2018	\$74,187		
Consortium Partners:	Partner Organization	County	State	Organization Type
	*Indicates partners who have signed a Memorandum of Understanding			
	AzCHOW-AZ Community Health Outreach Worker Association	Statewide	AZ	Professional Association
	Chiricahua Community Health Center*	Cochise	AZ	Federally Qualified Health Center (FQHC)
	Cochise Health & Human Services*	Cochise	AZ	County health department
	Desert Senita Community Health Center*	Pima	AZ	Federally Qualified Health Center (FQHC)
	El Rio Community Health Center*	Pima	AZ	Federally Qualified Health Center (FQHC)
	Mariposa Community Health Center*	Santa Cruz	AZ	Federally Qualified Health Center (FQHC)
Pima Community Access Program (PCAP)*	Pima	AZ	Not-for-profit	
The communities/counties the project serves:	Benson	Cochise County		
	Bisbee	Cochise County		
	Douglas	Cochise County		
	Willcox	Cochise County		
	Nogales	Santa Cruz County		

	Rio Rico		Santa Cruz County	
	Patagonia		Santa Cruz County	
	Ajo		Pima County	
	Selected zip codes, underserved Tucson, Marana, Vail		Pima County	
The target population served:	Population	Yes	Population	Yes
	Infants		Caucasians	
	Pre-school Children		African Americans	
	School-age children (elementary)		Latinos	X
	School-age children (teens)		Native Americans	X
	Adults		Pacific Islanders	
	Elderly		Uninsured	X
	Pregnant Women		Other: (please describe)	
Description of the project:				
<p>Casa Saludable consortium provides outreach, education and enrollment services to uninsured and newly insured. We have carefully developed strategies and activities which address the unique qualities of our rural, border communities which contemplate and appropriately respond to educational, cultural, linguistic, and administrative aspects. Strategies used include:</p> <ul style="list-style-type: none"> • "In reach" - training & support of consortium partner agencies' existing staff so that they are better prepared to do education and enrollment in our constantly changing healthcare/Affordable Care Act (ACA) environment; • Building upon our established "promising practice" of a locally developed "train the trainers" (TTT) model for outreach and enrollment known as <i>Nuestra Salud</i>; and, • Use of culturally competent bilingual Community Health Workers (CHWs), also known as "<i>promotores de salud</i>" to provide appropriate outreach, education and referral to Enrollment Assistors. <p>The training model, which Casa Saludable uses, provides community level trainers the knowledge to assist individuals and families to understand the Affordable Care Act law. Those trained assist in enrolling individuals in the marketplace or in Medicaid. The Nuestra Salud training model provides the tools both in English and in Spanish. The CHWs in each county are trained by PCAP (English training) and Mariposa (Spanish training) as Master Trainers using the "Get Insured" model.</p> <p>By utilizing bilingual/bicultural CHWs, who are from our communities and have an intimate understanding of such challenges, we address identified barriers through: outreach in homes in familiar settings, including Health Start home visitation, outreach to immigrant families via <i>Ventanilla de Salud</i> program in collaboration with the Mexican Consulates. As well, we take advantage of other naturally occurring activities for education, among them nutrition education at WIC, food banks and Department of Economic Security visits and activities.</p>				
Goals/objectives/anticipated outcomes of the project:				
<p>The goal of Casa Saludable is to provide education, outreach and enrollment services in rural southern Arizona to improve health and wellbeing through increased access to and utilization of health services. Project objectives include:</p> <ul style="list-style-type: none"> • Establish an interagency consortium between an AHEC to sustain outreach, education and enrollment efforts in rural southeast Arizona; • Provide quarterly "in reach" with consortium partner staff on: the ACA and marketplace updates, coordination for outreach education and enrollment; • Train 4-8 Community Health Workers per county on ACA and benefits counseling services to uninsured in rural Southeast Arizona; • Conduct 50-60 outreach events annually, addressing health coverage options and reaching 20,000 people year 1, 14,000 people year 2, and 8,000 people in year 3; and, • Provide culturally appropriate health insurance literacy education to 25% of newly insured. 				
Federal Office of Rural Health Policy Project Officer's Contact Information:	Name:	Christina Villalobos		
	Tel #:	301-443-3590		
	Email:	cvillalobos@hrsa.gov		
	Website:	http://www.hrsa.gov/		
	Organization:	Federal Office of Rural Health Policy		

	City:	Rockville	State:	Maryland	Zip code:	20857
Technical Assistance Consultant's Contact Information:	Name:	Tamanna Patel				
	Tel #:	404-413-0306				
	Email:	Tpatel25@gsu.edu				
	Website:	http://www.ruralhealthlink.org/				
	Organization:	Georgia Health Policy Center				
	City:	Atlanta	State:	Georgia	Zip code:	30303

Colorado

Tri-County Health Network

Grant Number:	G09RH28756			
Organization Type:	Network			
Grantee Organization Information:	Name:	Tri-County Health Network		
	Address:	P.O. Box 4222		
	City:	Telluride	State:	CO
	Tel #:	970-708-7096		
	Website:	www.tchnetwork.org		
Project Director's Contact Information:	Name:	Lynn Borup		
	Title:	Executive Director		
	Tel #:	970-708-7096		
	Fax #:	888-595-3242		
	Email:	lynn@telluridefoundation.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization *Indicates partners who have signed a Memorandum of Understanding	County	State	Organization Type
	Center for Mental Health*	Multi	CO	Mental Health Center
	Basin Clinic*	Montrose	CO	Rural Health Clinic
	River Valley Family Health Center*	Montrose	CO	Federally Qualified Health Center (FQHC)
	Telluride Medical Center*	San Miguel	CO	Community Clinic
	Uncompahgre Medical Center*	San Miguel	CO	Federally Qualified Health Center (FQHC)
	Telluride Foundation*	San Miguel	CO	Community Foundation
	Montrose Memorial Hospital*	Montrose	CO	Regional Medical Center
The communities/counties the project serves:	San Miguel, Ouray , and Montrose Counties			
The target population served:	Population	Yes	Population	Yes
	Infants	X	Caucasians	X
	Pre-school Children	X	African Americans	X
	School-age children (elementary)	X	Latinos	X
	School-age children (teens)	X	Native Americans	X
	Adults	X	Pacific Islanders	X

	Elderly	X	Uninsured	X
	Pregnant Women	X	Other: (please describe)	
Description of the project:				
<p>Tri-County Health Network (TCHNetwork) identifies and enrolls uninsured rural community members living in southwest Colorado who are eligible for public health insurance such as Medicare, Medicaid, and CHP+, and qualified health plans offered through Colorado's Health Insurance Marketplace. Program staff educates newly insured individuals about their health insurance benefits, help connect them to primary care and preventive services, and help them retain their health insurance coverage.</p> <p>TCHNetwork's program includes the following culturally and linguistically appropriate activities:</p> <ol style="list-style-type: none"> 1) Develop and disseminate educational information 2) In-reach through TCHNetwork programs to identify underserved and uninsured individuals needing assistance and education 3) Develop new community partnerships with nontraditional community stakeholders 4) Attend community meetings to promote our role in assistance and education 5) Develop and conduct presentations to educate the community 6) Assist community members in enrolling and retaining health insurance 				
Goals/objectives/anticipated outcomes of the project:				
<p>Expected Outcomes/Goals:</p> <ol style="list-style-type: none"> 1) Community engaged and informed about their coverage options 2) Increase the number of community members enrolled in and/or who retain appropriate health insurance 3) Increase the number of individuals who understand their benefits, including preventive care and how to connect with a primary care provider 4) Increase the number of individuals seeking preventive services and care when needed, resulting in an overall healthier community 				
Federal Office of Rural Health Policy Project Officer's Contact Information:	Name:	Christina Villalobos		
	Tel #:	301-443-3590		
	Email:	cvillalobos@hrsa.gov		
	Website:	http://www.hrsa.gov/		
	Organization:	Federal Office of Rural Health Policy		
	City:	Rockville	State:	Maryland
Technical Assistance Consultant's Contact Information:	Name:	John Butts		
	Tel #:	404-413-2083		
	Email:	jbutts@gsu.edu		
	Website:	http://www.ruralhealthlink.org/		
	Organization:	Georgia Health Policy Center		
	City:	Atlanta	State:	Georgia

Georgia

Rural Health Works, Inc.

Grant Number:	G09RH28751			
Organization Type:	Not-for-profit			
Grantee Organization Information:	Name:	Rural Health Works, Inc.		
	Address:	1960 GA Highway 247 Connector		
	City:	Byron	State:	GA
	Tel #:	478-254-5210		
	Website:			
Project Director's Contact Information:	Name:	Fred Ammons		
	Title:			
	Tel #:	478-254-5210		
	Fax #:	478-254-5239		
	Email:	fammons@chwg.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization	County	State	Organization Type
	Meadows Regional Medical Center		GA	
	South East Regional Primary Care Corporation		GA	
	Georgia Physicians for Accountable Care		GA	
	Health Care Central dba Community Health Works		GA	
The communities/counties the project serves:	Appling	Montgomery		
	Candler	Tattnell		
	Emanuel	Toombs		
The target population served:	Population	Yes	Population	Yes
	Infants		Caucasians	
	Pre-school Children		African Americans	
	School-age children (elementary)		Latinos	
	School-age children (teens)		Native Americans	
	Adults	X	Pacific Islanders	
	Elderly		Uninsured	
Pregnant Women		Other: (Farmworkers)	X	
Description of the project:				

In cooperation with Health Care Central Georgia dba Community Health Works (CHW), Meadows Regional Medical Center (Meadows), South East Regional Primary Care Corporation (SRPCC), and Georgia Physicians for Accountable Care (GPAC), Rural Health Works (RHW), the Harvesting Health Initiative assists the uninsured residents of Georgia's Onion Belt enrolled health insurance and access primary care. The Initiative targets the 114,064 residents of an approximately 57,000 mile tract in the heart of Georgia's Onion Belt comprised of Appling, Candler, Emanuel, and Montgomery, Tattnall, and Toombs counties. All six counties are designated as whole county Medically Underserved Areas and all counties contain multiple types of Health Professional Shortage Areas.

Goals/objectives/anticipated outcomes of the project:

The Initiative is based on four main goals:

- 1) Combat the political stigma of "Obamacare" within rural conservative populations;
- 2) Increase the overall health literacy in the target area;
- 3) Target the migrant farm worker population with tailored outreach; and,
- 4) Engage the provider community in outreach and enrollment strategies.

Federal Office of Rural Health Policy Project Officer's Contact Information:	Name:	Christina Villalobos			
	Tel #:	301-443-3590			
	Email:	cvillalobos@hrsa.gov			
	Website:	http://www.hrsa.gov/			
	Organization:	Federal Office of Rural Health Policy			
	City:	Rockville	State:	Maryland	Zip code: 20857
Technical Assistance Consultant's Contact Information:	Name:	Tamanna Patel			
	Tel #:	404-413-0306			
	Email:	Tpatel25@gsu.edu			
	Website:	http://www.ruralhealthlink.org/			
	Organization:	Georgia Health Policy Center			
	City:	Atlanta	State:	Georgia	Zip code: 30303

Idaho

St. Mary's Hospital

Grant Number:	G09RH28755			
Organization Type:	Critical Access Hospital			
Grantee Organization Information:	Name:	St. Mary's Hospital		
	Address:	701 Lewiston St., P. O. Box 137		
	City:	Cottonwood	State:	ID
	Tel #:	208-962-3251		
	Website:	www.smh-cvhc.org		
Project Director's Contact Information:	Name:	Pam McBride		
	Title:	Chief Grants Officer		
	Tel #:	208-816-0794		
	Fax #:	208-476-5385		
	Email:	Pam.mcbride@smh-cvhc.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization	County	State	Organization Type
	*Indicates partners who have signed a Memorandum of Understanding			
	St. Mary's Hospital*	Idaho	ID	Critical Access Hospital
	Clearwater Valley Hospital and Clinics*	Clearwater	ID	Critical Access Hospital
	Public Health – Idaho North Central District *	Nez Perce	ID	Public Health
	Nimiipuu Health*	Lewis	ID	Tribal Health
	Human Needs Council (regional)*	Idaho	ID	Social Service Agencies
	Clearwater County Human Needs Council*	Clearwater	ID	Social Service Agencies
	Snake River Free Community Clinic*	Nez Perce	ID	Free Clinic
Insurance Brokers*	Clearwater and Idaho	ID	Private Insurance Agents	
The communities/counties the project serves:	Clearwater, Lewis, and Idaho Counties in Idaho			
The target population served:	Population	Yes	Population	Yes
	Infants	X	Caucasians	X
	Pre-school Children	X	African Americans	X
	School-age children (elementary)	X	Latinos	X

	School-age children (teens)	X	Native Americans	X
	Adults	X	Pacific Islanders	X
	Elderly	X	Uninsured	X
	Pregnant Women	X	Other: (please describe)	

Description of the project:

St. Mary's Hospital Benefits Counseling project serves uninsured and newly insured residents of Clearwater, Idaho, and Lewis Counties in frontier north-central Idaho. Twenty percent of the 28,000 residents within this 11,000 square mile region lack insurance. Residents are older, poorer, less educated, and much more socially isolated than the national norm. They are also at greater risk of missing preventive services. Idaho has the lowest rate of physicians per capita in the nation, and project counties rank well below the state average in access to preventive screenings. Although Idaho had the sixth-highest rate of Marketplace enrollment in 2013-2014, the state chose not to expand Medicaid. Need for health insurance coverage is high, but poverty, isolation, education, and cultural norms are barriers to enrollment.

To combat these barriers, St. Mary's Hospital is employing one full-time benefits counselor. The counselor travels between sites of consortium members in three counties. Primary duties include:

- Conduct outreach and in-reach activities to identify uninsured individuals and families from multiple communities
- Educate uninsured individuals about potential benefit programs including Medicare, Medicaid, Children's Health Insurance Program and qualified health plans offered through Idaho's Health Insurance Marketplace
- Refer eligible individuals to certified insurance brokers for assistance in choosing qualified Marketplace or other private health insurance plans
- Assist uninsured individuals to enroll in benefit programs
- Educate the uninsured on the use of their benefits and connecting individuals to primary care, preventive, and other social services
- Help individuals retain their health insurance coverage

Consortium members, including private insurance agencies, work together to identify and cross-refer uninsured and newly insured individuals to appropriate services. They coordinate outreach activities and engage their clients in discovering barriers to enrollment and access. The members of the consortium include critical access hospitals, primary care clinics, tribal health, public health, social service agencies, and private insurance agencies.

Goals/objectives/anticipated outcomes of the project:

The overall goal of the program is to create sustainable, coordinated outreach and enrollment activities to address access to health insurance, primary care, and preventive services in three frontier counties by 2018. Objectives and their expected outcomes include:

- By 2018, identify 2,100 and enroll 1,500 uninsured individuals and families from three frontier counties who are eligible for public or private health insurance.
- Assist 1,500 newly insured individuals from three frontier counties to use and retain their health insurance benefits by 2018.
- Create a system to engage community resources for population health that is sustainable by year three of the project period.

Federal Office of Rural Health Policy Project Officer's Contact Information:

Name:	Christina Villalobos			
Tel #:	301-443-3590			
Email:	cvillalobos@hrsa.gov			
Website:	http://www.hrsa.gov/			
Organization:	Federal Office of Rural Health Policy			
City:	Rockville	State:	Maryland	Zip code: 20857

Technical Assistance Consultant's Contact Information:

Name:	John Butts			
Tel #:	404-413-0283			
Email:	jbutts@gsu.edu			
Website:	http://www.ruralhealthlink.org/			
Organization:	Georgia Health Policy Center			
City:	Atlanta	State:	Georgia	Zip code: 30303

Indiana

Affiliated Service Providers of Indiana, Inc. (ASPIN)

Grant Number:	G09RH28748			
Organization Type:	Not-for-Profit			
Grantee Organization Information:	Name:	Affiliated Service Providers of Indiana, Inc. (ASPIN)		
	Address:	850 N Harrison Street		
	City:	Warsaw	State:	IN
	Tel #:	317-471-0000		
	Website:	www.aspin.org		
Project Director's Contact Information:	Name:	Julia Holloway		
	Title:	Senior Projects Director		
	Tel #:	317-536-4683		
	Fax #:	317-753-0019		
	Email:	jholloway@aspin.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization	County	State	Organization Type
	*Indicates partners who have signed a Memorandum of Understanding			
	Bowen Center	Whitley, Huntington, Wabash	IN	Community Mental Health Center (CMHC)
	Four County Counseling	Pulaski	IN	Community Mental Health Center (CMHC)
	Centerstone of Indiana	Randolph, Fayette, Jennings, Lawrence	IN	Community Mental Health Center (CMHC)
Wabash Valley Alliance	White, Fountain, Clinton	IN	Community Mental Health Center (CMHC)	
The communities/counties the project serves:	Whitley	Pulaski		
	Huntington	Randolph		
	Wabash	Fayette		
	Jennings	Lawrence		
	Clinton	White		
	Fountain			
The target population served:	Population	Yes	Population	Yes
	Infants		Caucasians	X
	Pre-school Children		African Americans	
	School-age children (elementary)		Latinos	
	School-age children (teens)		Native Americans	
	Adults		Pacific Islanders	

	Elderly		Uninsured	X
	Pregnant Women		Other: (please describe) Veterans	X
			Other: Veteran Families	X

Description of the project:

Indiana has 58,000 uninsured veterans primarily in rural counties. The ASPIN Veterans Healthcare Enrollment Program is focused on enrolling rural veterans and their families residing in any of eleven rural counties served by four community mental health centers that provide direct care. The target population is primarily white veteran adults in poverty ages 25-65 that live in counties that experience greater disparities in terms of access to health coverage, access to health care, chronic disease incidence, and lower education levels. Some individuals will be reached through their participation in behavioral health services and some through community outreach.

Goals/objectives/anticipated outcomes of the project:

The ASPIN Veteran Enrollment Network will reach a minimum of 300 rural veterans through active clients in reach and 100 obtained through community outreach. Enrollment Benefits education will reach 250 rural individuals annually. Through the increased enrollment in health coverage both in the Marketplace and in public health insurance such as Medicare, Medicaid, and CHIP, veteran consumers of behavioral health services served by consortium members demonstrate increased levels of sustained coverage and improved outcomes on abstinence from drug use and alcohol abuse and on change in symptoms of mental illness and functioning. Many other impacts could be derived from the successful implementation of this project such as: reduction in veteran suicides, completion of court-ordered treatment, reduction in arrests for substance related or violence related crimes, increase in marital compatibility, improved management of psychological conditions, improved management of physical conditions, greater participation in workforce, greater participation in positive parenting, improved family functioning, and improved overall quality of life.

Federal Office of Rural Health Policy Project Officer's Contact Information:

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Website:	http://www.hrsa.gov/			
Organization:	Federal Office of Rural Health Policy			
City:	Rockville	State:	Maryland	Zip code: 20857

Technical Assistance Consultant's Contact Information:

Name:	Amanda Phillips Martinez			
Tel #:	404-413-0293			
Email:	aphillipsmartinez@gsu.edu			
Website:	http://www.ruralhealthlink.org/			
Organization:	Georgia Health Policy Center			
City:	Atlanta	State:	Georgia	Zip code: 30303

Maryland

Western Maryland Healthcare Corporation DBA Mountain Laurel Medical Center

Grant Number:	G09RH28757			
Organization Type:	Federally Qualified Health Center			
Grantee Organization Information:	Name:	Western Maryland Healthcare Corporation dba Mountain Laurel Medical Center		
	Address:	1027 Memorial Drive		
	City:	Oakland	State:	MD
	Tel #:	301-533-3300		
	Website:	www.mountainlaurelmedicalcenter.com www.raen.org		
Project Director's Contact Information:	Name:	Beth Little-Terry		
	Title:	Chief Executive Office		
	Tel #:	301 533 3300		
	Fax #:	301 533 3299		
	Email:	beth@mtnlaurel.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization *Indicates partners who have signed a Memorandum of Understanding	County	State	Organization Type
	Western Maryland Area Health Education*	Allegany	MD	Health Education
	Hyndman Area Health Center*	Bedford	PA	Federally Qualified Health Center (FQHC)
	Tri-State Community Health Center (in 3 states: PA, MD & WV)*	Allegany	MD	Federally Qualified Health Center (FQHC)
	The Door to Healthcare (Healthy Howard Inc.)*	Howard	MD	Connector Entity
	Mountain Laurel Medical Center*	Garrett	MD	Federally Qualified Health Center (FQHC)
	University of Maryland Extension		MD	University
	Maryland Rural Health Association	Allegany	MD	Non-profit
	Mountain Health Alliance	Allegany	MD	Network
	The communities/counties the project serves:	Allegany County, MD	Oakland, MD	
Garrett County, MD		Cumberland, MD		
Hancock Area, Washington County, MD		Keyser, WV		
Preston County, WV		Berkeley Springs, WV		
Mineral County, WV		Bedford, PA		
Morgan County, WV		Hyndman, PA		
Hardy County, WV		McConnellsburg, PA		
Bedford County, PA		Moorefield, WV		

	Fulton County, PA		Ridgely, WV		
	Somerset County, PA				
The target population served:	Population	Yes	Population	Yes	
	Infants	X	Caucasians	X	
	Pre-school Children	X	African Americans	X	
	School-age children (elementary)	X	Latinos	X	
	School-age children (teens)	X	Native Americans	X	
	Adults	X	Pacific Islanders	X	
	Elderly	X	Uninsured	X	
	Pregnant Women	X	Other: (please describe)		
Description of the project:					
<p>Rural Action Enrollment Network (RAEN) created an "Assist the Assister" training that, in addition to identified best practices, included benefits counseling and health insurance literacy practices for consumers. RAEN convenes regular board meetings and at least one regional meeting each year. Cooperation and coordination among the partners enhances and improves the overall enrollment effort for the region. RAEN disseminates key messages aimed at consumers that highlight their ability to gain access to assistance with health care coverage. RAEN provides this by leveraging existing efforts of the partners and generating coverage in local media with a focus on radio talk shows. RAEN offers health insurance literacy workshops directly to consumers and give regional assistance workers the ability to provide this education themselves to consumers in their own communities. RAEN engages with local and state stakeholders working to define the role of Community Health Workers (CHW) in order to explore adding enrollment assistance to the body of work that can be performed by CHWs.</p>					
Goals/objectives/anticipated outcomes of the project:					
<ol style="list-style-type: none"> 1) <u>Train the region's assisters and navigators in culturally competent Outreach & Education best practices</u>: As a result we expect that assisters with consortium members and other service area entities are more fully trained to effectively execute their outreach and enrollment assistance efforts, resulting in increased enrollment. Ongoing training needs of assisters are addressed and assisters are more effective in their efforts, resulting in increased enrollment. Assistors will have additional tools and resources to educate the newly insured, resulting in increased appropriate utilization and improved health outcomes. 2) <u>Create meaningful connection and coordination between network partners</u>: A comprehensive understanding of O&E efforts conducted by all consortium members is developed. Highly effective O&E efforts among consortium members will be documented. Highly effective O&E efforts among consortium members will be shared, resulting in increased enrollment. 3) <u>Implement a regional public education/outreach effort</u>: Consumers in the service area and beyond will have an increased understanding of the availability of assistance with enrollment, including availability of financial assistance for qualified individuals. 4) <u>Educate the newly covered on how to understand and utilize their health care</u>: A comprehensive understanding of topics to be addressed by education efforts will be achieved, resulting in targeted efforts to improve understanding of and how to access their health care. The newly insured will receive critical information on how to utilize their access to health care, resulting in increased appropriate utilization and improved health outcomes. 5) <u>Explore the feasibility of merging outreach and enrollment into scope of practice of Community Health Workers</u>: Enhanced understanding of feasibility to merge O&E into CHW model and responsibilities. Increased insight on potential for reimbursement from merger of O&E into CHW model. 					
Federal Office of Rural Health Policy Project Officer's Contact Information:	Name:	Christina Villalobos			
	Tel #:	301-443-3590			
	Email:	cvillalobos@hrsa.gov			
	Website:	http://www.hrsa.gov/			
	Organization:	Federal Office of Rural Health Policy			
	City:	Rockville	State:	Maryland	Zip code:
Technical Assistance Consultant's Contact Information:	Name:	Tamanna Patel			
	Tel #:	404-413-0306			
	Email:	Tpatel25@gsu.edu			
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	Organization:	Georgia Health Policy Center			
	City:	Atlanta	State:	Georgia	Zip code:

Maryland

Worcester County Health Department

Grant Number:	G09RH28749			
Organization Type:	Health Department			
Grantee Organization Information:	Name:	Worcester County Health Department		
	Address:	6040 Public Landing Road, P.O. Box 249		
	City:	Snow Hill	State:	MD
	Tel #:	410-632-9230, ext. 1611		
	Website:	http://lowershorehealth.org		
Project Director's Contact Information:	Name:	Katherine Gunby		
	Title:	Project Director		
	Tel #:	410-632-9230, ext. 1611		
	Fax #:	410-632-9239		
	Email:	katherine.gunby@maryland.gov		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization	County	State	Organization Type
	*Indicates partners who have signed a Memorandum of Understanding			
	Worcester County Health Department*	Worcester	MD	Local Health Department
	Somerset County Health Department*	Somerset	MD	Local Health Department
	Wicomico County Health Department*	Wicomico	MD	Local Health Department
	Worcester County Department of Social Services*	Worcester	MD	Local Department of Social Services
	Somerset County Department of Social Services*	Somerset	MD	Department of Social Services
	Wicomico County Department of Social Services*	Wicomico	MD	Department of Social Services
	Atlantic General Hospital*	Worcester	MD	Hospital
	Peninsula Regional Medical Center*	Wicomico	MD	Hospital
	McCready Foundation*	Somerset	MD	Hospital
	Three Lower Counties, Inc.*	Wicomico & Worcester	MD	Federally Qualified Health Center (FQHC)
The communities/counties the project serves:	Princess Anne, Somerset County	Tyaskin, Wicomico County		
	Crisfield, Somerset County	Hebron, Wicomico County		
	Deal Island, Somerset County	Quantico, Wicomico County		
	Westover, Somerset County	Pittsville, Wicomico County		

	Eden, Somerset County	Willards, Wicomico County
	Mt. Vernon, Somerset County	Pocomoke, Worcester County
	Fairmount, Somerset County	Berlin, Worcester County
	Salisbury, Wicomico County	Ocean City, Worcester County
	Fruitland, Wicomico County	Snow Hill, Worcester County
	Delmar, Wicomico County	Stockton, Worcester County
	Mardela, Wicomico County	Girdletree, Worcester County
	Nanticoke, Wicomico County	Bispopville, Worcester County

The target population served:	Population	Yes	Population	Yes
	Infants		Caucasians	
	Pre-school Children		African Americans	
	School-age children (elementary)		Latinos	
	School-age children (teens)		Native Americans	
	Adults		Pacific Islanders	
	Elderly		Uninsured	
	Pregnant Women		Other: Small Business	X
	Other: Farmers	X	Other: Watermen	X

Description of the project:

The Rural Outreach Benefits Counseling Grant provides the Lower Shore connector entity of Maryland with the funding to enhance its consumer assistance program with a targeted grassroots awareness campaign directed at farmers, watermen and individuals working in small business. These are some of the hardest to reach populations in our rural region who also stand to benefit substantially from the tax credits available through Maryland Health Connection, the state insurance marketplace. The program partners with consortium and other specific community agencies that work closely with these populations to provide outreach, education, and enrollment activities for uninsured and underinsured. The program continues educating new consumers and businesses about coverage and connecting them to resources. Below is a list of services and activities conducted by the program:

- Initiate and conduct outreach & education activities to target populations in partnership with community collaborators.
- Increase public and media awareness of services by distributing flyers, contributing newsletter articles, participating in news interviews and social media.
- Conduct workshops and trainings on how to enroll in healthcare coverage including Medicaid and qualified health plans offered on Maryland Health Connection.
- Provide enrollment assistance by conducting enrollment fairs and by scheduling appointments with consumers interested in applying for health coverage.
- Maintain a centralized phone number allowing local residents to speak directly with certified staff.
- Provide information and counseling on how to utilize new healthcare coverage and link consumers to resources and other health services.
- Provide one-on-one counseling to small businesses and entrepreneurs.
- Partner with consortium and other community organizations to offer workshops, other resources, and educational opportunities.

Goals/objectives/anticipated outcomes of the project:

The goals of the project include:

- Maintain a consortium to address community needs for health benefits counseling.
- Improve access to health care.
- Improve health literacy among target population.

Objectives and anticipated outcomes of the project include:

- Public awareness and enrollment campaign directed at hard-to-reach populations of farmers, watermen and individuals working in small business.
- Expanded access to health care coverage enrollment assistance for target populations – farmers, watermen and individuals

working in small business.

- Improved health insurance literacy and awareness of health care reform and coverage options among target populations.
- Increased collaboration among consortium members.
- Direct assistance to target population through 150 appointments.
- At least 100 outreach activities directed at target populations.
- Maintain data collection and tracking system to capture outreach activities and enrollment information specific to target population- farmers, watermen, and small businesses.

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	Organization:	Federal Office of Rural Health Policy			
	City:	Rockville	State:	Maryland	Zip code: 20857
Technical Assistance Consultant's Contact Information:	Name:	Kati Keebaugh			
	Tel #:	404-413-0324			
	Email:	kkeebaugh@gsu.edu			
	Website:	http://www.ruralhealthlink.org/			
	Organization:	Georgia Health Policy Center			
	City:	Atlanta	State:	Georgia	Zip code: 30303

Missouri

Skaggs Community Hospital Association

Grant Number:	G09RH28753			
Organization Type:	Hospital			
Grantee Organization Information:	Name:	Skaggs Community Hospital Association		
	Address:	P.O. Box 650		
	City:	Branson	State:	MO
	Tel #:	417-335-7000		
	Website:	www.coxhealth.com/branson		
Project Director's Contact Information:	Name:	Heather Zoromski		
	Title:	Grants Administrator		
	Tel #:	417-335-7340		
	Fax #:	417-348-8009		
	Email:	Heather.zoromski@skaggs.net		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization	County	State	Organization Type
	*Indicates partners who have signed a Memorandum of Understanding			
	Skaggs Community Hospital Association*	Taney/Stone	MO	Hospital
	Cox Monett*	Barry	MO	Hospital
	CoxHealth*	Greene	MO	Hospital
	Faith Community Health*	Taney	MO	Community Health Center (CHC)
	Jordan Valley Community Health Center*	Taney	MO	Federally Qualified Health Center (FQHC)
Access Family Care*	Barry	MO	Federally Qualified Health Center (FQHC)	
The communities/counties the project serves:	Barry County	Stone County		
	Lawrence County	Taney County		
The target population served:	Population	Yes	Population	Yes
	Infants		Caucasians	
	Pre-school Children		African Americans	
	School-age children (elementary)		Latinos	
	School-age children (teens)		Native Americans	
	Adults	X	Pacific Islanders	
	Elderly		Uninsured	X

	Pregnant Women		Other: (please describe)	
Description of the project:				
This project identifies and enrolls uninsured individuals and families, living in rural southwest Missouri, who are eligible for public health insurance, health insurance marketplace, and/or private insurance. This project also provides education to these individuals about health insurance benefits, connecting them to primary care and preventive services and helping them retain their health insurance coverage through the Centers for Medicare and Medicaid's (CMS) best-practice "Coverage to Care" program.				
Goals/objectives/anticipated outcomes of the project:				
The goal for the project is "to expand outreach, education and enrollment efforts to eligible uninsured individuals and families, and newly insured individuals and families in rural Southwest Missouri."				
Four objectives support achievement of this goal:				
<ol style="list-style-type: none"> 1) By 7/31/2018, identify and enroll 300 uninsured individuals and families who are eligible for public health insurance such as Medicare, Medicaid, and Children's Health Insurance Program, qualified health plans offered through Health Insurance Marketplaces, and/or private health insurance plans. 2) By 7/31/2018, educate 2,400 newly insured individuals in rural Southwest Missouri about their health insurance benefits, help 75% connect to primary care and preventive services to which they now have access, and help 50% retain their health insurance coverage. 3) Each Consortium member will develop and maintain a client base of 250 individuals or families that are newly insured through the Affordable Care Act and serve as a liaison to the health system by connecting them to primary care and preventive services newly available through health coverage. 4) (Developmental) Maintain a minimum of 50% retention of health insurance for the defined client base identified in objective three for the first year of the program. This percentage is expected to increase every year of the program with a target rate of 90% for long-term application. 				
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	Organization:	Georgia Health Policy Center		
	City:	Atlanta	State:	Georgia

Oregon

Northeast Oregon Network

Grant Number:	G09RH28750			
Organization Type:	Community Based Organization			
Grantee Organization Information:	Name:	Northeast Oregon Network		
	Address:	913 Main Avenue		
	City:	La Grande	State:	OR
	Tel #:	541-624-5101		
	Website:	www.neonoregon.org		
Project Director's Contact Information:	Name:	Lisa Ladendorff		
	Title:	Executive Director		
	Tel #:	541-805-5502		
	Fax #:	541-624-5105		
	Email:	lladendorff@neonoregon.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$75,000		
	August 2016 to July 2017	\$75,000		
	August 2017 to July 2018	\$75,000		
Consortium Partners:	Partner Organization *Indicates partners who have signed a Memorandum of Understanding	County	State	Organization Type
	Building Healthy Families *	Union, Baker, Wallowa	OR	Parenting and Prevention Organization
	Community Connection of Northeast Oregon*	Union, Baker, Wallowa	OR	Local Area Agency on Aging and Anti-Poverty Action Agency
	State of Oregon Department of Human Services*	Union, Baker, Wallowa	OR	State Division Responsible for Adult and Child Welfare Services
	Eastern Oregon Head Start*	Union, Baker	OR	Federally Funded Head Start program
	Northwinds Associates*	Union	OR	Independent Insurance Agent
	Umatilla Morrow Head Start*	Wallowa	OR	Federally Funded Head Start Program
	Winding Waters Clinic*	Wallowa	OR	Federally Qualified Health Center (FQHC)
	Wallowa County Health Department*	Wallowa	OR	County Health Department

	Union County Care*	Union	OR	County Funded Family Support Program for At Risk Families
	Parole and Probation	Union, Baker	OR	Parole and Probation Departments
	Powder River Correctional Facility	State wide	OR	State Funded Prison
The communities/counties the project serves:	Enterprise	Wallowa (County)		
	Joseph	Wallowa		
	Wallowa	Wallowa		
	La Grande	Union		
	Elgin	Union		
	Union	Union		
	Cove	Union		
	North Powder	Union		
	Baker City	Baker		
	Haines	Baker		
The target population served:	Population	Yes	Population	Yes
	Infants	X	Caucasians	X
	Pre-school Children	X	African Americans	X
	School-age children (elementary)	X	Latinos	X
	School-age children (teens)	X	Native Americans	X
	Adults	X	Pacific Islanders	X
	Elderly	X	Uninsured	X
	Pregnant Women	X	Other: Inmate population	X
Description of the project:				
<p>The primary activities of the NEON Benefits counseling program are as listed below:</p> <ol style="list-style-type: none"> 1.) Identify the uninsured, educate them on enrollment options, and assist them with enrollment applications; 2.) Identify populations who are newly insured and engage them in activities to educate them on using their coverage, assist them in linking to needed health care resources, and provide support for retaining coverage; 3.) Engage with a widespread, multi-sector application assistance consortium that ensures the community can access needed services through a "no wrong door" approach. <p>The Northeast Oregon Network (NEON) and Consortium Partners propose to meet these goals by using trained, certified Community Health Workers in a tried and tested outreach and enrollment practice based upon the National Covering Kids and Families Model.</p>				
Goals/objectives/anticipated outcomes of the project:				

Goals	Objectives
Reach 50% of the general population with information about coverage options and local application assistance.	Working with existing consortium members and referral network partners, reach 45,000 community members with social marketing campaigns by 3/31/18.
	Working with existing consortium members, conduct outreach at 30 community events by 3/31/18.
	Working with existing consortium members, conduct 75 in-person meetings with community leaders, businesses, and partners to promote application assistance by 8/31/18.
Reduce the rate of uninsured to 5% or less.	By 8/31/18, assist 315 individuals to enroll in new health coverage options.
	By 8/31/18, assist 600 individuals in successfully re-enrolling with no gaps in coverage.
Reach 75% of the newly insured population with coverage education.	By 8/31/18, educate 4,100 newly insured individuals on their coverage, especially use of preventive benefits.
Achieve long-term non-grant sustainability for ongoing Benefits Counseling Services.	Recruit, hire and train a new Community Health Worker (CHW)/Benefits Counselor to work in Baker County by 10/15/15.
	Working with consortium partners, complete a sustainability plan by 10/31/17.
	Working with consortium partners, implement sustainability plan by 8/31/18.
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Technical Assistance Consultant's Contact Information:	Name: Deana Farmer
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	Organization: Georgia Health Policy Center
	City: Atlanta State: Georgia Zip code: 30303

Wisconsin

ThedaCare Medical Center - Shawano

Grant Number:	G09RH28752			
Organization Type:	Hospital			
Grantee Organization Information:	Name:	ThedaCare Medical Center - Shawano		
	Address:	100 County Road B		
	City:	Shawano	State:	WI
	Tel #:	800-743-2924 / 715-526-2111		
	Website:	www.thedacare.org		
	Name:	Dorothy Erdmann		
	Title:	Chief Executive Officer		
	Tel #:	715-526-7200		
	Fax #:	715-526-7205		
	Email:	dorothy.erdmann@thedacare.org		
Expected funding level for each budget period:	Month/Year to Month/Year	Amount Funded Per Year		
	August 2015 to July 2016	\$74,961		
	August 2016 to July 2017	\$74,961		
	August 2017 to July 2018	\$74,961		
Consortium Partners:	Partner Organization	County	State	Organization Type
	*Indicates partners who have signed a Memorandum of Understanding			
	Rural Health Initiative*	Shawano	WI	Non-Profit
	Community Health Action Team*	Outagamie	WI	Health Consortium
	Menominee Tribal Clinic*	Menominee	WI	Indian Health Services (IHS) Clinic
	Shawano-Menominee Counties Health Department*	Shawano Menominee	WI	County Public Health
	ThedaCare Medical Center – New London*	Waupaca	WI	Critical Access Hospital
ThedaCare Medical Center – Waupaca*	Waupaca	WI	Critical Access Hospital	
The communities/counties the project serves:	Menominee County		Waupaca County	
	Shawano County			
The target population served:	Population	Yes	Population	Yes
	Infants	X	Caucasians	X
	Pre-school Children	X	African Americans	
	School-age children (elementary)	X	Latinos	
	School-age children (teens)	X	Native Americans	X
	Adults	X	Pacific Islanders	
Elderly	X	Uninsured	X	

	Pregnant Women	X	Other: Amish	X
Description of the project:				
<p>ThedaCare Medical Center – Shawano of Shawano WI established a health benefits counseling program to serve the uninsured and newly insured residents of rural Shawano County, Menominee County, and the northern communities of Waupaca County that are located in its service area. The hope is that this model can be replicated with sister critical access hospitals within the same health care system allowing a large geographic area of North East WI to have access to local benefit counseling services. With consortium partners, this project is able to bring benefit counseling services to diverse rural populations. Special emphasis is with the Menominee Tribe and two smaller tribes in the Western part of Shawano County. In addition, we are developing relationships with Amish communities and farm families. This program includes considerable outreach with its consortium members and target populations while capitalizing on existing relationships.</p>				
Goals/objectives/anticipated outcomes of the project:				
<ol style="list-style-type: none"> 1. Increase access to health insurance coverage for eligible uninsured individual families in the hospital's service area. 2. Link beneficiaries to primary care and preventive services. 3. Provide education to enrolled beneficiaries on the use of their health insurance benefits. 				
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	Organization:	Georgia Health Policy Center		
	City:	Atlanta	State:	Georgia