

LaSheila Young

From: LaSheila Young [lyoung@mphca.com]
Sent: Friday, October 29, 2010 1:52 PM
To: LaSheila Young
Subject: MPHCA E-Update-October 28, 2010



MPHCA e-Update- October 28, 2010

MPHCA Events/Educational Offerings

- November 3-5, 2010- MPHCA Fall Clinical Conference, The Riley Center in Meridian, MS.
- November 4, 2010- MPHCA Board of Directors Meeting
- January 11-12, 2010-UDS Training
- **SAVE THE DATE-MPHCA TO CONVENE 25TH ANNUAL CONFERENCE & 30TH YEAR CELEBRATION SEPTEMBER 20-24, 2011 * HARRAH'S TUNICA & MID-SOUTH CONVENTION CENTER * ROBIN**
For Information, Contact Kim Hancock at 601-981-1817 or khancock@mphca.com.
WATCH FOR MORE INFORMATION COMING SOON TO www.mphca.com & WE HOPE TO SEE

For complete information on trainings listed above, please click on http://www.mphca.com/Training_and_Events.htm

Other Events/Educational Offerings

Register for Upcoming Conferences, Regional and Online Trainings that fit your learning style: View and Technical Assistance education calendar. [Register online to Learn more](#)

Medicaid Providers Workshops throughout Mississippi

October 28, 2010 Southaven, MS

November 4, 2010 Biloxi, MS

November 9, 2010 Meridian, MS

November 18, 2010 Raymond, MS

[For more information, click here.](#)

Two Health IT and Quality Events for HRSA Grantees and the Safety Net Community in November

1) AHRQ ePSS Web Conference: Using EHRs to Provide Preventive Services at the Point of Care

AHRQ and the Health Research & Educational Trust of the American Hospital Association will present a free Web conference on Wednesday, **Nov. 3, 2010, from 12:30-2:00 PM ET.**

The conference is part of an ongoing outreach project by AHRQ to assist health care providers, educators, and other health care professionals in implementing the evidence-based recommendations of the U.S. Preventive Services Task Force. To make it easier to implement these recommendations in clinical practice, AHRQ has created the electronic Preventive Services Selector (ePSS), a free electronic application that includes the current recommendations of the USPSTF. It can be downloaded to a handheld device (e.g., iPhone, BlackBerry), installed as a widget on any Web site, or embedded into EMR systems. ePSS allows clinicians to provide age, gender, and behavior-specific health screening, counseling, and preventive services to patients at the point of care.

David Schulke, Vice President of Health Research & Educational Trust / American Hospital Association will moderate the conference. Dr. Robert M. Wachter, PhD, Director of HRSA's Office of Health IT and Quality, is among conference presenters. At the end of the Web conference, participants will be familiar with the USPSTF recommendations and understand how the free ePSS tool can be integrated into their workflow.

To register for the Web conference, please go to

<http://wcc.webeventservices.com/r.htm?e=255137&s=1&k=8033EE0EBEAD55D6A768EC14A1D9F73D&cb=1>

On the day of the Web conference, November 3, use the same link and also call into 866-818-1395 for the answers to your questions, please email Chris Hund (chund@aha.org).

2) Dr. Wakefield at the 2010 mHealth Summit- Nov. 8-10, Washington DC Convention Center

The mhealth Summit will provide a forum for dialogue among government, academia, not-for-profit, and industry leaders on the technology that can be adapted for communities and countries alike. The Summit is presented by the Foundation for the National Institutes of Health in partnership with NIH and the United Nations Foundation.

Dr. Mary Wakefield, HRSA Administrator, will be participating on a Super Session panel on November 8 that will discuss how comparative effectiveness research can be designed to move the field of mhealth forward. Additional keynote presentations will be delivered by Dr. Francis A. Collins, NIH Director; Ted Turner, Chairman, UN Foundation, Aneesh Chopra, U.S. Chief Information Officer, and Bill Gates, Co-Chair and Trustee, Bill and Melinda Gates Foundation.

What is mhealth?

According to the UN Foundation, mobile health, also known as mHealth, is the delivery of health care services through mobile communication devices such as cell phones. Applications range from targeted text messages to promote health behaviors to large scale alerts about disease outbreaks. The proliferation of cell phones across the globe, even in locales without traditional telecommunication infrastructure, is spurring the growth of mHealth in developing countries.

HRSA's Involvement in mHealth

HRSA is a strong promotion partner and is the lead agency for the evaluation of text4baby, a free mobile information system to promote maternal and child health. Text4baby provides pregnant women and new moms with three free, evidence-based text messages a week so they can take care of their health and their baby's health. The program, which was launched in 2010, is made possible through a broad public-private partnerships. For more information about text4baby, please visit

www.text4baby.org

For more information on the mhealth Summit, please see www.mhealthsummit.org. Please note there is a \$100 fee for registration.

Global Obesity Summit 2010

The Global Obesity Summit 2010 will be held **November 9-11** in Jackson, MS, at the Jackson Convention Center. The summit is sponsored by the University of Mississippi Medical Center and the Greater Jackson Chamber Partnership and is co-sponsored by the American Physiological Society, the Inter-American Society of Hypertension, the Council for High Blood Pressure Research, the American Heart Association, and the Council on Nutrition, Physical Activity and Metabolism of the American Heart Association. We hope that you will consider attending this exciting meeting. For complete information, visit

www.greaterjacksonpartnership.com.

[CLICK HERE FOR AGENDA!](#)

[CLICK HERE FOR REGISTRATION FORM!](#)

[CLICK HERE FOR FEATURED SPEAKERS!](#)

Annual Statewide HIV Update Conference

The Delta Region AIDS Education and Training Center, in the Division of Infectious Diseases and Medicine at the University of Mississippi Medical Center in Jackson, Mississippi, is sponsoring an Update conference from 1:00 p.m.-7:30 p.m. on **Thursday, December 9, 2010** in the Jackson Cochran Conference Center. This program targets physicians, nurses, pharmacists and social workers currently treating the HIV/AIDS population. This event will provide an update on HIV information on Tuberculosis and HIV, Hepatitis C and HIV, New Drugs, Adult and Perinatal Guidelines, Barriers to HIV Treatment, Issues Relating to LGBT Populations, and a dinner session on Reproductive Options With HIV. In addition, a panel of experts from across the state will update us on their Continuous Quality Improvement projects, and conference participants will face the challenge of "HIV Jeopardy" so *quick on your feet* to lead your team to victory. Now is the time to register, so fill out the attached form with complete payment information and send it in today. Continuing Education credit will be available. For more information, call Joan Bounds at 4-1300 or e-mail her at jbounds@umc.edu.

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[Flyer](#)

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[Registration Form](#)

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[Agenda](#)

Upcoming Webinars Sponsored by NACHC:

Developing Successful Partnerships between Health Centers and Critical Access Hospitals

Wednesday, November 3rd at 2:00pm Eastern. Register by November 1st! Learn about the unique challenges of health centers in partnering with Critical Access Hospitals and some of the solutions employed to overcome them.

Developing Successful Partnerships between Health Centers and Local Health Departments

Wednesday, November 10th at 2:00pm Eastern. Register by November 8th! Find out how to utilize the model as a driver in health center/Local Health Department partnerships, the specific benefits each partner brings to the table, and the challenges and solutions.

Other webinars:

Commonwealth Fund Presents, Realizing Health Reform's Potential Webinar: Health Insurance Exchanges and Thursday, **November 4th at 2:00pm Eastern.**

Fall WebEx Series for FQHC staff

For the first time PMG is proud to offer Continuing Education Credits from the American Academy of Professional Training Sessions. A total of 4.5 CEUs are awarded to the registered attendee. Please contact PMG with any questions or the sessions as a whole. Go to <http://www.gopmg.com/courses.shtml> for complete listings of training sessions. Offering MS CHCs a 10% discount on all sessions, without required minimum. Note: Registering CHCs must use code when registering to receive 10% discount-**Code is MIPCA.**

Nov 4-5, 2010

[2010 Mississippi Rural Health Association Annual Conference](#)

[Mississippi Rural Health Association](#)

[Natchez, MS](#)

[601.898.3001](#)

mississippirural@bellsouth.net

NACHC NEWS

[Press Release: NACHC Report Focuses on Training and Recruitment at Community Health Centers](#)

Posted: 22 Oct 2010 10:16 AM PDT

Fri, 22 Oct 2010: Building Primary Care Workforce for Tomorrow Depends on Health Center Pioneers

S/RPCA Annual Conference

The S/RPCA Annual Conference is **November 8-10th** in St. Louis, MO. [The agenda is now available online.](#) Topics will cover the following topics: Health Insurance Exchanges, Integrated Service Models/ACOs, and Developing a Strategic Plan. Additionally, there will also be time to network among peers.

On November 8th there will be two full day pre-conference sessions. These intensive sessions will be focused on [Health Insurance Exchanges and Preparing Health Centers for Strategic Growth.](#) These sessions do require a separate registration. [You can register for the conference and pre-conference sessions here.](#)

An overflow hotel has been added, and the information is available online. For more information about the S/RPCA Annual Conference, please email Melissa Callahan at mcallahan@nachc.com.

NACHC Releases Annual CHC State Funding Report

This week the NACHC State Affairs team is releasing their annual report on State Funding for Health Centers **Reform: The Future of State Funding for Health Centers.** In addition to our annual snapshot of state funding that speak to the importance of state funding for health centers and the return on investment that they provide, year state funding for health centers dropped significantly to a five year low of \$364 million. As state budgets across the country, it's essential for us to make the case that state funding for health centers should not be cut.

We hope this report can be a helpful tool for your PCA to use in your state advocacy efforts and intend to disseminate to national organizations. In addition, NACHC will be putting out a press release and we have attached a template tailored to use in your home state, as well as a blog post that we encourage PCAs to link to.

PCA Affordable Care Act Insurance Reform Survey

As we continue our conversation from the Delivery System Reform call last, we need your response to the survey to move the planning process and further discussions. We are using these responses as part of preparation for the PCAs meeting in two weeks.

PLEASE COMPLETE THIS SURVEY BY CLOSE OF BUSINESS THIS FRIDAY, OCTOBER 29, 2010 by clicking here

Negotiated Rulemaking for MUP/HPSAs Process Begins

HRSA has held the first two meetings of the Negotiated Rulemaking (NRM) Committee which is tasked with developing a rule revising the designation methodology and criteria for Medically Underserved Populations (MUPS) and Health Professional Shortage Areas (HPSAs). As we've mentioned before, health center representatives comprise 5 of the 28 members of the committee. 5 were in attendance at the first meeting, either in-person or via teleconference. The first meeting included a discussion of the process; the establishment of the ground rules for Committee operations (including definition of the term "community health center"); the key issues and components which the Committee will explore (and for which it will seek consensus) in developing the rule; and the prioritization of the issues for future discussions. The second meeting focused on the discussion of the components of a potential methodology for identifying areas of need, shortage and underservice. The next meeting of the NRM Committee is scheduled to take place in Rockville, MD on November 17 – 18, 2010. We will continue to monitor the NRM process as it moves forward, both as participants in the NRM Committee and as announced publicly.

HRSA and BPHC Announce Realignment

In early October, the BPHC announced its realignment, which will include some changes in its organizational structure. Some of the realignment include:

- Creation of 4 regional divisions renamed "Primary Care Divisions." These divisions will include project grantees, PCAs, FQHC Lookalikes, HCCNs, Collaborative Care Networks and School Based Health Centers.
- Addition of the Office of Administrative Management and the Office of Training and Technical Assistance. These offices were formalized and consolidated to include national training and technical assistance which will include broad coordination and customer assistance.
- Office of Minority and Special Populations has been renamed the Office of Special Population Health.

For more information on this realignment, please visit the [HRSA website](#).

Funding Opportunities

HRSA Announcement: Availability of Expanded Services Funding for Existing Health Centers under the Affordable Care Act

The Affordable Care Act provides \$11 billion in funding over the next 5 years for the operation and construction of health centers throughout the Nation. Of the \$11 billion, \$9.5 billion is targeted for health center sites in medically underserved areas and expanding preventive and primary health care services at health center sites. An additional \$1.5 billion will support major construction and renovation projects at health centers nationwide.

The Health Resources and Services Administration (HRSA) is pleased to announce the availability of \$335 million and \$335 million under the Expanded Services (ES) initiative to support supplemental funding for fiscal year 2011 from existing Health Center Program grantees. Funds requested may be used to support preventive and primary health care capacity including oral health, behavioral health, pharmaceutical services, and enabling services, at existing health center sites. Health center grantees requesting ES funds for these funds will be used to expand medical capacity and services to underserved populations in medically underserved areas.

Maximum allowable funding requests are based on the patient information submitted by each Health Center Program grantee in its respective calendar year 2009 Uniform Data System report. Please see Announcement for ES guidelines and submission instructions at <http://bphc.hrsa.gov/es>. Additional technical assistance also be available at this site.

Each Health Center Program grantee should be receiving an email notification shortly through the Health Center HandBooks (EHB) that provides a link to the ES electronic submission, an eligibility code and the grantee is eligible to request. ES funding requests must be submitted electronically in EHB by January 15, 2011.

HRSA will be offering a technical assistance conference call to provide an overview of the ES funding opportunity. The presentation will be followed by a question and answer session. Please send any questions prior to the call to es@hrsa.gov.

A copy of the presentation for the conference call will be available at: <http://bphc.hrsa.gov/es>

Date: **Wednesday, November 3, 2010**

Time: **1:30-3:30 PM ET**

U.S. Conference Call Dial-in: 1-888-324-7119

International Conference Call Dial-in: 1-517-308-9460

Passcode: 2833964

Instant Replay Information (available approximately 1 hour after call ends):

Replay Dial-in: 866-388-5360; Passcode: 4231

[CVS Caremark Community Grants](#)

Application deadline: Oct 31, 2010

Grants to support children with disabilities and healthcare for the uninsured.

[Community/Ambulatory Pharmacists and Pharmacy Residents Incentive Grants](#)

Application deadline: Nov 15, 2010

Seed money to help pharmacists explore new methods and services that enhance their role as healthcare providers and encourage them to share their experiences with other pharmacists.

Affordable Care Act (ACA) Grants for School-Based Health Centers Capital (SBHCC) Program

Application deadline: Dec 1, 2010

Grants to support school-based health center efforts to expand capacity to provide primary healthcare services.

General Mills Champions for Healthy Kids Grant Program

Application deadline: Dec 15, 2010

Grants to community-based groups that develop creative ways to help youth adopt a balanced diet and physical activity.

Robert Wood Johnson Foundation New Careers in Nursing (Round 4)

Application deadline: Dec 15, 2010

A scholarship program to help alleviate the nursing shortage and increase the diversity of nursing profession.

Family Planning Services Grants

Application deadline: Applications accepted on an ongoing basis.

Grants to provide family planning services.

Research on Rural Mental Health and Drug Abuse Disorders (R01)

Application deadline: Applications accepted on an ongoing basis.

Grants to stimulate research on mental health, HIV/AIDS and/or drug abuse problems in rural and frontier communities.

Rural Emergency Responders Initiative

Application deadline: Applications accepted on an ongoing basis.

Grants to strengthen the ability of rural communities to respond to local emergencies.

HHS/HRSA/BPHC NEWS

Tabitha M. Hairston, Acting Branch Chief, DHHS/HRSA/BCRS, Division of External Affairs, Outreach and Recruitment, announced that all funded loan repayment applicants were notified by October 15, 2010. During the application cycle the Corps received more applications than they were able to fund. However, they are exploring ways to make the most of the funding available through 12/31/10 and, therefore, have not sent qualified applicants letters saying they are not funded. They are looking to accept as many clinicians into the Corps as possible. As soon as a final decision has been made, unfunded applicants will be notified.

HHS Announces the Availability of up to \$335 Million to Boost Access to Primary Health Care

Sebelius announced the availability of funding for existing community health centers across the country under the Expanded Services (ES) initiative. Expanded services supplemental funds support increased access to preventive and primary health care, including oral health, behavioral health, pharmacy, vision, and/or enabling services at existing health center sites.

HHS Announces Availability of \$335M to boost Access to Primary Health Care. This money is part of the \$9.5 billion in funding from the Affordable Care Act. This announcement is for the Expanded Services initiative that is aimed at increasing access to preventive and primary health care, including dental health, behavioral health, pharmacy, vision, and/or enabling services at existing health center sites. Grant applications are due January 6th, information is available at www.grants.gov.

New Affordable Care Act Grants to help put Patients in Control of their Health Care

OTHER NEWS

Robert Wood Johnson Foundation's Community Health Leaders

The Robert Wood Johnson Foundation (RWJF) established the Community Health Leaders program (CHL) in 2008 to recognize and support individuals who overcome daunting obstacles to improve health and health care in their communities. Recipients not only join a well-respected group of 178 advocates, but also win \$20,000 for their professional development and \$50,000 for a project at their organizations. [Click here to find out more information about the nomination process.](#)

Tech Worker Shortage Could Hinder Path to Meaningful Use

A shortage of health information technology workers could affect progress toward meeting the government's requirements in electronic medical record systems for some hospitals and physician practices.

Citing SGR Cuts, Physicians Mull Dropping Medicare Patients

Two of three medical practices surveyed-67% of respondents-say they will either limit the number of new Medicare patients they accept or stop seeing Medicare patients altogether if Congress does not halt reimbursement cuts of about 30% that take effect at the end of the year, a survey by the Medical Group Management Association shows.

CDC projects diabetes rate could triple by 2050

Up to one in three U.S. adults could have diabetes by 2050 if current trends continue, [according to a new study from the Centers for Disease Control and Prevention](#). That compares with one in 10 adults currently.

The authors attribute the projected increase to an older population and more minorities at high risk for type 2 diabetes living longer. "Successful programs to improve lifestyle choices on healthy eating and physical activity are not more widely available, because the stakes are too high and the personal toll too devastating to fail," said Annemarie M. Albers, M.D., M.P.H., CDC's Division of Diabetes Translation.

In April, CDC launched the National Diabetes Prevention Program to establish a network of lifestyle intervention programs for overweight or obese people at high risk of developing type 2 diabetes. Reducing obesity and diabetes are among the top care quality priorities recommended by the American Hospital Association [in a letter](#) this month to Health and Human Services Secretary Kathleen Sebelius.

California First to OK Insurance Exchange Outlined Under Health System Reform

Oct 18, 2010 -- American Medical News article reports that California has become the first state to create a health insurance marketplace as envisioned under the national health reform law.

ONC Releases Certified EHR Product List

Oct 12, 2010 -- Rural Health Voices article tells how the Office of the National Coordinator for Health Information Technology has released its initial list of certified electronic health record (EHR) products providers may use in coordinating care. See use eligibility

New Laws Expand Mental Health Coverage

Oct 5, 2010 -- Kaiser Health News reports that two federal laws that provide better insurance coverage for mental health and substance abuse conditions are just beginning to take effect, and advocates say the changes describe a huge win for consumers that will greatly improve treatment.

RESOURCES

We've collected information on several new reports and other resources available online that we hope you'll find useful. Descriptions and links appear below. [You can also view these resources on our website.](#)

[Health Insurance Exchanges: Key Issues for State Implementation](#) highlights several issues, including risk selection (both inside and outside of the exchanges), the rules governing carrier participation, how exchanges will interact with existing state health care programs, whether states should establish their own exchanges or defer to the federal government.

[Health Insurance Exchanges and the Affordable Care Act: Eight Difficult Issues](#) analyzes and responds to eight key issues that states and the federal government face in implementing the exchanges, including who should run the exchanges, how exchanges should avoid adverse selection, and what exchanges can do to reduce administrative costs.

[Building Enrollment Systems that Meet the Expectations of the Affordable Care Act](#) provides a framework for designing the enrollment-related provisions of the new law, and it offers lessons from other states' experiences with enrollment practices.

[Pre-Existing Condition Insurance Plans Created by the Affordable Care Act of 2010](#) examines eligibility, benefit design, cost sharing, and oversight of the pre-existing condition insurance plan programs, as well as variation of the plan designs.

[Coverage Denials for Pre-Existing Conditions in the Individual Health Insurance Market](#) reports on Congress's investigation of the extent of coverage denials and exclusions for pre-existing conditions. The investigation found that, in the three years before reform was passed, the four largest for-profit insurers denied coverage to more than 600,000 individuals because of pre-existing conditions.

conditions, and the number of coverage denials increased significantly each year.

[Young Adults and the Affordable Care Act of 2010](#) discusses the provisions that will benefit young adults, including on a parent's health plan until age 26, the Medicaid expansion, and subsidies in the exchanges. More than 12 million will gain subsidized coverage by 2014, and 7.2 million may gain coverage under Medicaid.

[Health Reform and Communities of Color: Implications for Racial and Ethnic Health Disparities](#) discusses some of the new law that will expand health coverage and that are likely to improve access to care for people of color, as well as other provisions that will likely have either a direct or indirect impact on health disparities.

[Children's Health Insurance Program Reauthorization Act: One Year Later Connecting Kids to Coverage](#) reviews the program has achieved over the past year and the steps that the federal and state governments are taking to connect eligible children and improve the quality of coverage.

[Medicaid Enrollment: December 2009 Data Snapshot](#) looks at enrollment trends from December 2001 through December 2009. Enrollment rose by 3.69 million in 2009 and has risen by 6 million since the beginning of the recession, under the financial pressure that has been placed on state budgets as more and more people lose employer coverage and Medicaid programs.

[Money Follows the Person, 2009 Annual Report](#) describes the status of the program from its creation in 2005 through 2009, including how states are progressing toward their goals. It also provides a foundation that can be used to assess the program's impact and outcomes.

[Medicaid and Long-Term Care Services and Supports](#) provides an overview of different elements of Medicaid long-term care and supports, including who pays for long-term services and supports, who qualifies for Medicaid long-term care, and what long-term care services are covered under Medicaid.

[Briefing Examines High Medicare Spending for Beneficiaries in Long-Term Care](#) discusses three recent reports on Medicare spending, medical care in long-term care facilities, and financial incentives in long-term care. The briefing also includes a discussion on the implications of the findings of the reports.

[Adding Up the Numbers: Understanding Medicare Savings in the Affordable Care Act](#) looks at how the Medicare savings achieved under the new law will significantly improve the fiscal stability of the program, and, in turn, improve the health care system overall.

[Health Insurance Coverage: Early Release of Estimates from the National Health Interview Survey, January-1](#)
rates of health insurance coverage, including private versus public coverage. Lack of health insurance is mea
whether a person was uninsured at the time of the interview, uninsured for at least part of the year, or unins
year. **You can also see these [resources on our website](#).**

Health Reform Resources-Coverage, Access and Delivery System

- Alliance for Health Reform: [Briefing Webcast- Designing a Marketplace that Works: Steps to Affordable Cove](#)
- Alliance for Health Reform: [Briefing Webcast- Getting Connected: Can the ACA Improve Access to Health C](#)
- Alliance for Health Reform: [Implementing Health Reform: Federal Rules and State Roles](#)
- Commonwealth Fund: [Realizing Health Reform's Potential: Young Adults and the Affordable Care Act of 201](#)
- Commonwealth Fund: [Accountable Care Organizations: Accountable for What, to Whom, and How?](#)
- Families USA: [Medicaid and Affordable Care Act: Reframing the Debate](#)
- Families USA: [Implementing Health Insurance Exchanges: A Guide to State Activities and Choices](#)
- Kaiser Family Foundation: [Health Reform Source- Implementation Timeline](#)

Addressing Suicide Potential and Prevention in Rural and Frontier Areas: Suicide Prevention Toolk

Care Providers

Reports that many people visit their primary care physician instead of a mental health provider for mental he
Suicide Prevention Toolkit for rural primary care providers.

Organization: WICHE Center for Rural Mental Health Research

Date: 08 / 2009

America's Health Centers

Provides information about Community Health Centers also known as Federally Qualified Health Centers (FO
access to care for millions of Americans regardless of their insurance status or ability to pay.

Organization: National Association of Community Health Centers

Date: 08 / 2010

Case Studies on Transit and Livable Communities in Rural and Small Town America

Collection of 12 case studies providing examples of how small cities, towns and rural regions across the coun
themselves into more livable communities.

Organization: Transportation for America

Date: 09 / 2010

Medicare Advantage 2011 Data Spotlight: Plan Availability and Premiums

**Overview of recent changes made to the Medicare Advantage program and trends affecting both r
populations in plan participation, premiums and certain benefits.**

Organization: Kaiser Family Foundation

Date: 10 / 2010

Mental Health Care Services in Primary Care: Tackling the Issues in the Context of Health Care Re

**Paper considers the various issues in mental health care and suggests options for reform, highlight
facilitated by the provisions of the Patient Protection and Affordable Care Act, or ACA. The princip
primary care in the delivery of mental health care services including services in rural areas and h
improved.**

Organization: Center for American Progress

Date: 10 / 2010

Mental Health Problems Have Considerable Impact on Rural Children and their Families (Policy Br

Reports that rural children are more likely to have a mental health problem and a behavioral difficulty than their urban and suburban children.

Organization: Maine Rural Health Research Center

Date: 10 / 2010

Oral Health: Preventing Cavities, Gum Disease, and Tooth Loss Success Stories

Describes successful oral health programs in Arkansas, Nevada, and Wisconsin.

Organization: Centers for Disease Control and Prevention

Date: 2010

Physician Shortages to Worsen Without Increases in Residency Training

Reports that the U.S. faces a growing shortage of physicians in all specialties and the shortfall in physicians will affect everyone, but the impact will be most severe on vulnerable and underserved communities.

Organization: Association of American Medical Colleges

Young Child Poverty in 2009: Rural Poverty Rate Jumps to Nearly 29 Percent in Second Year of Recession

Reports that nearly 5.7 million children under age six live in poverty in America. Over one million children live in rural America.

Organization: Carsey Institute

Date: 2010

Enrollment in Medicare Advantage and Other Prepaid Plans: June 2010

Collection of national and state enrollment tables and maps. Statistics also available by location: rural non-micro.

Organization: RUPRI Center for Rural Health Policy Analysis

HRSA: Health Information Technology & Quality

Provides health information technology and quality webinars and resources for HRSA grantees and other rural health providers.

Organization: Health Resources and Services Administration

HRSA: Rural Health IT Toolbox

Resource for implementing and adopting health IT systems and focuses on rural providers such as Federally Qualified Health Centers and Critical Access Hospitals.

Organization: Health Resources and Services Administration

Kaiser Health Policy Tutorials & Presentations

Multimedia presentations on health policy issues, research methodology or the workings of government. Topics cover health reform, costs and spending, delivery systems, health and government, Medicare, Medicaid, and the Affordable Care Act.

Organization: Kaiser Family Foundation

Medicare Advantage: National and State Enrollment Tables and Maps

A listing of tables and maps identifying rural enrollment in Medicare Advantage and other prepaid

Organization: RUPRI Center for Rural Health Policy Analysis

Mild Traumatic Brain Injury Pocket Guide

Quick reference resource for primary care and other TBI health care providers on the treatment of patients with mild TBI and related symptoms.

Organization: Defense and Veterans Brain Injury Center

State of Men's Health

Exists to educate Americans about the disparities that exist in men's health. Includes statistics and

Organization: Men's Health Network

Health e-Tip: Influenza Season

Do you need one flu shot or two? Can you get the flu from the flu vaccine? Flu facts may surprise you – and change your mind this year.

A Flu Shot Can't Give You the Flu

But it just might prevent you from getting it.

- Can a flu shot make me sick? There's no infectious flu virus in a flu shot, so it can't give you the flu. It takes a week to take full effect, though, so it's important to plan for a flu shot before you think you'll need it.
- One shot or two? There are no unexpected strains of flu going around as there were in 2009, so just one shot this year covers the major flu types circulating.
- Can't I just depend on last year's shot? Unfortunately not. Flu viruses are constantly changing, and flu shots from a year ago are no safeguard against the current season's influenza strains. Each year's flu vaccine is customized to be as effective as possible.

Flu shots are the **simple and safe** way to help keep you healthy through the flu season, and happier through the holidays. And for children and \$20 for adults at your county health department. [Find a flu shot near you »](#)

Find out more about [flu shots and flu prevention](#), including groups at [higher risk](#), at [HealthyMS.com](#). Also check our site to find out where to get a flu shot. Flu shots are available through many commercial and retail outlets: [locate a flu shot vendor in your area](#). *This e-Tip provided by the Department of Health*

[Unsubscribe](#) *Mississippi Primary Health Care Association distributes the MPHCA e-Update every Wednesday to inform members of information important to Community Health Centers.*

The MPHCA e-Update is the official e-bulletin of the Mississippi Primary Health Care Association. It is e-mailed weekly as a membership benefit to Community Health Center executive leadership, board members, health professionals, non-clinical staff, and other MPHCA members.

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