

CRITICAL ACCESS HOSPITAL

FINANCIAL AND OPERATIONAL VIRTUAL CONFERENCE

June 2024



STROUDWATER

STATE & CONGRESSIONAL DISTRICT PROFILES





BACKGROUND

Inspired by the 2022 CAH Conference where Alan Morgan cited the power of grassroots lobbying

The Stroudwater team started discussing what could be done to arm board members, providers, policy makers, and other partners with rural health facts specific to states and congressional districts

NRHA and NOSORH both saw value in developing the profiles

- The profiles would help to provide critical baseline information on the status of healthcare access and health outcomes in rural communities
- Breaking down the data into congressional districts would allow NRHA and its members to advocate directly with members of Congress on needs in rural communities and policy solutions to address those needs
- The data would help NRHA, its members, and rural advocates better tell the story of rural health



OUR GOAL

Base the profiles on the three NRHA focus pillars:

- Infrastructure
- Workforce
- Equity
 - In addition: Outcomes were added as a complement to equity

This is the first version of the tool

- We anticipate adding additional functions and measures
- Our objective here is to get feedback so that we can continue to improve this platform



DATA SOURCES

We wanted to use publicly available data

- Recognizable
- Accessible

Primary sources used:

- Infrastructure the places where people seek healthcare
- HRSA's facilities list (RHCs, FQHCs, Hospitals, SNFs)
- Cost report volumes (hospital beds, discharges, swing bed days, labor & delivery days, nursery days, clinic visits, SNF days, etc.)
- Workforce individual providers of healthcare in the community
- NPI file with all physicians/ providers
- Outcomes & Equity/SDOH medical and environmental conditions affecting people's lives and health
- CDC PLACES
- Robert Wood Johnson Foundation County Health Rankings
- Census
- Congressional district crosswalks
- Population data



DEFINITION OF RURAL





Infrastructure

Included in HRSA Facilities download, based on the physical address of the facility



Workforce

ZIP code level using crosswalk from HRSA, identifying which ZIP codes are rural



Outcomes & Equity/SDOH

County level using HRSA's rural county methodology based on census tract population



We assigned data from each pillar to the congressional district using geographic crosswalks from the census

FEEDBACK WE'VE RECEIVED

"Thank you so much for sending this! I have a student developing charts for our legislative districts which we will share with these offices. It will be a great follow up to our meetings at the Policy Institute."

-Lisa Davis, Director and Outreach Associate Professor, Pennsylvania Office of Rural Health

"We are in the process of writing new grants and this data will come in handy."

- Marisol Meyer, New Jersey Department of Health

"I love this tool! What a fantastic resource for us to use for pulling Missouri-specific data. Thank you for sharing this."

-Diana Winder MPA, BAA, AA, Rural Health Coordinator

"Outstanding information!"

-Darrold Bertsch, Sakakawea Medical Center, North Dakota

"This is a great resource, I'm already sending to our partners to share."

-Matt Coleman, Director, Kentucky Office of Rural Health



HOW A STATE OFFICE CAN USE THIS DASHBOARD

In addition to advocacy, state offices can utilize the dashboard for several things:

- Understanding the baseline data to establish the state of rural in your area
- Central resource for displaying information
- Developing a narrative for grants
- Developing the needs section of the FLEX application

DASHBOARD



Who We Are ▼ Services ▼ Who We Serve ▼ News & Insights ▼

Rural Health Insights for Each State & Congressional District







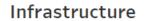
Understand the Landscape of Rural Health in the United States for **Every State and Congressional District**

Stroudwater Associates, in partnership with the National Rural Healthcare Association (NRHA) and the National Organization of State Offices of Rural Health (NOSORH), has developed an integrated data visualization dashboard of healthcare infrastructure, workforce, outcomes, and status metrics. These tools will help policymakers, state and community leaders, rural health advocates, provider organizations and researchers understand the impact and status of rural health within each state and congressional district.

This Tool Allows Users to Sort Data by:

+	Infrastructure
+	Workforce
+	Health Outcomes
+	Health Equity

Infrastructure | Workforce | Health Outcomes | Equity/SDOH



STATE: Alabama CONGRESSIONAL DISTRICT: All





Infrastructure

STATE: Alabama

CONGRESSIONAL DISTRICT: All

Rural Status
Rural
Non-Rural

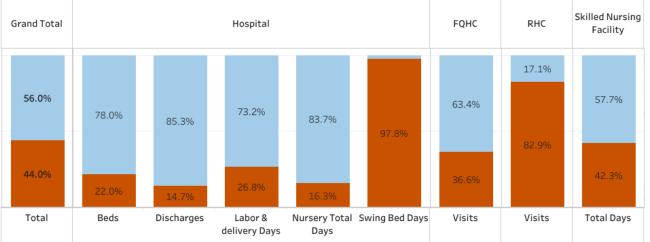
AL

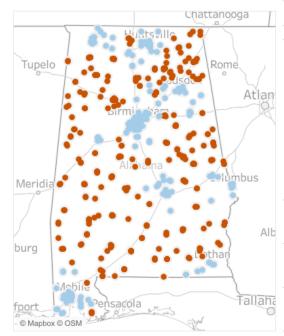
INFRASTRUCTURE

ALABAMA STATEWIDE

Infrastructure is the places where people seek healthcare, including hospitals, health clinics, and skilled nursing facilities.







Category	Subcategory	Volume Type	Rural	Non-Rural	Rural	Non-Rural	Total	Total
Grand Total			4,746,913	6,051,282	44.0%	56.0%	10,798,195	100.0%
Hospital	Total		125,390	561,291	18.3%	81.7%	686,681	100.0%
	CAH	Beds	105		100.0%		105	100.0%
		Discharges	1,747		100.0%		1,747	100.0%
		Labor & delivery Days	0				0	
		Nursery Total Days	0				0	
		Swing Bed Days	7,861		100.0%		7,861	100.0%
	PPS	Beds	2,647	9,776	21.3%	78.7%	12,423	100.0%
		Discharges	73,592	438,256	14.4%	85.6%	511,848	100.0%
		Labor & delivery Days	8,744	23,938	26.8%	73.2%	32,682	100.0%
		Nursery Total Days	17,260	88,851	16.3%	83.7%	106,111	100.0%
		Swing Bed Days	13,434	470	96.6%	3.4%	13,904	100.0%
FQHC	Total		632,376	1,094,916	36.6%	63.4%	1,727,292	100.0%
	Free-Standing	Visits	632,376	1,094,916	36.6%	63.4%	1,727,292	100.0%
	Provider-Based	Visits						
RHC	Total		905,055	187,035	82.9%	17.1%	1,092,090	100.0%
	Free-Standing	Visits	401,298	164,116	71.0%	29.0%	565,414	100.0%
	Provider-Based	Visits	503,757	22,919	95.6%	4.4%	526,676	100.0%
Skilled Nursing	Total		3,084,092	4,208,040	42.3%	57.7%	7,292,132	100.0%
Facility	Free-Standing	Total Days	2,916,823	4,176,618	41.1%	58.9%	7,093,441	100.0%
	Provider-Based	Total Days	167,269	31,422	84.2%	15.8%	198,691	100.0%

Infrastructure

STATE: Alabama CONGRESSIONAL DISTRICT: 2

Infrastructure is the places where people seek healthcare, including hospitals, health clinics, and skilled nursing facilities.

Rural Status

AR

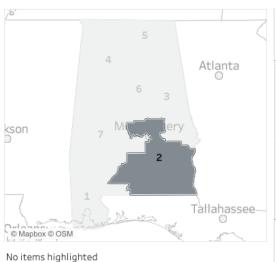
CO

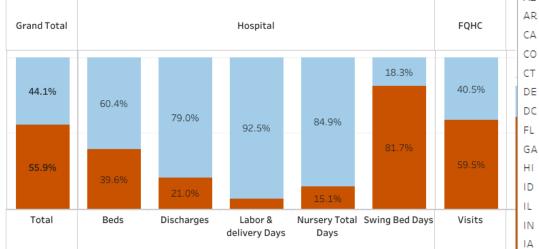
Non-Rural

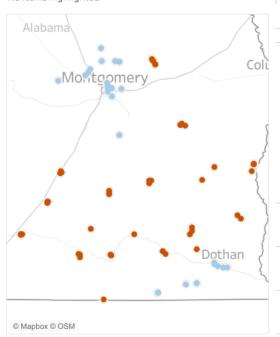
Rural

INFRASTRUCTURE

ALABAMA DISTRICT 2







						K	5	
Category	Subcategory	Volume Type	Rural	Non-Rural	Rural	Non-Rı		
Grand Total			809,429	638,415	55.9%	44. K	Y	
Hospital	Total		17,675	64,958	21.4%	78. LA	4	
	CAH	Beds				M	E	
		Discharges						
		Labor & delivery Days				! M	D	
		Nursery Total Days				∮ M	A	
		Swing Bed Days				M		
	PPS	Beds	558	851	39.6%	60.		
		Discharges	12,465	46,945	21.0%	79. M	N	
		Labor & delivery Days	338	4,190	7.5%	92. M	S	
		Nursery Total Days	2,222	12,502	15.1%	84. M	0	
		Swing Bed Days	2,092	470	81.7%	18.	_	
FQHC	Total	, , , , , , , , , , , , , , , , , , ,	128,254	87,424	59.5%	40. M	Т	
	Free-Standing	Visits	128,254	87,424	59.5%	40.(N	E	
	Provider-Based	Visits				N.	V	
RHC	Total		69,334	8,010	89.6%	10.	LI.	
	Free-Standing	Visits	8,300	0	100.0%	0.0%	8,300	100.09
	Provider-Based	Visits	61,034	8,010	88.4%	11.6%	69,044	100.09
Skilled Nursing Facility	Total		594,166	478,023	55.4%	44.6%	1,072,189	100.09
	Free-Standing	Total Days	594,166	451,480	56.8%	43.2%	1,045,646	100.09
	Provider-Based	Total Days		26,543		100.0%	26,543	100.09

Workforce

STATE: Alabama
CONGRESSIONAL DISTRICT: 2

Workforce is the individual providers of healthcare in the community, including doctors, nurses, physician assistants, dentists, and therapists.



AL

WORKFORCE

ALABAMA DISTRICT 2

Key providers:

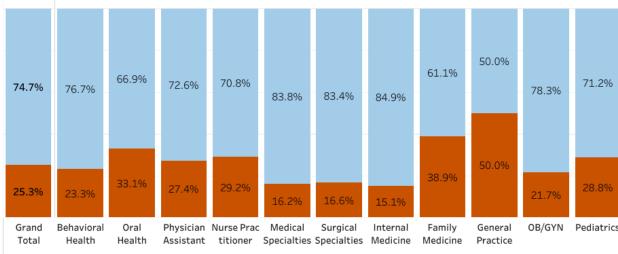
- Behavioral Health
- Oral Health
- Family Medicine
- General Practice
- Internal Medicine
- Medical Specialties
- Nurse Practitioner
- Obstetrics & Gynecology
- Pediatrics
- Physician Assistant
- Surgical Specialty



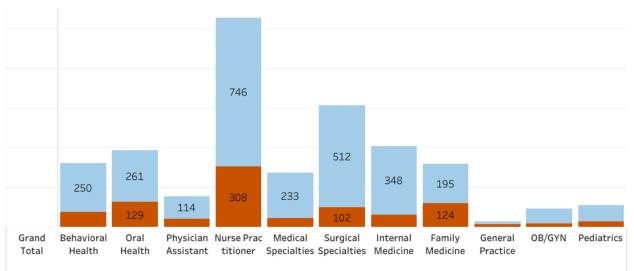
No items	high	lighted
----------	------	---------

Classification	Rural		Non-	Rural
Grand Total	956	25.3%	2,825	74.7%
Behavioral Health	76	23.3%	250	76.7%
Oral Health	129	33.1%	261	66.9%
Physician Assistant	43	27.4%	114	72.6%
Nurse Practitioner	308	29.2%	746	70.8%
Medical Specialties	45	16.2%	233	83.8%
Surgical Specialties	102	16.6%	512	83.4%
Internal Medicine	62	15.1%	348	84.9%
Family Medicine	124	38.9%	195	61.1%
General Practice	15	50.0%	15	50.0%
OB/GYN	20	21.7%	72	78.3%
Pediatrics	32	28.8%	79	71.2%





Count of Workforce that is in a rural vs. non-rural location



Health Outcomes

STATE: Alabama
CONGRESSIONAL DISTRICT: All



No items highlighted

OUTCOMES

ALABAMA STATEWIDE

Available Measures

- All teeth lost
- Cancer
- Coronary heart disease
- Depression
- Diabetes
- Drug overdose deaths
- High blood pressure
- Infant mortality
- Life expectancy
- Obesity
- Suicides

Health outcomes are medical conditions that directly affect the length or quality of a person's life.



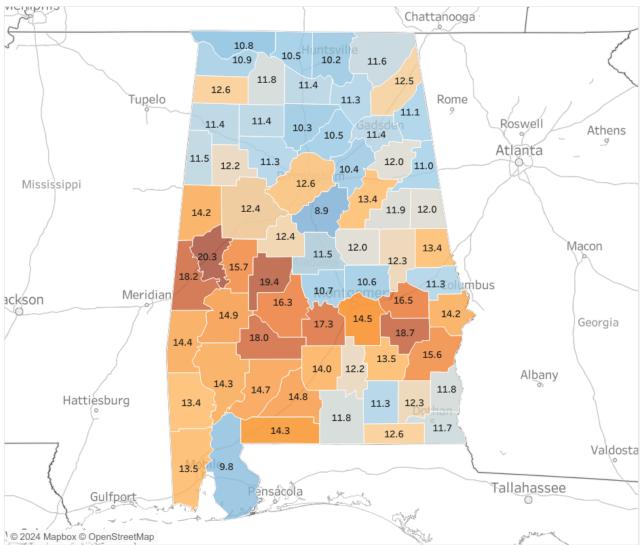
No items highlighted

@ Mapbox @ OSM

County	Measure Value	Variance from State	% Rural (HRSA)	
Autauga County	10.7	-1.3	0.0	
Baldwin County	9.8	-2.2	36.6	
Barbour County	15.6	3.6	100.0	
Bibb County	12.4	0.4	100.0	
Blount County	10.5	-1.5	40.8	
Bullock County	18.7	6.7	100.0	
Butler County	14.0	2.0	100.0	
Calhoun County	12.0	0.0	0.0	
Chambers County	13.4	1.4	100.0	
Cherokee County	11.1	-0.9	100.0	
Chilton County	11.5	-0.5	100.0	
Choctaw County	14.4	2.4	100.0	
Clarke County	14.3	2.3	100.0	

STATE BENCHMARK: 12.0 Prevalance of diagnosed diabetes among adults aged >=18 years

The analysis shows whether measures in each county are higher or lower than the state benchmark.



EQUITY/SDOH

ALABAMA STATEWIDE

Available Measures

- Aging population
- Education
- Minority status
- Poverty
- Single parents
- Unemployment

Equity/SDOH

STATE: Alabama
CONGRESSIONAL DISTRICT: All

 Variance from State Benchmark
 Measure
 ▼ State

 -13.7
 24.6
 Poverty
 ▼

Social determinants of health (SDOH) are conditions where people live that affect their health.

No items highlighted



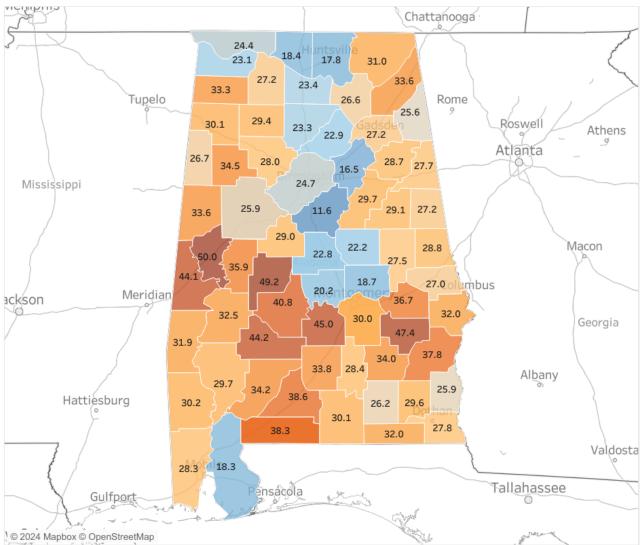
No items highlighted

@ Mapbox @ OSM

County	Measure Value	Variance from State	% Rural (HRSA)	
Autauga County	20.2	-5.1	0.0	
Baldwin County	18.3	-7.0	36.6	
Barbour County	37.8	12.4	100.0	
Bibb County	29.0	3.7	100.0	
Blount County	22.9	-2.5	40.8	
Bullock County	47.4	22.1	100.0	
Butler County	33.8	8.4	100.0	
Calhoun County	28.7	3.4	0.0	
Chambers County	28.8	3.4	100.0	
Cherokee County	25.6	0.3	100.0	
Chilton County	22.8	-2.6	100.0	
Choctaw County	31.9	6.6	100.0	
Clarke County	29.7	4.4	100.0	

STATE BENCHMARK: 25.3 Percent of persons living below 150% of the poverty level

 $The \ analysis \ shows \ whether \ measures \ in \ each \ county \ are \ higher \ or \ lower \ than \ the \ state \ benchmark.$



Equity/SDOH

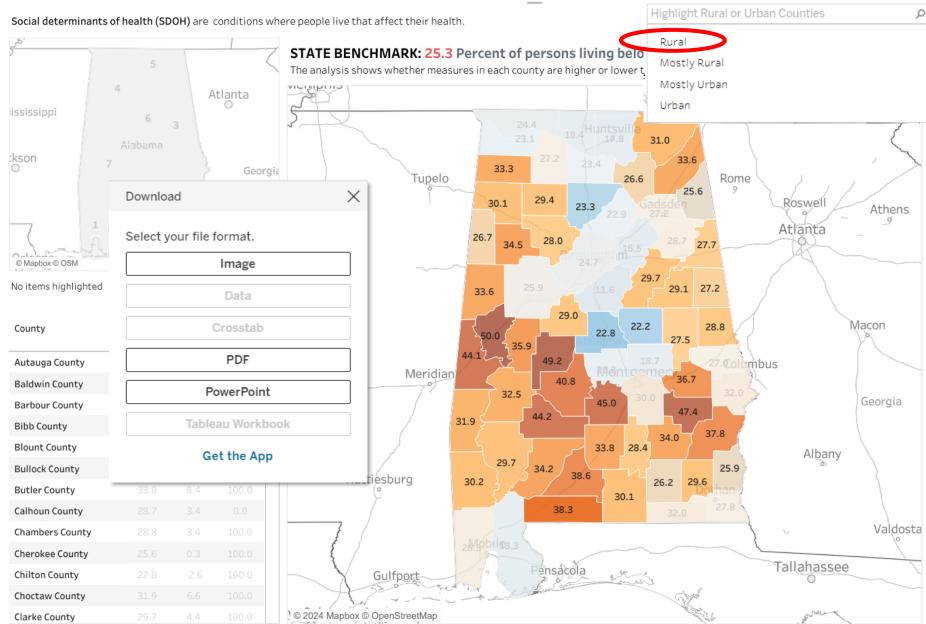
STATE: Alabama
CONGRESSIONAL DISTRICT: All

EQUITY/SDOH

ALABAMA RURAL COUNTIES

Available Measures

- Aging population
- Education
- Minority status
- Poverty
- Single parents
- Unemployment



REQUEST FOR FEEDBACK

- Our goal is continuous improvement
- If you have recommendations on how we can improve this for users like you, we encourage you to reach out to us directly, or through the form on the website landing page.
- We are looking for feedback on:
 - Accessibility
 - User experience
 - Usefulness of information
 - Metrics to add



THANK YOU

Keith Bubblo, Senior Analyst Kbubblo@Stroudwater.com 207-221-8256

Visit:

https://www.stroudwater.com/rural-health-insights-for-each-state-and-congressional-district/





THANK YOU

- Thank you for attending today's conference!
- We are committed to providing highquality learning events. Please take a moment to share feedback about your experience with the 4th Annual Critical Access Hospital Regional Conference. The post-event survey will pop up when you exit the webinar.