

Minutes
Rural Health Association of Utah/Southern Utah AHEC
Executive Meeting

July 22, 2019 at 10:00 a.m.

Attendees:

- Locke Ettinger - Facilitating
- Rita Osborn
- Marla Shelby-Drabner
- Greg Rosenvall
- Mark Dalley
- Samantha Thompson

1. Welcome:
2. Approve Agenda - Additional Items
3. Review of Networking and Listening tour
 - a. Approved for \$2,000 technical grant through NRHA to cover travel expenses of Locke's listening tour.
 - b. Tour is going well so far. Always looking for connections or recommendations that Locke should be noting.
4. Strategic Plan Discussion - Lead by Locke
 - a. Advocacy procedures and alignment with UHA and others.
 - i. Locke had a meeting with David Gessel
 1. He recommended that we are very open in our communication of what we need. That is how we will be able to move forward productively working together.
 2. Loan forgiveness has Dave's support (Matt's as well). This will be coming forward in the legislative session. Locke feels we need to continue to push for that.
 - a. Greg - We can assist with that at the rural nine meetings. Locke will be speaking at a dinner in Park City in September - please bring that to the table.

- i. Rural Nine is not formally agreed to work with anyone. Nine Intermountain hospitals. Nine Rural hospitals.
 - ii. Livepoint and Mountain West hospitals - are for profit and technically rural. However; they are not independent so they are not part of The Rural Nine.
- b. Recommendations for 5 year plan with ORHPC and AUCH and needs of the Rural Nine - “Collaborative Group across partnerships”
 - i. We need to be focused on advocating alongside with these other groups and programs so that we can be moving forward on the same page and can work closely, and support each other's efforts.
 - ii. **Communicate. Keep our voice active. We don’t want to get lost just because we are rural.**
 - iii. Let’s be sure that we look for those things that may be overlooked by these larger organizations. We also don’t want to spend time or money lobbying for something that is already being covered by another organization.
 - iv. Dave recommend that us and these three programs come up with a strategic plan together and go to the legislature and ask for funding together. Is this our role? What do the RHAU executives feel? (This wouldn’t be right away but as a future goal.)
 - 1. We all have personal things that we think are most important. We need to decide if we are able to move this forward as a group. Is this what the group represents?
 - 2. Greg - we need to be careful of those that are already doing things and to not come in and step on any toes. Also remember that hospitals are not healthcare, they are only a small part - important but not everything. What as a group can we do to help with lifestyle issues?
 - 3. Marla - The key is communication. We don’t want to partner and then get crossed at our purposes. But we need to be advocating for the rural communities and those that need it. The advantage to communication is being open and working as a partnership rather than two separate entities fighting for the same thing.
 - 4. Locke will be the conduit for our communication. He will have the connections and know who we need to contact.

5. Rita - I think as an association we have struggled finding our niche. We only want to assist or augment where things are going well. Community health is an area we can definitely help with - we have seen this need with our UROHC grant.
 - v. Rural Nine are not working on community health. Matt had a lead on some funding for that. Locke will get that information to Greg.
 - vi. Executives please review the Strategic plan. Give any inputs and edits to Locke or Samantha they will take those and will update our document. We want your input and approval before we take it to the general RHAU board.
- c. Gaps in Telehealth
 - i. Rita has a position on the telehealth board. We are suggesting Locke take that position.
 - ii. Everyone is gone for summer. The next meeting is August 1st. So we are hoping to have an update on that after that meeting.

5. Intermountain Rural Health Convening Meeting - Rita

- a. We did see some Utah rural representation. We also had some other states there as well.
- b. The goal was to look at some CMS rural initiatives. We looked at some different state models and demonstration projects.
- c. They were showcasing future care delivering systems. Adam Boehler from Centers for Medicare and Medicaid Innovation in DC, was there presenting.
- d. They wanted to make a case for future care delivery systems model project. Talked about payment innovation, resourcing and staffing transformations.
- e. Good discussion about bringing the proper channels together. However it was just a brainstorm session.
- f. Locke has met with Bill Barnes, he mentioned that Adam was looking to do a demonstration here. Intermountain is hoping to be the convener - however they are not very independent.
 - i. NRHA is saying they want to be in on these demonstrations, they didn't have the voice to get in. Intermountain was leading so they didn't invite those from rural locations, or they invited very last minute (ie: the day before).

- g. RHAU needs to be a part of the demonstration if it moves forward. We are more independent. We are happy to facilitate a meeting in actual rural utah if they would like - Rita sending out email/feelers for that.
 - h. Greg - had a meeting before hand as he couldn't attend. Dr. Harrison is having intermountain to look at rural communities as we don't want to lose hospitals like what is happening in other parts of America. However, Greg didn't feel that they really cared - more just they felt they should do it and were making a show of it.
 - i. Locke - will keep tabs on this through the NRHA, as well as that network.
 - j. Marla - Let's remember this is a long term strategy. We will see that there are meetings that we are not invited to, or we're invited late. We will be recognized slowly.
6. Board Membership - Locke
- a. Let's delay coming meeting (currently scheduled for Aug 5th). To allow our meeting to be more prepared and effective.
 - i. Would like to have strategic plan completed.
 - b. Matt McClough was invited and has accepted.**
 - c. Steven Lisonbee - new at SUU who is very interested in helping rural utah. He has expressed interest in participating. Well connected with Spencer Cox - strategic partnership?**
 - d. The new science dean at SUU expressed interest as well.**
 - e. Andy Nye - Dean of Rural Health initiatives at Rocky Vista also would like to participate more.**
 - f. Marla - approves of postponing meeting. Let's give some thought to those that are expressing desire to join. We need these type of people who are wanting to be apart as that shows they care.
 - g. Greg and Mark - approve postponing meeting.
 - h. Locke and Rita will be in touch with the executive board about these new membership recommendations as well as the next RHAU meeting date, we want their input. The board has been very hospital focused - we want to expand out to value based care.
 - i. After the listening tour we would like to kick off a membership drive - hopefully in January 2020. However, we will not be going forward with that until we articulate the value proposition.

- j. We are looking into other states as well as, following up with the listening tour for gap that we hear from constituents.
7. Rural Health Conference - March 2020
- a. We need to confirm a date with a few other calendars.
 - b. Locke and Rita will send that out for approval.
8. Adjourn

Date for the Rural Health Conference: March 2020

Topic Areas

Get Healthy Rural Utah

Pre-Conf. Office of Rural Health and Primary Care