

## The Annual Flex Conference with the ORHP All Programs Meeting

The Federal Office of Rural Health Policy and the Rural Health Resource Center's Technical Assistance and Services Center (TASC) packed information into the first day of the All Programs Meeting in Washington, D.C. this past week on August 19, 2003.

Dr. Marcia Brand & Dr. Forrest Calico with the Office of Rural Health Policy welcomed nearly 350 participants including representatives from nearly all 50 state offices of rural health and approximately 150 hospitals.

Dr. Martin Merry, the first of three plenary speakers, gave a presentation entitled "Rural Can Lead the Way in Quality and Patient Safety" to set the pace.

Breakout sessions centered around quality/performance improvement, rural hospital quality initiatives, EMS networks, community health networks, telemedicine, access to capital, workforce, as well as an overview of the AED Program.



Jeff Stensland and Ira Moscovice presented "The Financial Impact of Critical Access Hospitals" for the second plenary session.

Maureen Swan (pictured left with Terry Hill), the final plenary speaker, discussed "Healthcare's Future" and challenged the audience to think differently about how they do business and who their customers might be.

Due to the number of participants, hand-outs went fast and a link has been created on the TASC website with access to the presentations. The website is [www.rural-resource.org/publications.shtml](http://www.rural-resource.org/publications.shtml). We hope you find this helpful and look forward to working with you in the future.

## Updates & Available Program Materials

### Welcome to New State Flex Coordinators:

**Shaundra Smith-McKeithen** (Georgia)  
**Char White** (Wisconsin)  
**Carol Bischoff** (Montana)  
**Marlene Miller** (North Dakota)  
**Bob Sunman** (Indiana)

If you have new staff, make sure to locate the Flex Coordinator Manual in your state office for information on the program, legislation, and TASC. Please include Heather with TASC in your Flex Program change of staff distribution list to help prevent new staff from delays in receiving information. We apologize for any missed names and/or states. Feel free to contact us with this information for the next issue of *OnTASC*.

### Materials Available Upon Request:

"Be a Nurse." Interactive CD-ROM with information on workforce issues (from Carol Ormay, Kentucky)  
Contact TASC for copies.

"New Board Development/Governance Tool" from Barbara Dallas of the Illinois Hospital Association

If you have rural success stories dealing with the Flex Program, please send them to Heather.

Year Three Tracking Team Reports - Contact TASC

## Proud to be Rural... Success Stories

Michael Hedrix, CEO of Pine Medical Center, Sandstone, MN, (a CAH) made a bet with his employees in hopes of cutting the billing turnaround at his hospital.

Last fall, the hospital introduced a new software system aimed at decreasing the 139 days it took on average for the hospital to get paid for a bill. Hedrix wanted a drastic improvement and challenged his employees to cut that number to below 30 days. The reward for success?

Hedrix told them he would shave the magic number in his head.

When the staff knocked the average payment period to 26 days, Hedrix knew his head was a marked target. "I was pleased to honor my bet," he says. "It is certainly for a good cause." On June 6, in front of 180 employees and a barbershop quartet, Hedrix had a "26" shaved in his head by a local barber.

-*Modern Healthcare*, July 28, 2003, pg 36



Michael Hedrix with the number "26" shaved in his head to represent Pine Medical Center's reduction in average days in account's receivable. The facility reduced their average days from 139 to 26.