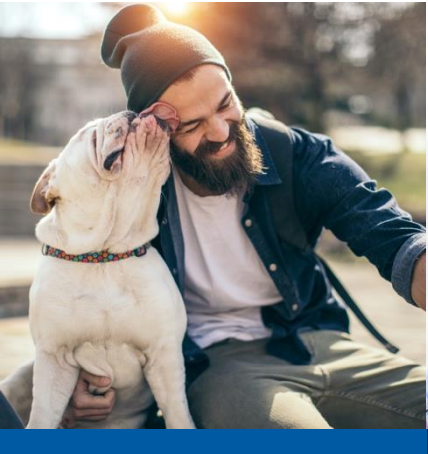


W O R K I N G   T O   A C H I E V E   H E A L T H   E Q U I T Y



# National Rural Health Day Webinar: CMS Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities

November 15, 2022

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# Agenda

- CMS OMH Overview
- CMS Strategic Pillars and CMS Framework for Health Equity
- OMH Ongoing Rural Health Work
- Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities
- CMS Division of Tribal Affairs Presentation
- CMS Rural Health Council Presentation

## A C C E S S I B I L I T Y

**Live Transcript** – In order to access this feature, go to the menu at the bottom of the screen and click on the “Live Transcript” icon. After you click this icon, click on “Enable Auto-Transcription,” which will allow closed captioning to appear on the bottom of your screen.

# Speakers



Dr. LaShawn McIver,  
CMS Office of Minority Health



Dr. LaShanda Glasgow,  
CMS Office of Minority Health



Darci Graves,  
CMS Office of Minority Health



Dr. Susan Karol  
CMS Division of Tribal Affairs



John Hammarlund  
Office of Program Operations & Local Engagement



# Rural Health Challenges

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Rural communities often face socioeconomic and structural barriers to health care access that result in disparate outcomes compared to urban residents.

Challenges faced by rural residents include:

- Higher rates of poverty and unemployment
- Higher rates of uninsurance or underinsurance
- Longer travel times to reach healthcare practitioners
- Limited access to modern technology and high-speed internet



# CMS Office of Minority Health

**The Centers for Medicare & Medicaid Services (CMS)** is the largest provider of health insurance in the United States, responsible for ensuring that more than 170 million individuals supported by CMS programs (Medicare, Medicaid, Children's Health Insurance Program, and the Health Insurance Marketplaces) are able to get the care and health coverage they need and deserve.

**The Centers for Medicare & Medicaid Services Office of Minority Health (CMS OMH)** is one of eight offices of minority health within the U.S. Department of Health and Human Services. CMS OMH works with local and federal partners to eliminate health disparities while improving the health of all minority populations, racial and ethnic communities, people with limited English proficiency, lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

# CMS Office of Minority Health

## Mission

CMS OMH will lead the advancement and integration of health equity in the development, evaluation, and implementation of CMS's policies, programs, and partnerships.

## Vision

All those served by CMS have achieved their highest level of health and well-being, and we have eliminated disparities in health care quality and access.



# CMS Strategic Pillars and the CMS Framework for Health Equity

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# CMS Strategic Pillars

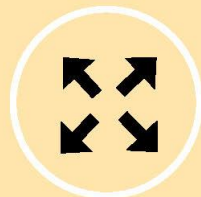
## ADVANCE EQUITY

Advance health equity by addressing the health disparities that underlie our health system



## EXPAND ACCESS

Build on the Affordable Care Act and expand access to quality, affordable health coverage and care



## ENGAGE PARTNERS

Engage our partners and the communities we serve throughout the policymaking and implementation process



## DRIVE INNOVATION

Drive Innovation to tackle our health system challenges and promote value-based, person-centered care



## PROTECT PROGRAMS

Protect our programs' sustainability for future generations by serving as a responsible steward of public funds



## FOSTER EXCELLENCE

Foster a positive and inclusive workplace and workforce, and promote excellence in all aspects of CMS's operations







## CMS Framework for Health Equity 2022–2032

### Definition of Health Equity

The attainment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, or other factors that affect access to care and health outcomes. CMS is working to advance health equity by designing, implementing, and operationalizing policies and programs that support health for all the people served by our programs, eliminating avoidable differences in health outcomes experienced by people who are disadvantaged or underserved, and providing the care and support that our enrollees need to thrive.

### CMS Framework for Health Equity Priorities

-  Priority 1: Expand the Collection, Reporting, and Analysis of Standardized Data
-  Priority 2: Assess Causes of Disparities Within CMS Programs, and Address Inequities in Policies and Operations to Close Gaps
-  Priority 3: Build Capacity of Health Care Organizations and the Workforce to Reduce Health and Health Care Disparities
-  Priority 4: Advance Language Access, Health Literacy, and the Provision of Culturally Tailored Services
-  Priority 5: Increase All Forms of Accessibility to Health Care Services and Coverage

To read the CMS Framework for Health Equity 2022-2032, visit [go.cms.gov/framework](https://go.cms.gov/framework).

**"As the nation's largest health insurer, the Centers for Medicare & Medicaid Services has a critical role to play in driving the next decade of health equity for people who are underserved. Our unwavering commitment to advancing health equity will help foster a health care system that benefits all for generations to come."**



**Dr. LaShawn McIver,**  
Director, CMS Office of Minority Health

The CMS Office of Minority Health offers health equity technical assistance resources, aimed to help health care organizations take action against health disparities. If you are looking for assistance, visit [go.cms.gov/omh](https://go.cms.gov/omh) or email [HealthEquityTA@cms.hhs.gov](mailto:HealthEquityTA@cms.hhs.gov).



# CMS Framework for Health Equity

Allows a framework for CMS to operationalize health equity.

Newly released to expand on the existing CMS Equity Plan to include all CMS programs: Medicare, Marketplace, and Medicaid and CHIP.

Identifies 5 Priority Areas.

Evidence-based

- CMS’s approach to advancing health equity is informed by decades of research and years of dedicated, focused stakeholder input, and evidence review.
- Gather and synthesize input from health care providers; federal, state, and local listening session participants; tribal nations; individuals and families; researchers; policymakers; and quality improvement and innovation contractors.



# CMS Framework for Health Equity: 5 Priority Areas



Priority 1: Expand the Collection, Reporting, and Analysis of Standardized Data



Priority 2: Assess Causes of Disparities Within CMS Programs, and Address Inequities in Policies and Operations to Close Gaps



Priority 3: Build Capacity of Health Care Organizations and the Workforce to Reduce Health and Health Care Disparities



Priority 4: Advance Language Access, Health Literacy, and the Provision of Culturally Tailored Services



Priority 5: Increase All Forms of Accessibility to Health Care Services & Coverage

[go.cms.gov/framework](https://go.cms.gov/framework)

# CMS OMH Ongoing Rural Health Work

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# Advancing Rural Health Equity

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Activities and accomplishments included represent CMS's commitment to advance health equity for people living in rural, tribal, and geographically isolated communities in fiscal year 2022.

The report focuses on 10 focus areas that capture efforts under CMS's programs, innovative models and demonstrations to test potential health care delivery and payment solutions, and other initiatives across the agency to address the persistent health inequities and challenges facing many rural communities described above.



## Advancing Rural Health Equity

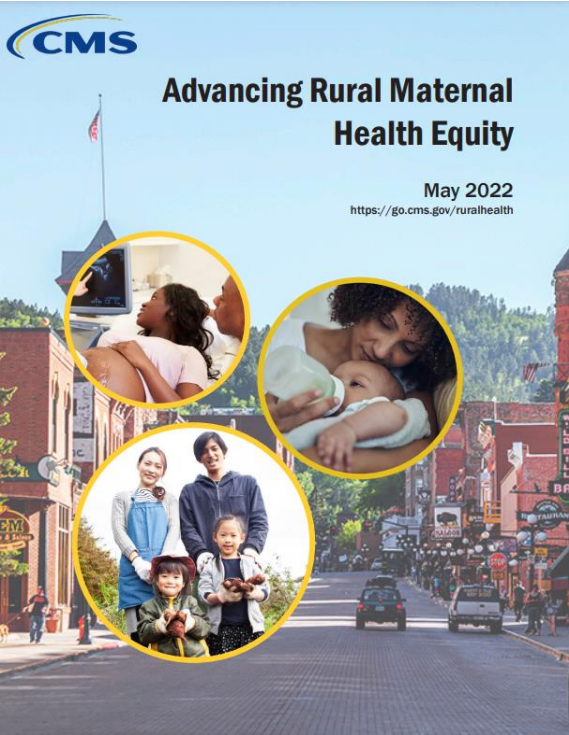
Fiscal Year 2022



# Rural Health Updates

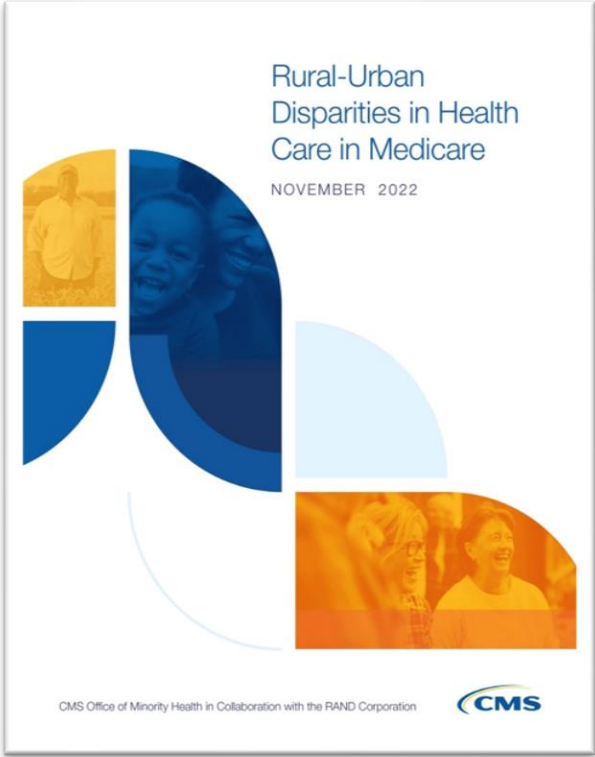
## Initiatives

Advancing Rural Maternal Health Equity



## Studies

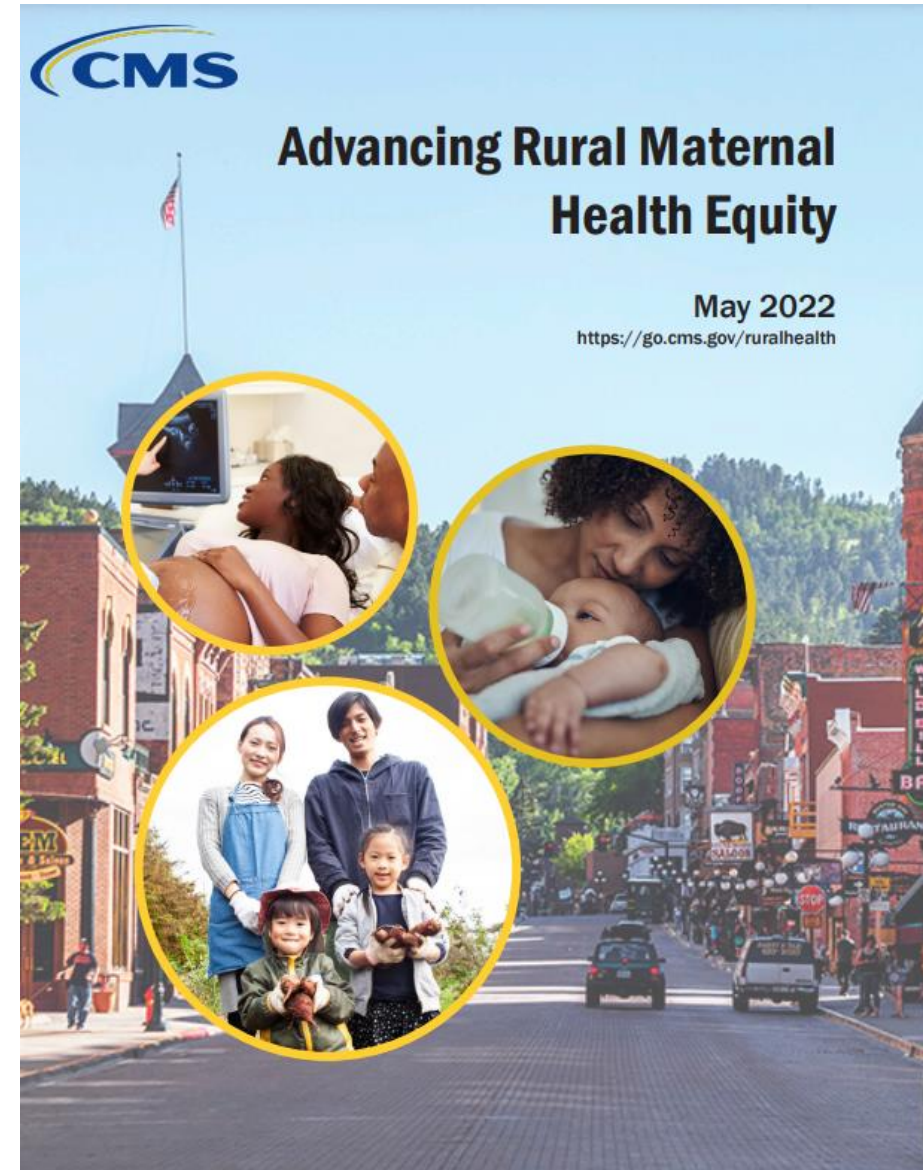
Rural-Urban Disparities in Health Care in Medicare



# Advancing Rural Maternal Health Equity

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- This report provides a high-level summary of the activities that CMS OMH implemented as part of its Rural Maternal Health Initiative between June 2019 and November 2021, including:
  - [Rural Maternal Health Forum: Charting Our Path Forward](#)
  - [Improving Access to Maternal Health Care in Rural Communities: Issue Brief](#)
  - Quality Improvement Discussions
  - Rural Health Stakeholder Policy Priorities
  - Rural Obstetric Readiness Workgroup
  - CMS Rural Maternal Health Workgroup



# Rural-Urban Disparities in Health Care in Medicare

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This report examined rural-urban differences in health care experiences and clinical care, how rural-urban differences in quality of care vary by race and ethnicity, and how racial and ethnic differences in quality of care vary between rural and urban areas.

- Overall, the report found that people with Medicare living in rural and urban areas had experiences with care that were similar to the national average.
- The report identified noteworthy variation in patterns of rural-urban differences by race and ethnicity.
- The report also uncovered noteworthy variation in racial and ethnic differences when looking separately within rural and urban areas.





# Rural Health Resources

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CMS OMH offers a variety of resources designed to assist providers better serve the needs of patients in rural communities:

- [Health Observance Webpage](#)
- [Rural Health Webpage](#)
- [Chronic Care Management and Connected Care](#)





# Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities

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# Overview

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To ensure that CMS's approach is responsive to the unique needs of rural, tribal, and geographically isolated communities, CMS engaged with listening session participants and federal partners across the nation with lived experience receiving health care or supporting health care service delivery in these communities to help shape the CMS Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities. The Framework focuses on six priorities over the next five years.

CMS Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities





## Development and Alignment

- The *CMS Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities* updates and builds upon the [CMS Rural Health Strategy](#), released in 2018, to reflect changes in the health care landscape since its development.
- In alignment with the [CMS Framework for Health Equity 2022—2032](#), this Framework supports CMS's overall efforts to **advance health equity, expand access to quality, affordable health coverage, and improve health outcomes for all Americans.**



# Priority 1: Apply a Community-Informed Geographic Lens to CMS Programs and Policies

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Listening session participants and federal partners from across the country emphasized the importance of engaging individuals with lived experience receiving or supporting the delivery of health care services in rural areas to better understand their needs and the impacts of CMS programs and policies in these areas.





## Priority 2: Increase Collection and Use of Standardized Data to Improve Health Care for Rural, Tribal, and Geographically Isolated Communities

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Listening session participants and federal partners highlighted the need for CMS to harness and share its own data as well as its associates' data to better understand geographic health disparities and gain insight into the specific needs of people living in rural, tribal, and geographically isolated areas.





## Priority 3: Strengthen and Support Health Care Professionals in Rural, Tribal, and Geographically Isolated Communities

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Listening session participants and federal partners underscored the importance of supporting the rural health workforce, including improving recruitment and retention of health care providers and allied health professionals, strengthening rural health care provider competencies to provide high-quality care, and reducing administrative and financial burdens on rural providers.



## Priority 4: Optimize Medical and Communication Technology for Rural, Tribal, and Geographically Isolated Communities

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Listening session participants and federal partners emphasized the need to expand access to and use of medical and communication technology, including expanding telehealth services covered by CMS and improving health information technology infrastructure.







## Priority 5: Expand Access to Comprehensive Health Care Coverage, Benefits, and Services and Supports for Individuals in Rural, Tribal, and Geographically Isolated Communities

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Listening session participants and federal partners highlighted the need to improve access to a full continuum of care, including integration and coordination of care, by exploring opportunities to enhance Medicare, Medicaid, CHIP, and Marketplace coverage of many different services and supports, including those that address transportation challenges and other SDOH in rural communities.



# Priority 6: Drive Innovation and Value-Based Care in Rural, Tribal, and Geographically Isolated Communities

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Listening session participants and federal partners encouraged CMS to continue to leverage its existing authorities to test demonstrations and models of care that meet the needs of rural communities, and to identify synergies and promote alignment and collaboration across a broad array of rural allies and government agencies to advance care approaches that are designed for and by rural communities.

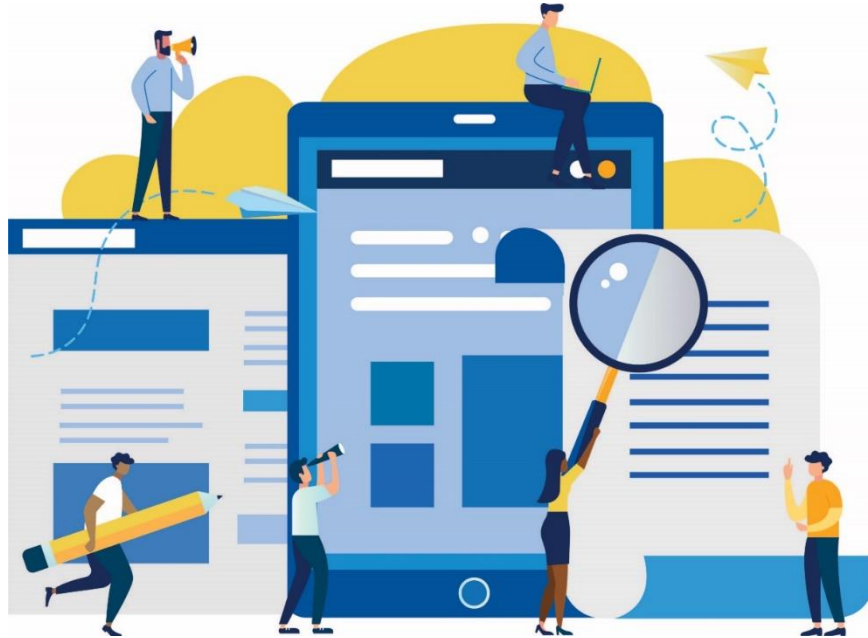


# Technical Assistance and Contact Information

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# CMS Health Equity Technical Assistance Program



[HealthEquityTA@cms.hhs.gov](mailto:HealthEquityTA@cms.hhs.gov)

The CMS OMH Health Equity Technical Assistance program supports quality improvement partners, providers, and other CMS stakeholders by offering:

- Personalized coaching and resources
- Guidance on data collection and analysis
- Assistance to develop a language access plan and disparities impact statement
- Resources on culturally and linguistically tailored care and communication

# Connect with CMS OMH

## Contact Us

[OMH@cms.hhs.gov](mailto:OMH@cms.hhs.gov)

## Visit Our Website

[go.cms.gov/omh](http://go.cms.gov/omh)

## Listserv Signup

[bit.ly/CMSOMH](http://bit.ly/CMSOMH)

## Coverage to Care

[CoverageToCare@cms.hhs.gov](mailto:CoverageToCare@cms.hhs.gov)

## Health Equity Technical

### Assistance Program

[HealthEquityTA@cms.hhs.gov](mailto:HealthEquityTA@cms.hhs.gov)

## Rural Health

[RuralHealth@cms.hhs.gov](mailto:RuralHealth@cms.hhs.gov)



# CMS Division of Tribal Affairs

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# CMS Rural Health Council

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# How we can work together: we seek your feedback, so please engage with us

- Visit [go.cms.gov/Rural Health](https://www.go.cms.gov/RuralHealth)
- Sign up for the CMS Rural Health Listserv
- Participate in the Rural Open Door Forum calls and help us build the agendas
- Provide written comments on proposed rules; respond to requests for information
- Connect with the CMS Rural Health Coordinator in your region

# CMS Rural Health Coordinators

**Region 1 - Boston** (CT, ME, MA, NH, RI, VT)  
**Joe Stone;** [joseph.stone@cms.hhs.gov](mailto:joseph.stone@cms.hhs.gov)

**Region 2 - New York** (NJ, NY)  
**Thomas Bane;** [thomas.bane@cms.hhs.gov](mailto:thomas.bane@cms.hhs.gov)

**Region 3 - Philadelphia** (DE, DC, MD, PA, VA, WV)  
**Dexter Glasgow;** [dexter.glasgow@cms.hhs.gov](mailto:dexter.glasgow@cms.hhs.gov)

**Region 4 – Atlanta** (AL, FL, GA, KY, MS, NC, SC, TN)

**Lana Dennis;** [lane.dennis@cms.hhs.gov](mailto:lane.dennis@cms.hhs.gov)

**Region 5 - Chicago** (IL, IN, MI, MN, OH, WI)  
**Yemisi Ogunsanya;**  
[oluyemisi.ogunsanya@cms.hhs.gov](mailto:oluyemisi.ogunsanya@cms.hhs.gov)

**Region 6 - Dallas** (AR, LA, NM, OK, TX)  
**Carmen Irwin;** [carmen.irwin@cms.hhs.gov](mailto:carmen.irwin@cms.hhs.gov)



# CMS Rural Health Coordinators, cont'd

**Region 7 - Kansas City** (IA, KS, MO, NE)

**Paula Greathouse;** [paula.greathouse@cms.hhs.gov](mailto:paula.greathouse@cms.hhs.gov)

**Region 8 - Denver** (CO, MT, ND, SD, UT, WY)

**Jeannie Wilkerson;**

[Jeannie.Wilkerson@cms.hhs.gov](mailto:Jeannie.Wilkerson@cms.hhs.gov)

**Region 9 - San Francisco** (AZ, CA, HI, NV,  
American Samoa, Northern Mariana Islands,  
Federated States of Micronesia, Guam, Marshall  
Islands, Republic of Palau)

**Keara Nordahl;** [keara.nordahl@cms.hhs.gov](mailto:keara.nordahl@cms.hhs.gov)

**Region 10 - Seattle** (AK, ID, OR, WA)

**Cecile Greenway;** [cecile.greenway@cms.hhs.gov](mailto:cecile.greenway@cms.hhs.gov)

**CMS Puerto Rico** (Puerto Rico, US Virgin Islands)

**Marina Diaz;** [marina.diaz@cms.hhs.gov](mailto:marina.diaz@cms.hhs.gov)