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October 2024

Rural Connectivity Quarterly Newsletter

Issue #9

Mark your calendars! Rural Connectivity User Group

Thank you to those who took the time to attend our August User Group. CCMCN and CRHC will continue to host quarterly user group meetings, with the next meeting on **Tuesday, November 12th, 10am - 11am MST.**

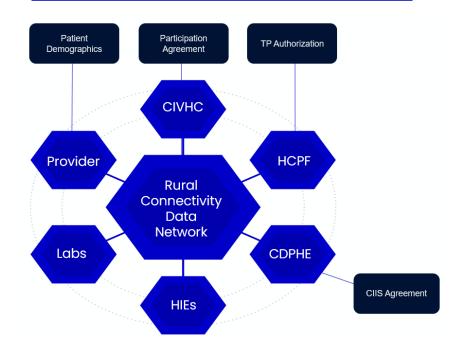
The objectives of these meetings are to:

- ✓ Increase awareness of the Community Analytics Platform (CAP) and available reports
- ✓ Collaborate on new reporting ideas
- ✓ Increase utilization and comprehension of the CAP
- ✓ Gather feedback from users for enhancements to the platform
- ✓ Understand how organizations are using the CAP

Join us for our next Rural Connectivity User Group!

Register Now

Data Sources Updates



Claims Data

Q1 2024 claims are now in production and are reflected in the CAP reports. Q2 2024 claims are expected to be received in October.

CDPHE - Birth Certificate Data

CCMCN has executed agreements with CDPHE to begin receiving birth certificate data on the rural attributed population for participating organizations. Stay tuned for updates on this data source in reports.



Data Quality

"Accurate, timely and accessible health care data play a vital role in the planning, development and maintenance of health care services. Quality improvement and the timely dissemination of quality data are essential if health authorities wish to maintain health care at an optimal level."

Importance of Data Quality

Accurate and reliable health care data are needed for:

- Determining the continuing and future care of a patient at all levels of health care;
- Medico-legal purposes for the patient, the doctor and the health care service;
- Maintaining accurate and reliable information about diseases treated and surgical procedures performed in a hospital and within a community, as well as immunization and screening programs, including the number and type of participants;
- > Clinical and health service research and outcomes of health care intervention, and accurate, reliable and complete statistical information
- about the uses of health care services within a community;
- Working out staffing requirements and planning health care services;
 Managing population health and Identifying disparities amongst
- patients served.

"Demographic and clinical data stored in a patient's medical/health record are the major source of health information and are of no value to medical science or health care management if they are not accurate, reliable and accessible."

To maintain data quality, health care data must be:

- Appropriate
- ✓ Organized
- √ Timely and available
- ✓ Accurate
- ✓ Complete

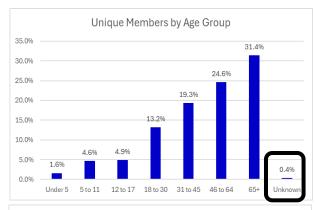
Demographic data can help provide a basis for understanding communities as they are now, where they've been and where they're headed. It can be a powerful tool for uncovering the needs or strengths of a community to guide planning, policy development, or decision making.

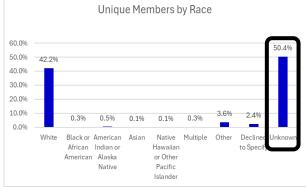


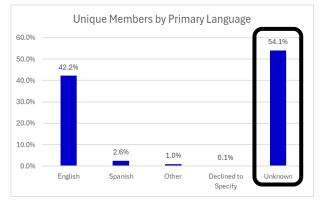
CAP Demographic Data Quality

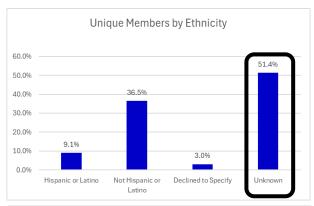
CCMCN strives to continuously improve data quality within the Community Analytics Platform. Demographic Files are the best way to improve demographic data within the CAP. Unknowns represent a high proportion of demographic data collected from demographic files submitted by Providers (see below). End-users and organizations can work with CCMCN and CRHC to improve the quality of data collected and validate the data that currently exists within the platform.

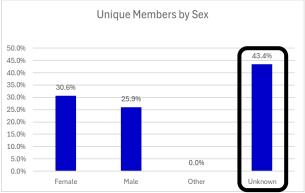
Note: All metrics below are based on data provided by participating providers in demographic files.

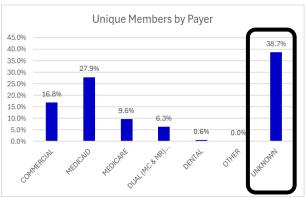












Advancing Health Equity (AHE) Through Improving Clinic Data

AHE is a project initiated by The Colorado Health Foundation (CHF), which aims to support Primary Care Organizations (PCOs) throughout Colorado to develop the systems and expertise to improve their capacity to collect meaningful patient demographic data. In partnership with John Snow, Incorporated (JSI), the Colorado Rural Health Center's (CRHC) Rural Connectivity Program (RCP) Team provides organizations enrolled in this project with coaching and technical assistance to achieve grant objective. Organizations that were approved to participate in this initiative which started in December 2023, and goes until May 2025, were evaluated on seven domains including, but not limited to, Race, Ethnicity, Language (REaL), Sexual Orientation and Gender Identity/Expression (SOGIE) Data, Technology, Data Collection and Data Quality, and Centering Diversity, Equity, and Inclusion (DEI), among others. Based on the evaluation results, JSI, the CRHC RCP Team, and the practice/organization collaborated to identify areas for improvement and build a work plan. The RCP team provides demonstrations of the Community Analytics Platform (CAP) to organizations enrolled in the Rural Connectivity Program participating in AHE. The practices can utilize the CAP to measure patient demographic data collection metrics, evaluate for healthcare disparities, and implement best practices for standardized data collection, thus promoting equitable healthcare outcomes.

Collecting standardized patient demographic and language data across health care systems is an important step toward improving patient outcomes and population health. Comprehensive patient data on race, ethnicity, language, sexual orientation, gender identity, and disability status are key to identifying disparities in the provision of or quality of healthcare. Identifying gaps in care allows organizations to develop systems and workflows to intentionally reduce health disparities in their patient population.

For more information on best practices for standardized data collection or for assistance with improving patient demographic data within your organization, please contact the Rural Connectivity Team at ruralconnect@coruralhealth.org.



Rural Connectivity Project News and Updates

R7 Payments

The next round of Sustainability Payments, \$100,000 per Critical Access Hospital and \$20,000 per Rural Health Center, will be issued on August 1, 2025. At a minimum, to qualify for this payment or partial payment, a participating rural provider must be connected to one of the state's Health Information Exchanges (HIEs) and the Community Analytics Platform (CAP) established by the Office of eHealth Innovation. The following criteria must be met in order to be eligible to receive the payment:

- The participating rural provider has a signed agreement with one of the Colorado Health Information Exchanges (HIEs) so the participating rural provider can view medical records contained within the HIE.
- The participating rural provider has a signed participation agreement (PA) with the vendor (CCMCN) managing the Community Analytics Platform (CAP) so that the participating rural provider is accessing the CAP and authorizing the vendor managing the CAP to capture data on their behalf. All organizations who were participating as of 7/1/2024, received a sustainability payment on August 1, 2024, for every eligible location.

Bolstering connectivity and engagement amongst providers, the HIE and CAP is necessary to continue receiving payments. If you have any questions, please contact John Kennedy, john.kennedy@state.co.us

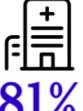
Facilities must be a certified Rural Health Clinics (RHCs) or Critical Access Hospitals (CAHs) to be eligible for R7 payments.

<u>Definitions for facilities; as designated by Centers for Medicare and Medicaid</u> <u>Services(CMS), who are eligible for payment:</u>

- CAHs are designated hospitals with <25 beds which are >35 miles from another hospital.
- RHCs are designated primary care clinics that operate in rural counties.

Current Participation

There are 127 rural organizations/locations that are currently eligible for the Rural Connectivity Project and **R7 Sustainability Payments**



of eligible organizations are contracted to participate in the Community Analytics

of eligible organizations have uploaded Demographics to the Community Analytics Platform

of eligible organizations have completed TP Authorization

of eligible organizations have completed a CIIS agreement

*Participation rates are as of 9/16/2024



Community Analytics Platform Changes

CCMCN has transitioned to a new and improved analytics platform. All reports originally developed by CCMCN are accessible to CAP users and can be found at **cap.colorado.community**. Additionally, CCMCN will collaborate with a new analytics vendor to provide CAP users with access to dynamic, claims-driven reporting. Stay tuned for further details in upcoming user group meetings or newsletters, where updates on the rollout of new reporting functionality will be shared. If you have any questions about the new vendor or need to receive login information and instructions, please contact Andy Woster at and@ccmcn.com.

LOG IN NOW

Rural Health Today

Recent publications that contain rural health research & policy:

- Rural-Urban Differences in Midwifery Care During Childbirth in the
 U.S.
- Loss of Hospital-Based Obstetric Services in Rural Counties in the United States, 2010-2022
- Cervical Cancer Screening Rates Among Rural and Urban Females,
 From 2019 to 2022
- Changes in Rural Pharmacy Presence 2023

Technical Assistance or Demo

If you are interested in receiving an in-depth demonstration of the CAP and all it has to offer or if you need technical assistance, please contact CRHC at

ruralconnect@coruralhealth.org.

Topics of Interest

Are you interested in learning more about a topic that has not yet been covered in the quarterly newsletter or CAP user group meeting? Submit any questions or topics to Demetria Flowers at demetria@ccmcn.com

Demographic Files & Trading Partner Authorization

Want to view data for your organization in the CAP? To begin participating in the Rural Connectivity Project, please contact CRHC at ruralconnect@coruralhealth.org.

Next Rural Connectivity Quarterly Newsletter: January 2025