N.C. Department of Health and Human Services Office of Rural Health

> 311 Ashe Avenue Raleigh, NC 27606 Phone: 919.527.6440 • Fax: 919.733.8300

https://www.ncdhhs.gov/divisions/orh

## North Carolina Office of Rural Health

2022 Profile (Data from State Fiscal Year 2022 and current as of 6/30/2022)

# **Grant Facts**

\$41.9M

Available grant funding (federal, state, philanthropic)

## **253 FTEs**

Full-time equivalent employees supported in local communities

240

Contracts to support communities

## **Direct** Services

618,070 Patients served

88%

Of ORH funding is spent directly on communities

**\$42.72** 

Average annual contribution by ORH per patient



**69%** 

Patients with well controlled diabetes, as evidenced by A1c levels < 9



**62%** 

Patients with well controlled hypertension, as evidenced by blood pressure levels < 140/90



48%

Patients screened for obesity through **Body Mass Index** (BMÍ) testing



64% Patients screened for tobacco cessation and treatment

#### Overview

In 1973, the North Carolina Office of Rural Health (ORH) became the first State Office of Rural Health in the nation. Created to focus on the needs of rural and underserved communities, ORH continues to empower communities and populations by developing strategies to improve quality and cost-effectiveness of health care for all. While ORH does not provide direct care, its programs support numerous health care safety net organizations throughout the state. Continued support and recurring funding for ORH strengthened North Carolina's health care safety net infrastructure to ensure that all of the state's medically vulnerable residents (Uninsured, Underinsured, Medicare and Medicaid) have access to affordable and appropriate high quality primary care. It is a conservative estimate that the State's primary care safety net system serves 1.1 million vulnerable residents.

#### Community Health Worker Initiative

ORH managed seven vendors, funded through other NC DHHS Divisions to employ Community Health Workers (CHWs) across the state. A CHW is a frontline public health worker who is a trusted member of and/or has a close understanding of the community served. With this program, 526 CHWs supported 100 counties with high COVID-19 caseloads, connecting 2,205,791 North Carolinians to medical and social support resources. The program expended \$36,358,909 in funds during FY 22 generating an average of \$16 contributed per person served.

## **Programs:**



#### **Rural Hospital**

Support operational improvement projects for the benefit of all critical access hospitals and eligible small rural hospitals



#### Medication **Assistance**

Provide free and lowcost medications donated by pharmaceutical manufacturers to patients who cannot afford them



#### **NC Statewide** Telepsychiatry

Support psychiatric evaluation of patients through videoconferencing in emergency departments and community settings



#### Analytics & Innovations

Support data analytics, shortage designations, and pioneering efforts to improve health



#### Placement and **HPSA Services**

Recruit providers to health professional shortage areas



#### Rural **Health Operations**

Support state designated rural health centers that serve the entire community



#### Community **Health Grants**

Support the primary care safety net system with increasing access to health care for vulnerable populations



#### NC Farmworker Health

Support medical, dental and educational services for members of the North Carolina agricultural labor force and their families



# Information Technology/ Telehealth

Health

Provide technical assistance to improve the use of Electronic Health Record (EHR) Systems and the use of the health information exchange

### Return On Investment and Economic Impact Each ORH grant

**Source: IMPLAN** 

**ORH Expenditures** \$26,402,246 Created Economic Impact \$27,071,378

**Total Impact** 

\$53,473,624

dollar has a total economic impact \$2.03





additional jobs from the economic impact



\$1,691,422 Generated in

state and local taxes which goes back into the local and state economy \$25,642,238



In employee compensation impacted from the grant



\*Economic impact is estimated to be much greater because improved health outcomes can lead to fewer missed work days, reduced health care costs, and reduced premature morbidity and mortality. Some expenses such as out of state purchases, overhead, and rollover payments are not captured for ROI and economic impact.



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Office of Rural Health

Placement Services,

\$8,545,501 (17%)

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Technical Assistance 3,987 Activities in 95 Counties **Provided by ORH Staff** 

Site **Development** 

219 Activities

Other **Activities** 

98 Activities

Contract

**Development** 

**152 Activities** 

Software

Assistance

86 Activities

2,212 Activities

Support

Recruitment

And Retention

Community **Development/** Assistance

475 Activities

Disseminate **Rural Health** Information

520 Activities

Conference/ Regional Meetings

136 Activities

Training Sessions

89 Activities

(68 Sites Covering 49 Counties)

Medication Assistance, \$2,704,743 (5%)

> **Rural Health** Centers, \$3,471,029 (7%)

**ORH Administration** \$1,252,660 (2%) **Analytics and** 

Innovations, \$2,794,116 (6%) Total

**Farmworker** 

Health,

\$5,401,943 (11%)

**Program Budget** \$50,659,055 Telepsychiatry, \$1,833,137 (4%)

> Rural Hospital Assistance, \$6,143,130, (12%)

Community Health Grants, \$17,460,6475 (35%)

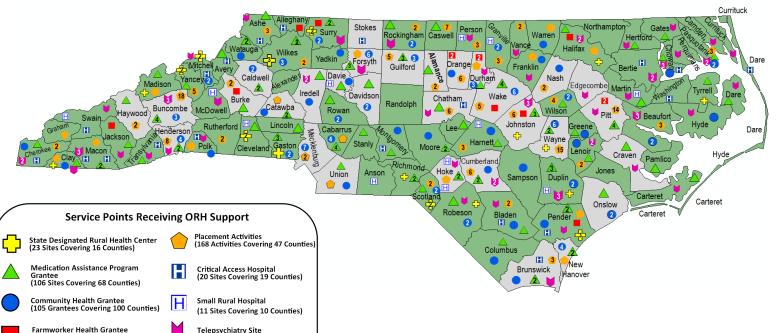
**Health Information** Technology, \$1,052,121 (2%)

**174** Agencies funded **Program Reach** 

Total counties covered

70

Rural counties covered



HEALTH AND HUMAN SERVICES

If you have further questions, please contact: Rachel Lane, Executive Assistant

Office of Rural Health Phone: 919-527-6440 Rachel.Lane@dhhs.nc.gov

Farmworker Health Grantee (14 Grantees Covering 67 Counties)

Rural County (70 Counties)

Urban County (30 Counties)

\*Numbers inside of symbols indicate number of sites, grantees, or placements, based on symbol