



Colorado Rural Health Center

Critical Access Hospital Technical Assistance Grant Program

Colorado was awarded the Rural Hospital Flexibility (Flex) grant from the Federal Office of Rural Health Policy to support the Critical Access Hospital (CAH) Program. A major portion of the Flex grant is distributed to Critical Access Hospitals and their communities each year. Each year the CAH Advisory Council and Program Partners help determine the priorities and expectations for the allocation of these grants. To be eligible for a CAH Technical Assistance grant, the rural facility must be certified as a CAH ***or be eligible and seriously considering converting.***

CAH Technical Assistance grant funds are intended to:

1. Assist facilities and their communities with the CAH conversion process;
2. Assist certified CAH's and their communities in maintaining CAH status; and
3. Strengthen the rural healthcare infrastructure in CAH communities.

The federal Flex grant funds are limited, and there is no guarantee of how long the funding will be available. Applications must support **innovative ideas and projects that are likely to make a long-term difference** in the infrastructure of the community or region. These funds cannot be used to support the cost of doing "business as usual."

CAH TA grant applications must involve activities in the following **general categories** that are related to the objectives noted above and that involve innovation and/or long-term sustainability strategies.

- Billing & Reimbursement
- Community Outreach and Education
- Needs Assessment
- Network Development
- Preparation for CAH Certification/Recertification Survey
- Quality Improvement
- Staff Development and Education
- Strategic Planning

Each CAH facility or community may apply for a maximum of \$20,000 in a single Flex grant fiscal year. The fiscal year is from September 1 to August 31st. Facilities may apply for and receive more than one grant, but each facility is limited to a total of \$50,000 during the four-year federal grant period ending August 31, 2007. Of course, these limits are subject to Colorado's federal funding allocation. Applicants are required to match 20% of the cost of the technical assistance.

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"Enhancing healthcare services in Colorado by providing information, education, linkages, tools & energy toward addressing rural healthcare issues."

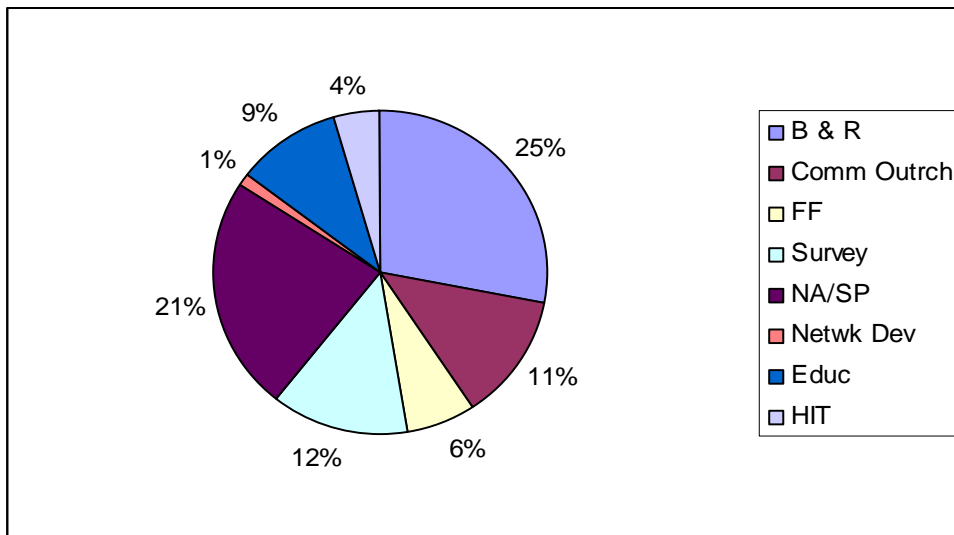
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Since the inception of the CAH TA Grant Program in September 1999, \$918,433 has been dispersed to hospitals and communities to support the following activities:

Billing & Reimbursement	229,845	25%
Community Outreach	100,214	11%
Financial Feasibility Studies	55,500	6%
Licensure Survey Preparation	110,100	12%
Needs Assessment/Strategic Planning	194,700	21%
Network Development	5,000	1%
Quality Improvement	98,500	11%
Staff Education/Training	84,200	9%
Health Information Technology	<u>40,374</u>	<u>4%</u>
Total:	\$918,433	100%



Examples of Successful Projects Include:

- **Yuma District Hospital** reduced medical errors, increased patient safety, and improved the overall quality of care provided by the hospital by installing a computerized physician order entry system and electronic medical records software. CAH TA grant funds helped cover the cost of employee and provider training and software vendor contracts.
- In order to comply with HIPAA privacy and security regulations, **Lincoln Community Hospital** in Hugo hired an architectural consultant to design a new nurses' station. Although federal regulations prevent TA grant funds from being utilized to cover the cost of actual construction, accomplishing facility planning needs is encouraged.
- **Kremmling Memorial Hospital District** used grant funds to revise hospital-wide policies and procedures to reflect changes related to CAH licensure requirements and to pursue JCAHO accreditation.
- With the help of TA grant funds, a joint partnership was formed between **Conejos County Hospital** in La Jara and the San Luis Valley Regional Medical Center (SLVRMC) in Alamosa. A long time network partner and supporter, SLVRMC assisted Conejos County Hospital in forming a new independent organization with a mutually appointed board to collaborate in sharing resources and improving community healthcare access.
- Many hospitals have used TA grant funds to address the challenges of converting from Medicare's PPS (Prospective Payment System) to cost-based billing methodology as a CAH. Assistance has been provided with cost reporting, chargemaster reviews, coding training, and audits.