

Learning Collaborative Call for Applications
Sustaining and Increasing Access to Care in Rural Communities

Co-Sponsored by Capital Link and NACHC, with Support from HRSA

Application Process

Overview

Through a series of four interactive webinars, this Learning Collaborative will explore community needs, growth planning, and financing options for health centers serving rural communities. It will address challenges and opportunities FQHCs face in communities experiencing hospital distress and closure; examine the impact of telehealth on care delivery; and address financial capacity, sustainability, facility planning, and financing options for FQHCs seeking to expand their impact in rural America.

A learning collaborative is a dynamic, virtual peer exchange aiming to foster dialogue among stakeholders facing similar challenges to explore promising best practices, develop a common understanding of critical issues, and improve participants' abilities to respond to rapid changes in their health care environments. Targeting health centers serving rural communities, the content of this learning collaborative will be delivered through a series of four 60-minute webinars from February-April 2021.

Scheduled webinar topics include:

- **Session 1 (Feb. 17, 2021): Lay of the Land: Health Center Challenges and Opportunities in Rural America**
This session will review basic data on health centers serving rural communities, including shifting market data, patient, visit, and financial trends, illustrated in a new publication by Capital Link. We will also review post-election prospects for rural America and current/emerging federal initiatives/opportunities at HRSA, USDA, FCC, SBA. We will consider areas of foundation focus in rural America and review the landscape of available resources to support health centers serving rural communities. The group will also discuss challenges participants are facing in their rural communities.
- **Session 2 (March 10, 2021): FQHC Roles and Opportunities in Connection with Rural Hospital Closure**
This session will explore the findings of a Capital Link analysis of FQHCs' experiences with hospital distress and closure to provide context for considering how FQHCs can play a critical role in evolving health systems in rural communities. We will be joined by several health centers to discuss their experiences and lessons learned, and will engage in dialogue regarding strategies that participants may use in engaging with their communities to address health system issues in a productive manner.
- **Session 3 (April 7, 2021): Enhancing Access through Telehealth**
This session will review existing challenges and opportunities related to telehealth in rural areas. It will offer updates on broadband access, CMS and State reimbursement and flexibilities, as well as innovative approaches to virtual patient care and patient engagement by health centers. This session will highlight health centers that have taken the telehealth approach to a new level to ensure special populations and school based programs are supported.

- **Session 4 (April 21, 2021): Needs Assessment, Growth Planning & Capital Resources for Health Centers Serving Rural Communities**

This session will pull together the “strands” of the Learning Collaborative to provide perspectives on planning and financing health center growth in rural communities. It will cover needs assessment, taking into account telehealth opportunities; planning flexible spaces, including facility design implications related to telehealth and potential hospital collaborations; and major capital funding information, including USDA Community Facilities Program, NMTC (focus on non-Metro), and HRSA Loan Guarantee Program—highlighting examples of health centers that have obtained these types of capital funding.

Presenters for the four webinars include content experts from both the National Association of Community Health Centers (NACHC) and Capital Link.

Learning objectives for participants in this initiative include:

- Gain perspective on the opportunities and challenges related to sustaining access to primary care in rural communities;
- Gain knowledge regarding assessing market needs and planning for growth in rural communities;
- Explore needs, challenges and opportunities for FQHCs in the context of rural hospital closure and/or financial distress;
- Examine the impact of telehealth on access to patient care and explore facility design considerations in planning for greater telehealth use; and
- Gain knowledge of the capital financing process and resources available for health centers serving rural communities.

Participation

Capital Link will be accepting applications from interested health centers, which will need to be completed and returned by Friday, January 29, 2021. There is **no fee for participants** as this Learning Collaborative is funded by HRSA through its cooperative agreements with Capital Link and NACHC. We recommend each organization enroll at least two appropriate team members. All organizations interested in participating must:

- ✓ Complete and submit an Application of Interest on/by Friday, January 29, 2021 to Tony Skapinsky at tskapinsky@caplink.org.
- ✓ Commit to engage in all Learning Collaborative sessions and exercises with the goal of incorporating new knowledge in connection with expanding access to care in rural communities and provide feedback on the overall structure and effectiveness of the Collaborative after the last session.
- ✓ Obtain written consent from your health center’s leadership for your health center’s participation in the Collaborative(see the last page of this application).



Sustaining and Increasing Access to Care in Rural Communities Learning Collaborative

Application of Interest

Eligibility

- The health center applicant has sites in rural communities and/or a significant percentage of its patients reside in rural communities.
- The health center applicant has obtained written consent from leadership for its organization’s participation in the Collaborative (see the last page of this application).
- The health center has provided its most recent **two years** of financial audits

Contact Information

Date Submitted	
Health Center Name	
Corporate Address:	<i>Street, City, State, Zip Code:</i>
Person Submitting Application	<i>Name, Title, Telephone Number, Email Address:</i>
Primary Contact	<i>Name, Title, Telephone Number, Email Address:</i>
Name of Intended Team Participants (2-3 individuals)	<i>We recommend at least two team members.</i>
1.	<i>Title, Organization, Telephone Number, Email address:</i>
2.	<i>Title, Organization, Telephone Number, Email address:</i>
3.	<i>Title, Organization, Telephone Number, Email address:</i>

General Information

FQHC Designation(s)	Yes	No	If No, Target Application Date	Approval Date
Section 330 FQHC				
FQHC Look-Alike				
Other, please specify:				
Total # of Sites				
# of Sites in Rural Communities				
Total # of Patients				
Est % of Patients from Rural Communities				
Financial Audits	<i>Submit copies of latest two years of financial audits</i>			

Rural Considerations

Hospital Closure	<i>Has your health center been affected (or may be affected) by the financial distress or closure of a rural community hospital?</i>
USDA	<i>Has your health center ever received funding or financing from the USDA?</i>
COVID-19	<i>How has your health center been affected by COVID-19? (Increase/decrease in utilization; workforce challenges, etc.)</i>
Telehealth	<i>What has been your experience/limitations with implementing telehealth visits over the last 12 months?</i>

Capital Expansion

Capital Project Objectives	<i>Does the health center have short to medium term capital expansion plans in a rural community?</i>
Project Description	<i>Please briefly describe the capital project (new construction/renovation, equipment, square footage, replacement or expansion, services to offer, budget, if known, etc.)</i>
Anticipated Funding Sources	<i>Have you assembled any funding for this project? ____ Yes ____ No</i> <i>If yes, approximate percentage of funding secured ____%</i>
Project Location (if known)	<i>Street, City, State, Zip Code:</i>
Development Timeline	<i>Estimated timing for planning, development team assemblage, site acquisition, construction, and/or operations:</i>
Preparedness	<i>On a scale of 1 to 5 (with 5 being extremely prepared), how prepared do you feel your organization is to undergo a capital project at this time?</i> <i>1 2 3 4 5</i>

Expectations

Other	<i>What other information do you hope to learn about/share during the Learning Collaborative?</i>
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Consent for Participation from Health Center Leadership (Direct Supervisor or Senior Management)

I understand and consent to the participation of members representing my health center in Capital Link and NACHC's **Sustaining and Increasing Access to Care in Rural Communities** Learning Collaborative. I understand that participation will include attendance at four group webinars and engaging in dialogue with other participants.

Printed Name

Title

Signature

Date

If a signature cannot be obtained, health center leadership may email written consent to Tony Skapinsky at tskapinsky@caplink.org.

Application Submission

Please submit your completed application of interest by **Friday, January 29, 2021** to:

Tony Skapinsky
Project Consultant
Capital Link
tskapinsky@caplink.org

About Capital Link

Capital Link is a national non-profit dedicated to strengthening and expanding high quality community-based health care by working with health centers to plan capital projects, finance growth and improve performance. Additional information is available at www.caplink.org. Capital Link is a National Training and Technical Assistance Provider through a National Cooperative Agreements with HRSA.

About NACHC

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all. NACHC also works closely with chartered State and Regional Primary Care Associations (PCAs) to fulfill their shared health care mission and support the growth and development of community-based health center programs. Additional Information can be found at www.nachc.org.