



## North Carolina Rural Health Centers 2014 Profile

[www.ncdhhs.gov/orhcc/](http://www.ncdhhs.gov/orhcc/)

### Overview

North Carolina's Rural Health Centers provide quality primary medical services in underserved rural communities. The Office of Rural Health and Community Care (ORHCC) was instrumental in the creation of this network of community-owned, non-profit health centers and continues to support it. Without support from ORHCC, vulnerable populations including uninsured, underinsured, Medicaid and Medicare patients would lose local access to quality primary health care. This effort greatly decreases patient dependency on emergency departments, which carries a much greater cost. The Office assists these centers in four ways:

- **Medical Access Plan (MAP)** provides supplemental funding to the health center for low income patients that need assistance to pay for their office visits.
- **Capital funding** to support the renovation and equipping of rural health centers.
- **Innovation funding** provides support through two project tracks: 1) the center works to become National Committee for Quality Assurance (NCQA) Patient Centered Medical Home recognized and 2) the creation and implementation of sustainable technological infrastructure that enhances access to health care and improves its quality (Meaningful Use).
- **Technical Assistance** provides a comprehensive package of technical assistance, which includes accounting, ICD-10, work flow analysis, information technology (including in-depth Meaningful Use) and oral health (including in-depth practice assessments).

### Importance

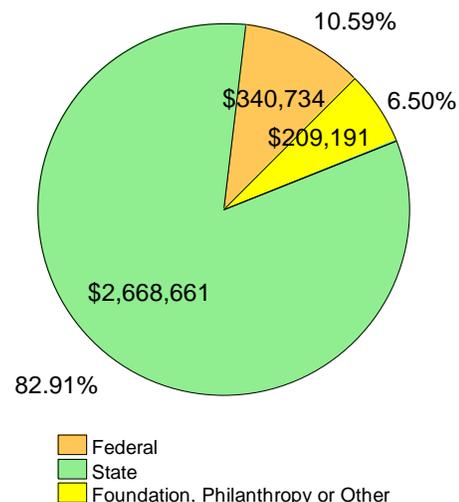
- Rural areas of North Carolina have limited access to quality primary health care. By supporting access in rural communities, the overall health of its citizens can be improved and costly emergency department visits can be avoided.
- These centers serve as medical homes for uninsured, underinsured, Medicaid and Medicare patients.

### Cost, Savings and Program Monitoring

- Total Program Budget of \$3.2 million is primarily recurring state funding (see figure) and covers all costs, including grant programs, staff and operational overhead.
- ORHCC Rural Health Centers provide a medical home to 122,050 NC residents including 20,903 uninsured, 19,281 Medicaid and 31,197 Medicare patients in SFY 2014.
- Average annual cost of \$242.22 per unduplicated MAP patient.
- Of the 13 current state designated rural health center organizations:
  - Four centers report being in the process of obtaining Level I Patient-Centered Medical Home status and one center has obtained Level III status.
  - Nine centers have attested to Stage I Meaningful Use status.
- Based on last available information provided on the NC3N Informatics Center (2013), State designated rural health centers demonstrate better performance than mean national Medicaid measures (HEDIS) for:
  - **Diabetic patients:** HbA1c Control  $\geq 9.0$  is 24.0% vs. 44.7% (lower is better), for RHCs and national Medicaid measures, respectively.
  - **Hypertension patients:** BP Control  $< 140/90$  is 64.1% vs. 56.3% (higher is better), for RHCs and national Medicaid measures, respectively.

Technical Assistance: supporting safety net infrastructure in vulnerable communities resulted in 483 TA encounters for a total of 357 TA hours:	
Type	# of encounters
Board Meeting Assistance	9
Citizen Assistance/Interaction	9
Clinic/Staff Assistance	258
Community Development/Assistance	59
Contract Development/Assistance	58
Site Development/Assistance	16
Software Assistance/Support	62
Support Recruitment and Retention	1
Training Sessions	11
<b>Total</b>	<b>483</b>

### Rural Health Operations Funding Sources (SFY 2013-2014)





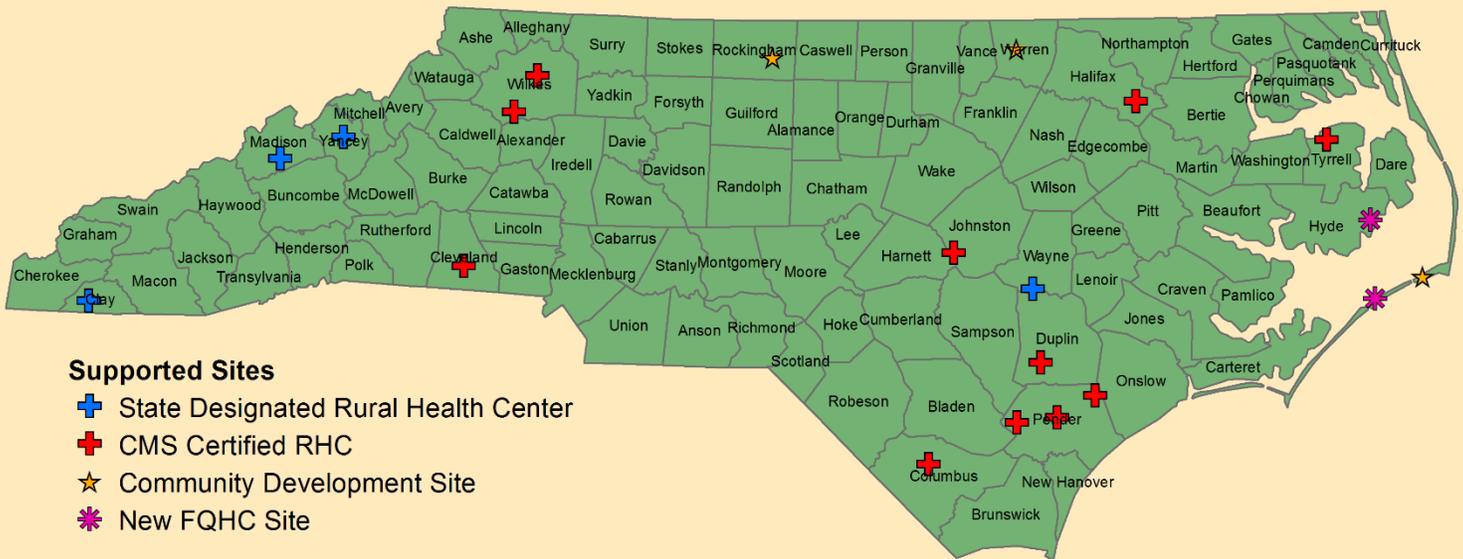
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## Program Coverage:

- 15 rural health center locations in 12 different counties were supported with MAP.
- Five capital grants were awarded.
- Five innovations grants were awarded.
- Technical Assistance provided to 92 of 100 counties in the state.
- One CMS-Certified Rural Health Clinic and one state-designated rural health center merged to become an FQHC (Hyde County).
- Two CMS-certified Rural Health Clinics and one state-designated rural health centers closed (Polk County, Surry County and Wilkes County).
- Two CMS-certified Rural Health Clinics joined with a hospital (Wilkes County).



### Supported Sites

- ⊕ State Designated Rural Health Center
- ⊕ CMS Certified RHC
- ★ Community Development Site
- ✱ New FQHC Site

### If you have further questions, please contact:

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