

Summit On Rural America, The Secretary's Rural Initiative Denver, Colorado; July 26th, 2002

Opportunities For Rural Community Partnerships by Tim Size Executive Director, Rural Wisconsin Health Cooperative (RWHC)

Secretary Thompson's Rural Initiative to restructure the Department of Health and Human Service's (HHS) management of its rural portfolio is right on the target. **While new federal dollars are needed and welcomed, this proposal is fundamentally a major shift in how HHS thinks and works.** As a past President of the National Rural Health Association and past member of the Secretary's National Advisory Committee on Rural Health, I am convinced that only cross-sector, integrated approaches can fundamentally make a difference. This is true in our communities, in our state capitals and in Washington.

The Cooperative is owned and operated by twenty-eight rural community hospitals in southern and central Wisconsin. We have worked to be a catalyst for regional collaboration—an aggressive and creative force on behalf of rural communities and rural health since 1979. In the limited time available, I can't talk about all of our failures and successes. In trying to work across traditional boundaries there are many current RWHC activities relevant to the Secretary's Rural Initiative; HIPAA, managed care, telehealth and bioterrorism preparedness are a few examples.

I will briefly comment on three particularly good examples of cross-sector, multi-community collaboration: (1) economic development, (2) public and private benefit program outreach and (3) agricultural health and safety.

I. Linking Rural Health With Economic & Community Development

I particularly appreciated seeing the Secretary's emphasis on the connection between rural health and economic and community development. The RWHC office is in Sauk County. In only this one rural county, the healthcare sector, with its direct and indirect impact, creates employment for 4,400 people and \$128 million in personal income. We have long believed that making the public aware of the importance of a strong local health care sector by encouraging appropriate use of local hospital and health care facilities will help ensure that the health care sector in rural counties remain strong for many years to come. The core message is:

- Every 2 dollars of revenue generated by the health care sector will generate an additional dollar of revenue in other Sauk County industries.
- Every two jobs created (or lost) in the Sauk County health care sector will cause the number of jobs in other industries to increase (or decrease) by one job.
- Every 1 dollar of personal income created in the Sauk County health care sector creates 30 cents worth of personal income in other county industries.

Changes in the local health care delivery system affect not only the quality of life for local residents but also have county wide economic implications. The health care sector not only helps to attract and maintain other businesses but makes a major economic contribution in its own right. The Sauk County economy depends a great deal on the strength of its health care sector. It is necessary for local decision makers to consider how decisions in the health care sector may influence the presence of other industries in the county and vice versa. A better understanding of these changes allows the county to better plan for changes in both health and other sectors, maximizing the positive impacts of these changes and minimizing negative ones.

This thinking is not new in Wisconsin. For over ten years, Wisconsin's top State Board responsible for rural health issues has been located in the Department of Development, allowing for an ongoing process of cross fertilization between rural health leaders and state economic development initiatives. In turn this has helped lead to Competitive Wisconsin, Inc., a consortia of business, labor and government, making ongoing geographic inequities in the Medicare program one of their high priority public policy issues for 2002-03. In Wisconsin, business leadership now understands that Medicare underpayment is a significant component of their health care insurance premium.

II. Outreach To Eligible Families With On Site Benefits Counseling

Rural communities, for a variety of reasons, have typically not been as successful in connecting eligible families to enrollment in government programs or to provide families with the professional support they need to negotiate payment hurdles within private insurance plans. More families could be covered, and more provider bills could be paid, but too many families are unequipped to take advantage of available public and private benefit programs. The effect is staggering bills for families and bad debt for providers.

To create a "win-win" for families and rural hospitals, RWHC has developed a partnership with ABC for Health, Inc. whose family health benefits counselors are well versed with the ins and outs of the state's Medicaid Program and are able to help families negotiate the red tape and get the care they need. In doing so they will bring needed health care coverage to scores of rural families and will bring to the rural hospitals payment for scores of charges.

This project will bring experienced benefits counselors into the hospital billing or business office to train local staff and integrate effective health care financing protocols as a function of customer service. While several larger urban clinics and hospitals around the state have developed Benefits Counseling programming, rural hospitals have largely been unable to provide the initial support to get the program off the ground. These counselors would be integrated within the services and culture of each facility through existing offices, integrated with the rest of the network and integrated with the community and local human service agencies through the nascent HealthWatchWisconsin network. Networking enables several

facilities to take relatively safe steps forward yet experience dramatic gains through a more rapid implementation and learning curve.

With the benefit of a broad Medicaid and SCHIP program this project will enroll scores of children, pregnant women and parents in health care coverage programs. Along with enhanced abilities to cut through insurance delays and denials, this will increase revenues at network partner hospitals while helping them put on an even more patient-friendly face. Health care access will be enhanced, as will be the financial viability of participating hospitals.

To implement this partnership, ABC for Health and RWHC unsuccessfully competed for a federal Network Development Grant in 2002. Subsequently, with particularly creative assistance from ABC for Health, we have been able to design a self-funded approach to initiate this program with a significant number of RWHC hospitals.

III. Serving An Often Overlooked Minority—Farmers & Agricultural Workers

According to Dr. Roger Williams at the University of Wisconsin, most Wisconsin farmers have experienced chronic, prolonged stress over the last 15+ years. Farmers who are under stress for long periods of time encounter a broad array of negative physical, mental, behavioral and cognitive symptoms or problems.

Dr Williams goes on to say that “The combination of effects will be different for every farm family member. But many experience a deadly combination of anxiety, sleep disturbances, exhaustion, anger, depression, substance abuse, withdrawal from others, as well as cognitive and self-esteem problems. It creates a situation where harm of self and others is a real possibility. The other common problem in farm families that have experienced chronic, prolonged stress is marital and family problems: the stress drives a wedge between family members, often leading to a downward spiral of less communication, more frequent fights and greater isolation within the family. This downward spiral is often accentuated when one or both spouses work off the farm to create a stronger cash flow situation for the family; the off-farm job(s) drives the wedge deeper and communication becomes even more strained.”

The health, mental health and safety issues of farmers can be summarized as follows and clearly need the collaborative interventions from health and social service providers:

- Exhausted and sleep deprived
- No health insurance or underinsured
- At risk without disability insurance
- Don't seek treatment for minor accidents or chronic conditions
- Don't seek counseling for mental health problems
- Counselors don't understand the farm culture
- Lack of access to doctors and hospitals

To try and provide better services in a three county area a consortium of five RWHC hospitals, three public health departments, Wisconsin's Office of Rural Health and the Southwest Area Health Education Center joined RWHC in initiating a pilot program known as Partners in Agricultural Health. Financial support was obtained through the federal Office of Rural Health Policy's Outreach Grant Program.

From a recent article in the *Wisconsin State Farmer*: "Partners in Agricultural Health works together with existing community and regional services and is focused on developing awareness of specialized services for farm-related health concerns. These include health education and health promotion programs. They also provide information on personal protective equipment such as respirators and information on how to get them and how to use them."

"Through this program, rural people have an opportunity for first-responder training, first-aid training, programs detailing respiratory hazards on the farm and ways to prevent hearing losses for those who work on farms. Rural residents also have an opportunity to take part in various health-screening services such as hearing tests, lung function tests, height and weight evaluation, blood pressure screening, respirator education and fitness tests, cancer self-examination, and instruction on the proper techniques for lifting to prevent back injuries."

Summary

Rural communities need a fundamentally new federal relationship if they are to prevail over an intimidating array of major challenges. As noted above, we have many great opportunities where we can be more effective if we grow beyond our traditional "professional silos." We appreciate Secretary Thompson's ongoing leadership in moving HHS in the same direction. Thanks.

Notes

1. A copy of this presentation as well as additional information on RWHC, the programs noted above and on other issues that affect the physical, social and economic health of rural communities are available at <<http://www.rwhc.com>>. Tim Size can be reached at <timsiz@rwhc.com>.
2. The Sauk County economic data cited is from *The Economic Value of the Health Care Industry In Sauk County, Wisconsin* by Albert Lanier, M.A., M.S. and Ron Shaffer, Ph. D., Center for Community Economic Development, University of Wisconsin-Extension, November 2000. This study was the result of collaboration among the Center for Community Economic Development, University of Wisconsin-Extension, the Sauk County Development Corporation, the three Sauk County hospitals, the Southeast Wisconsin Area Health Education Center, the Wisconsin Network for Health Policy Research and RWHC.
3. The information on farm families and agricultural workers is from *The Health, Mental Health and Safety of Wisconsin Farm Families, A Policy Paper for the Wisconsin Rural Health Development Council* by Roger T. Williams, Ph.D.,

Professor and Chairman, UW-Madison Department of Professional Development and Applied Studies, 4/3/02.

4. The Partners in Agricultural Health information is from “Rural Health-Care Providers Hope To Work Themselves Out Of A Job” by Gloria Hafemeister in the *Wisconsin State Farmer*, 2/22/02.