The Medicare Rural Hospital Flexibility (Flex) Program, Small Hospital Improvement Program (SHIP), and State Office of Rural Health (SORH) Resources
The Medicare Rural Hospital Flexibility (Flex) Program Staff

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Coordinating both the FLEX and SHIP grants while supporting Critical Access and Rural Hospitals in Quality Improvement activities and reporting.
Grant Components and Hospital Participation

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<thead>
<tr>
<th>Small Rural Hospital Improvement Program (SHIP)</th>
<th>Medicare Rural Hospital Flexibility Program (Flex)</th>
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<td>The Small Rural Hospital Improvement Grant Program (SHIP) is coordinated through the Health Resources and Services Administration's Federal Office of Rural Health Policy (FORHP). SHIP provides funding help small rural hospitals participate in various Affordable Care Act (ACA) delivery system reforms, such as value-based purchasing programs, accountable care organizations and payment bundling.</td>
<td>The Medicare Rural Hospital Flexibility Program (Flex) was established by the Balanced Budget Act (BBA) of 1997. The Flex Program created critical access hospitals (CAHs) which are limited service hospitals designed to provide essential services in rural areas.</td>
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<td>The three key focus areas of SHIP activities include the following: Value-Based Purchasing (VBP) investment activities, Accountable Care Organizations (ACO) or Shared Savings investment activities, and Prospective Payment System (PPS) or Payment Bundling (PB) investment activities.</td>
<td>The Flex Program grant provides funding to state governments or other designated entities to support CAHs in: quality improvement, quality reporting, performance improvements and benchmarking; designating facilities as CAHs; and the provision of rural emergency medical services (EMS).</td>
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**Criteria for Hospital Participation**

- Must be designated as a “small rural hospital”
- Must be Non-federal
- Short term general acute care hospital
- Can be non-profit, for-profit, and faith based.
- 49 Licensed Beds or fewer
- Hospital will choose from a SHIP Purchasing Menu what they will invest the awarded funds in to.
- Hospital must be conducting and reporting HCAHPS (funds can be invested in this process if not already implemented)
- ICD10 must be fully implemented (funds can be invested in this process if not already implemented)

**Criteria for Hospital Participation**

For FY 2016 (September 1, 2016 – August 31, 2017)

- Must be a Critical Access Hospital (CAH)
- A signed MOU to submit and share MBQIP data
- Must participate in MBQIP data reporting: Must report at least one MBQIP Core measure in at least one of the four quality domains (Patient Safety, EDTC, HCAHPS, or Outpatient).

For FY 2017, (September 1, 2017 – August 31, 2018) CAHs must meet two criteria to be eligible for FY 2017 Flex-funded activities:

1. A signed MOU to submit and share MBQIP data
2. Reported data on at least one MBQIP Core measure, for at least one quarter, in at least two of the four quality domains.
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State Office of Rural Health Programs

- Coordination of Federal Resources
- Technical Assistance
- Great Minds Universal Developmental Screening
- Rural Health Clinic Certification and Operations Guidance
- Workforce Development
- Data