“We take the initiative to seek innovative solutions to meet the unique needs of rural Michiganders.”
About MCRH

• The Michigan Center for Rural Health (MCRH) was established in 1991 and is the designated State Office of Rural Health (SORH) for Michigan. MCRH is located on the campus of Michigan State University in the College of Osteopathic Medicine.

• All 50 states have a SORH, varying in size, scope, services, and resources they provide.

• MCRH is one of only three non-profit State Offices. Other SORHs are located within State Health Departments and Universities.

• As a SORH, MCRH helps to create partnerships among various organizations to create new opportunities and strengthen the healthcare delivery system in rural communities, including:
  • Network Development
  • Quality of Care
  • Emergency Medical Services
  • Continuing Education
  • Access to Care
Mission & Vision

Our Vision:
“The Michigan Center for Rural Health will be universally recognized as the center for expertise for rural health in Michigan through creative and visionary education, service, and research.”

Our Mission:
“To coordinate, plan, and advocate for improved health for Michigan's rural residents and communities.”
The 26th Annual Michigan Rural Health Conference provided a broad range of rural stakeholders the ability to engage in education on rural relevant topics.

Conference attendees included representatives from rural health clinics and hospital settings, local public health professionals, community mental health providers, substance use disorder treatment center staff, along with members of organizations working to positively impact social drivers of health.

The 26th Annual Michigan Rural Health Conference presented speakers from the Michigan Department of Health and Human Services, the National Rural Health Association, the Michigan Health Endowment Fund, the Michigan Association of Counties, and many more.

Total Attendees: 191
Exhibitors: 29
MCRH/NMORC hosted the **2023 Rural Michigan Opioid and Substance Use Summit** at The Ellison Place in Gaylord, Michigan.

The 2023 Summit combined rural programming and presenters who addressed Opioid Use Disorder/Substance Use in rural Michigan.

Speakers included representatives from the Community Recovery Alliance, the Michigan Department of Health and Human Services, and the National Alliance on Mental Illness Michigan. In addition, individuals with lived experience were highlighted and celebrated.

Attendees were encouraged to network and collaborate and provided with opportunities to interact with summit partners.

**Total Attendees: 122**

**Exhibitors: 21**
The 2023 Critical Access Hospital (CAH) Conference brought together leadership from ALL 36 Michigan CAHs, including CEOs, CFOs, CNOs, and Directors of Patient Safety & Quality at Park Place Hotel in Traverse City, Michigan.

At the conference, MI CAH leadership shared best practices and learned from each other about various topics including, digital health/technology, workforce, and quality. Additionally, local and national subject matter experts were featured.

Agenda highlights included rural health policy updates, employee engagement strategies, a vision for CAH innovation, and quality improvement success stories. The networking reception featured a successful silent auction to raise funds for MCRH’s OsteoCHAMPS scholarships.

Total Attendees: 148
Exhibitors: 20
National Rural Health Day (NRHD) 2023

How Did MCRH Celebrate?

• Highlighted local NRHD celebrations from MI Rural Health Clinics, Critical Access Hospitals, and other rural health providers on all MCRH social media channels.

• Editorial Feature on MCRH/NRHD in the Rural Innovation Exchange Digital Publication

• Proclamation from Michigan Governor Gretchen Whitmer declaring Rural Health Day in Michigan 11/16/2023

2023 National Rural Health Day Michigan Community Star: Mariah Hesse

MCRH was proud to join NOSORH in honoring Mariah Hesse as Michigan's Community Star. Mariah, a lifelong rural resident, has not only made significant contributions to Sparrow Clinton and Sparrow Eaton Hospitals but has made significant contributions to Michigan’s rural health infrastructure through her role as President of the Michigan Critical Access Hospital Quality Network (MICAH QN). Mariah serves on numerous National committees that help shape the patient safety and quality landscape for Critical Access Hospitals across the Nation.
Hospital Programs

Michigan Critical Access Hospital Quality Network (MICAHQN)

The Michigan Critical Access Hospital Quality Network maintains its standing as a prominent national figure in quality reporting and performance. This is evident through their active participation in the HRSA Medicare Beneficiary Quality Improvement Program (MBQIP). From the program’s commencement, MI CAHs have consistently secured a position among the Top 10 States for both Quality Reporting and Performance.

The MICAH QN is governed by a 13-member Executive Committee. The Executive Committee guides educational strategy, cultivates partnerships, and prioritizes member engagement. The MICAH QN organizes its educational content and data strategy around three strategy groups:

- **Strategy Group 1**: Making care safer by reducing harm caused in the delivery of care
- **Strategy Group 2**: Data Management and Analysis
- **Strategy Group 3**: Promoting Effective Communication and Coordination of Care to Improve Patient Safety

**MBQIP Quality Measures Annual Report**

- **Patient Safety/Inpatient Measures**: The Patient Safety/Inpatient reporting rate of 100.0% for Michigan in 2022 was higher than the national reporting rate of 97.1%.
- **Outpatient Measures**: The Outpatient reporting rate of 100.0% for Michigan in 2022 was higher than the national reporting rate of 89.0%.
- **Patient Engagement Measures**: The HCAHPS reporting rate of 89.2% for Michigan in 2022 was lower than the national reporting rate of 94.6%.
- **Care Transitions Measures**: The EDTC reporting rate of 89.2% for Michigan in 2022 was lower than the national reporting rate of 92.4%.

Table 1: EDTC Results for CAHs in Michigan and All CAHs Nationally, 2022

<table>
<thead>
<tr>
<th>EDTC Measure</th>
<th>Michigan CAHs (n=37)</th>
<th>All CAHs (n=3,158)</th>
<th>Benchmark (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAHs Reporting</td>
<td>91.0</td>
<td>90.3</td>
<td>100</td>
</tr>
<tr>
<td>EDTC All-Composite</td>
<td>91.9</td>
<td>94.3</td>
<td>100</td>
</tr>
<tr>
<td>Allergies and/or Reactions</td>
<td>98.1</td>
<td>96.0</td>
<td>100</td>
</tr>
<tr>
<td>Medications Administered in ED</td>
<td>98.4</td>
<td>98.3</td>
<td>100</td>
</tr>
<tr>
<td>ED Provider Note</td>
<td>96.7</td>
<td>94.9</td>
<td>100</td>
</tr>
<tr>
<td>Mental Status/orientation Assessment</td>
<td>97.9</td>
<td>95.7</td>
<td>100</td>
</tr>
<tr>
<td>Reason for Transfer and/or Plan of Care</td>
<td>98.8</td>
<td>96.8</td>
<td>100</td>
</tr>
<tr>
<td>Tests and/or Procedures Performed</td>
<td>98.5</td>
<td>98.5</td>
<td>100</td>
</tr>
<tr>
<td>Tests and/or Procedures Results</td>
<td>98.3</td>
<td>96.6</td>
<td>100</td>
</tr>
</tbody>
</table>

Footnotes:

† Indicates insufficient data to calculate rate (<25 patients)

Compared with all CAHs nationally, CAHs in Michigan scored significantly better on 9 EDTC measures, significantly worse on 0.
Remote Patient Monitoring

In 2022, The Michigan Center for Rural Health was awarded a grant from the Michigan Health Endowment Fund. The grant focused on embedding Remote Patient Monitoring and chronic care management platforms into three rural healthcare systems; Helen Newberry Joy Hospital, Schoolcraft Memorial Hospital, and McKenzie Health System. MCRH partnered with HIGI and worked to provide the technological infrastructure to increase their digital health capacity and improve access to care for vulnerable rural residents.

Enrollment and Readings as of January 25, 2024:

<table>
<thead>
<tr>
<th>Patient Enrollment since January 2024</th>
<th>Average Age</th>
<th>Device Readings since January 2024</th>
<th>Number of Pts. With 20+ of health coaching. (December)</th>
<th>Eligible patients completed 16+ readings during the month of December</th>
</tr>
</thead>
<tbody>
<tr>
<td>59</td>
<td>74.54</td>
<td>14,647</td>
<td>92%</td>
<td>89.5%</td>
</tr>
</tbody>
</table>

Patient satisfaction as of January 25, 2024:

<table>
<thead>
<tr>
<th>Patients surveyed</th>
<th>Likelihood to recommend average score</th>
<th>Device ease of use average score</th>
<th>Initial telehealth appointment experience average score</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>9.25/10</td>
<td>9.63/10</td>
<td>9.79/10</td>
</tr>
</tbody>
</table>

Patient comments:

- “I am definitely a 10. The whole experience has been helpful and great.”
- “Makes me pay more attention to my blood pressure and everything – that’s for sure.”
- “It is helping me, you know set some goals. I want to get better and I want to get off some of these drugs.”
Since 1994, the Michigan Center for Rural Health has been dedicated to honoring exemplary rural health professionals for their outstanding contributions to advancing Michigan’s rural health initiatives.

This award is presented to an individual who has demonstrated outstanding efforts in promoting health in rural areas, shown exceptional leadership in improving healthcare services for Michigan’s rural communities and has made significant contributions to enhancing the overall health in rural Michigan.

In 2023, the well-deserved recipients of this distinguished award was Mariah Hesse, CNO Sparrow Clinton and Sparrow Eaton, and the President of MICAH QN. Her remarkable achievements and unwavering dedication have significantly contributed to the enhancement of healthcare services and the overall well-being of the people in rural Michigan.
Rural Health Clinics

Comprehensive Support for RHCs: MCRH provided extensive support to Michigan's 220 certified Rural Health Clinics (RHCs), focusing on critical areas such as compliance, billing, emergency preparedness, and state recertification.

Impactful Events: MCRH organized several impactful events, including four well-attended RHC Network meetings, one Practice Manager Workshop, and one Billing and Coding Bootcamp, each with over 75 participants. These gatherings addressed crucial topics like quality improvement, compliance, national policy, billing and coding, and emergency preparedness, aiming to ensure regulatory adherence, financial stability, patient safety, ongoing certification, and improved care outcomes for RHCs.

Technical Assistance: MCRH provided technical assistance to Michigan clinics on over 80 occasions throughout the year, demonstrating our unwavering commitment to supporting healthcare facilities across the state.

Inaugural RHC Mock Survey: We conducted our inaugural mock Rural Health Clinic (RHC) survey, showcasing our dedication to preparedness and excellence in regulatory compliance within the healthcare community.

CCM Education Pilot: MCRH partnered with CrossTx to launch a groundbreaking initiative: a FREE 6-month Chronic Care Management (CCM) Assessment and Education program for up to 10 Michigan Rural Health Clinics (RHCs). This program aims to advance CCM and deepen knowledge of CMS value-based initiatives, highlighting our proactive approach to enhancing healthcare delivery and patient outcomes.
Primary Care

Healthy Hearts for Michigan

MCRH, as part of a statewide cooperative led by Altarum, focused on improving cardiovascular health in Michigan, with special attention given to supporting certified Rural Health Clinics (RHCs). MCRH recruited 18 primary care clinics and provided practice facilitation services, targeting two key clinical areas: Hypertension Management (HTN) and Tobacco Cessation.

For HTN, interventions included EHR-based protocols for patient identification, improved in-office blood pressure measurement, and the introduction of self-measured BP monitoring programs. In Tobacco Cessation efforts, streamlined workflows and opt-out treatment models were implemented, utilizing the "Ask, Advise, Connect" approach for tobacco screening.

This collaboration underscores MCRH's commitment to enhancing healthcare quality and outcomes in rural communities, particularly in addressing prevalent health issues like hypertension and tobacco use. Through tailored interventions and practice facilitation, MCRH aims to empower primary care clinics and promote better cardiovascular health across Michigan.
Overdose Data to Action (OD2A)

The Michigan Center for Rural Health (MCRH) and the Michigan Health & Hospital Association (MHA) Keystone Center collaborated to provide an academic detailing training program aimed at supporting treatment and recovery in rural communities.

This initiative included the development of recovery-focused modules through consultation with individuals with lived experience and professionals in the recovery field, adhering to the principle of "Nothing about us without us." A recovery focus group was organized to create the curriculum, addressing topics such as workforce development, harm reduction, and recovery capital. The resulting AD Recovery Curriculum and Key Messages were tailored to meet the needs of those working in recovery.

Participants in the program underwent pre- and post-assessment tests, demonstrating significant knowledge improvement across various recovery-related topics, with all participants achieving a perfect score on post-assessments, indicative of the program’s effectiveness in enhancing learning outcomes.

Recovery Key Messages:

1. Individuals in recovery and their families have valuable experiences and encouragement to offer others struggling with substance use.
2. The recovery process is highly personal and occurs via many pathways.
3. Employment is essential in achieving sustained recovery and financial independence.
4. People recovering from substance use disorder face an unemployment rate three times higher than the average.
5. Recovery capital helps sustain recovery and reduces the risk of returning to substance use by increasing a person’s support system.
6. Through shared understanding, respect, and mutual empowerment, peer support helps individuals become engaged in the recovery process and reduces the likelihood of relapse.
7. Individuals, families, and communities that have experienced social and economic disadvantages are more likely to face more significant obstacles to overall health and recovery.
8. Stable housing is vital to recovering from substance use disorders.
9. Any step to reduce use or to lower the risks during substance use is a step toward wellness.
10. Substance use should be addressed by the health care system rather than the criminal justice system. Treatment and support services are essential upon reentry of justice-involved individuals, including removing barriers to employment and public benefits.
11. During recovery, it is vital to maintain relationships with people in your life whom you can rely on for strength and encouragement.
12. The development of recovery ‘champions’ as charismatic and connected community figures who are visible examples of success provides the opportunity for ‘social learning’ for those who claim that recovery is not possible and increases the waves of impact within local communities.
13. Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.
Core Areas of Flex Program

Support for Operational & Financial Improvement

• Supporting two CAH CFO Network meetings
• Annual Financial Data Collection & Benchmarking
• Financial Improvement Education
• Operational Improvement Technical Assistance
• Financial Support for Monthly Web Based Data Collection
• Billings & Coding Education
• Michigan Critical Access Conference

November 2023 Critical Access Hospital Conference-Finance Meeting
Transitional Care Projects

- **HRSA Outreach Project** – Healing Close to Home & Traditional Transitional Care Projects
  - Goals
    - Improve patient outcomes
    - Improve patient and employee satisfaction
    - Improve CAH’s financial stability with increased volume, revenue, and profitability
    - Stabilize census and staffing needs
  - **HRSA Outreach Project** – Facilities participating in the project increased the number of patients receiving transitional care from 137 in the 2022 program year to 315 in 2023.
249 health providers and 18 new rural organizations registered for Michigan’s rural job board, 3RNET.

MCRH registered 90 participants from rural organizations for the 2023 3RNET Recruitment and Retention Academy.

In 2023, MCRH presented to four medical schools, six PA schools, and two NP schools about working in rural Michigan and federal and state loan repayment programs.

MCRH sponsored rural high school students for the Michigan State University East Lansing and Marquette OsteoCHAMPS camps to advocate for exposure to health careers.

Recruitment

249 health providers and 18 new rural organizations registered for Michigan’s rural job board, 3RNET.

MCRH registered 90 participants from rural organizations for the 2023 3RNET Recruitment and Retention Academy.
MCRH has walked alongside the Michigan Department of Health & Human Services (MDHHS) to provide a rural lens to their Statewide SDOH Strategy. The Rural Health Equity Plan will provide MDHHS with a list of rural-specific recommendations that align with their current SDOH Strategy and that focus on the unique needs of rural Michiganders.

- MCRH hosted 11 listening sessions to connect with rural anchor institutions to better understand State Assistance Programs in rural communities and the utilization of 211.
- MCRH distributed surveys to 74 rural community members who utilized State Assistance Programs to better understand their experience.
- MCRH distributed surveys to 84 community-based organizations to better understand State Assistance Programs and the utilization of 211 to promote resources in rural communities.

MCRH has highlighted six rural organizations in the Strength of Rural Spotlight Series, which shines a light on organizations and individuals that provide innovative solutions to address health disparities and the social drivers of health in their rural communities.
MCRH EMS Continuing Education Programs

**EMS Webinars and Workshops**
Reach: 59 counties statewide  
CE credits distributed:  
• 490 assigned live in 2023  
• 901 assigned on-demand

**MCRH EMS Technical Assistance**
• EMS Service Line Changes  
• EMS Quality Improvement (QI)  
• EMS Data Reporting  
• EMS Wellness  
• EMS Operations  
• EMS Education and Training

**MCRH EMS Noteworthy Items In 2023**
• Founding advisor & local chapter leader for [Women in EMS](#)  
• Executive board member [Mi-REMS](#)  
• EMSCC, CoPEM, EMS safety, EMS recruitment and retention workgroup member  
• EMS Leadership Academy morning coffee

**MCRH EMS Grant Programs**

**HRSA Rural Public Health Workforce and Training & Networking Grant**  
• Award: $1.5 million  
• Focus: CHW and CIP

**HRSA Medicare Rural Hospital Flexibility Grant**  
• Award: $300,000  
• Focus: EMS Data Reporting and Quality Improvement

**MDHHS EMS Workforce Grant- Paramedic Scholarships**  
• Award $350,000  
• Focus: Paramedic Initial Education  
• Funds distributed: $350,000  
• Scholarships awarded: 15
**Grand Rounds:** No-cost professional development courses for a variety of healthcare disciplines. Continuing Education credits (CE/CEU) are offered for all courses and approval varies by discipline and topic.

- **1215** Certificate of Completion
- **16** Partner Organizations
- **409** Nursing CNE Contact Hours
- **571** Social Work Contact Hours
- **45** Community Health Worker Hours
- **95** Oral Health Contact Hours
- **25** Pharmacy Contact Hours

**ECHO:** Project ECHO® (Extension for Community Healthcare Outcomes) is a movement, whose mission is to develop the capacity to demonopolize knowledge and amplify the capacity to provide best-practice care for underserved people. These free sessions are designed around case-based learning and mentorship, helping local workers gain the expertise required to provide needed services. MCRH Provided:

- **11** Infectious Disease ECHO’s
- **5** One Health ECHO’s
- **822** Attendees
- **17** Programs that offered Medical Continuing Education (CME) Hours
- **5** Programs that offered National Environmental Health Association (NEHA) credit hours
- **5** Programs that offered CHES credit hours
I-REACH teamed up with county Veterans Affairs offices, and the Together With Veterans program, to conduct outreach events in seven counties in the Upper Peninsula. The resource fairs reached 906 Veterans, over 1,500 (including Veterans, family, and friends). Ninety-five unique service providers offered their services.

I-REACH partnered with the Veterans Wellbeing Lab in 2023 to create five educational videos related to healthcare access.

I-REACH collaborated with the VA Office of Rural Health’s Iowa City Veterans Rural Health Resource Center to establish a Veteran Services Coordinator program at the Baraga County Memorial Hospital (BCMH). Secretary of Veteran Affairs (VA), Denis McDonough, visited BCMH to learn about the program.
The Northern Michigan Opioid Response Consortium (NMORC) brings together 50 partners to address the opioid epidemic across a 25-county region in northern Lower Michigan.

- 17 Community Health Worker trainings funded
- 35 therapists trained in Eye Movement Desensitization & Reprocessing (EMDR) therapy
- 3 therapists trained in Dialectical Behavior Therapy (DBT)
- 3 recovery community organizations supported with Technical Assistance and funding
- 14 MCBAP credentials and certifications completed
- 6 Mental Health First Aid (MHFA) trainings in 2023 with 110 participants trained to provide MHFA intervention
- 6 events provided funding support for recovery month events
- 65 Wall Mounted Naloxone Safety Kits placed in Schools and Public Buildings & 80 ‘grab and go’ cases (for emergency vehicles, athletic trainer bags, etc.) distributed
- 1500 Medication Disposal bags (Deterra) distributed in rural communities
- 500 Medication Lock bags distributed
- 30 Naloxone Distribution Boxes placed making free Naloxone accessible in communities
- 40+ partner scholarships awarded to the 3RNet Workforce resource
- 80+ people from community health agencies received Billing and Coding credentialing
“We are motivated by our genuine desire to improve the health of rural Michigan communities.”