



Center for Rural Health Advancement



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Our Mission

Founded in 1983, PYA is a professional services firm with specialized expertise in healthcare consulting and certified public accounting. *Accounting Today* identifies PYA as “one of the most successful firms in the country.”

Building on decades of experience, we launched the Center for Rural Health Advancement in 2021. Our mission is to help providers pursue data-driven and locally informed transformation to *preserve access* to high-quality essential services and to connect the community to the *broader care continuum*. We understand rural is not “small urban;” rural providers face unique challenges demanding customized solutions.

“PYA serves to solve our members’ most challenging problems. Over the years, they have proven to be experts in rural health, of the highest integrity, and responsive to their clients’ needs. Like our members, PYA is driven by a passion for ensuring local access to high-quality healthcare services.

Rich Rasmussen
Chief Executive Officer
Oklahoma Hospital Association



Our Approach

The PYA Center for Rural Health Advancement helps rural providers transform their operations by delivering a full range of practical, rural-specific solutions focused on the four foundations of long-term sustainability.

Community Engagement – Understanding and prioritizing community needs, aligning with community organizations, building and maintaining trust with local residents, enhancing access to affordable primary care services, maintaining a strong governance and leadership team.

Clinical Excellence – Engaging in service line planning and execution, pursuing collaborative relationships and provider alignment, securing an adequate workforce.

Financial Stability – Gaining access to needed capital, optimizing revenue cycle operations, making purposeful IT investments, positioning for value-based contracting.

Regulatory Compliance – Understanding and implementing new regulatory requirements, ensuring IT security, preparing for and responding to survey findings.

Our Experience

Over the last two decades, we have helped rural providers meet numerous challenges as they fulfill their mission to serve their communities.

Immediate Operational Improvements

1

Revenue Cycle

- Evaluate and develop detailed action plans to improve revenue cycle operations
- Assist with commercial contract evaluation, negotiations, and dispute resolution
- Take full advantage of cost-based reimbursement

2

Patient Care Revenue

- Reduce hospital services outmigration
- Optimize service lines and rural health clinic operations
- Perform provider needs assessment and develop recruitment plan
- Enhance 340B program

3

Operations

- Evaluate and execute the outsourcing of back-office operations
- Identify affordable staffing solutions and formulate workforce development plans
- Facilitate use of data for operational monitoring and improvement

4

Compliance

- Provide regulatory updates and related work plans
- Serve as dedicated compliance resource
- Conduct mock surveys and develop and execute corrective action plans

5

Information Technology

- Optimize IT investments
- Mitigate cybersecurity risks
- Analyze and address critical systems and technology controls
- Serve as dedicated IT resource





Long-Term Sustainability

1

Market Assessment

- Compile in a usable format relevant data from multiple sources to understand current market position
- Utilize assessment to identify immediate opportunities and to evaluate performance over time
- Prioritize initiatives based on community need

2

Capital

- Access infrastructure needs
- Identify and pursue new sources of capital
- Develop and execute real estate strategy

3

New Payment Models

- Identify and evaluate opportunities for participation
- Assist with quality improvement initiatives
- Develop sustainable infrastructure to manage patient populations

4

Governance

- Evaluate and make recommendations for board structure and operations
- Provide timely and relevant board education
- Facilitate retreats and planning sessions

5

Strategic Relationships

- Identify, evaluate, and pursue opportunities
- Structure arrangements to protect and promote community interests
- Optimize benefits of existing arrangements



Our Team



Some of our most experienced professionals lead the PYA Center for Rural Health Advancement. Each team member brings unique skills and experience to the table. Working together, these experts examine challenges and devise solutions from all angles.

David McMillan
PYA President



Jane Jerzak
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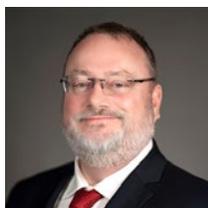
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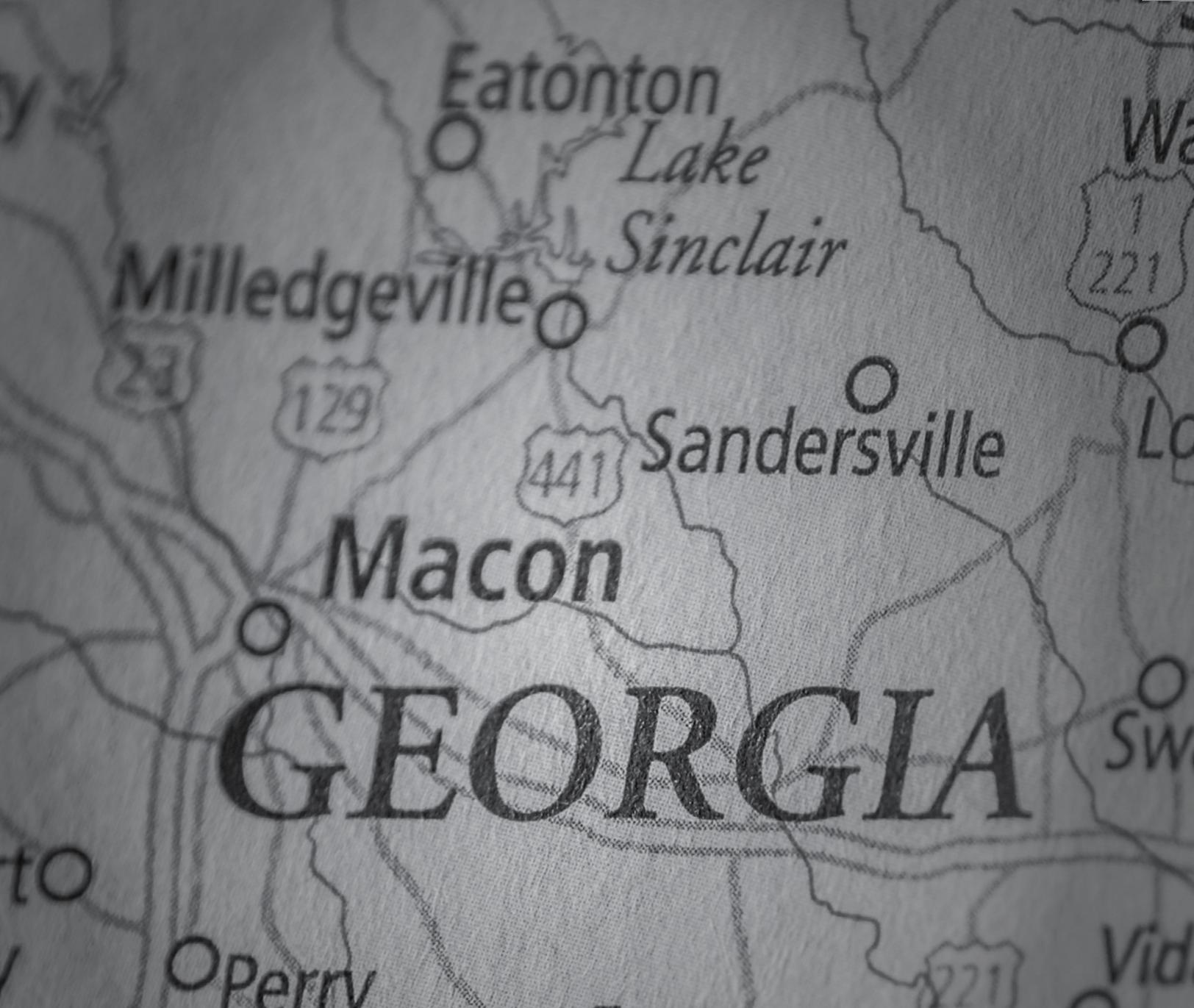


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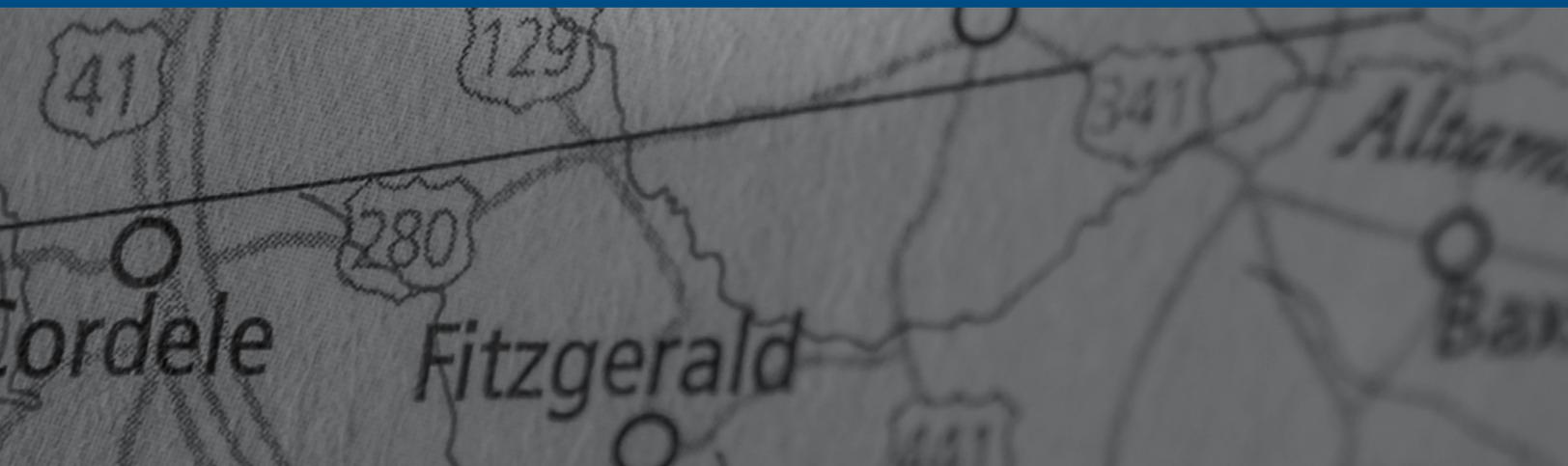
Delivering Value to Rural Communities

- We are recognized ***thought leaders*** on rural health issues. Our experts regularly present on these issues at national conferences and state hospital association meetings. Thousands of rural providers have participated in PYA webinars and relied on our white papers and articles.
- We are ***innovators and bridge builders***, having helped numerous health systems develop and implement creative rural health strategies.
- We want ***long-term relationships***, not one-and-done projects. We earn trust by pricing our work fairly, considering our clients' circumstances.
- Like rural providers, PYA remains ***fiercely independent***. We answer to our clients, not outside investors.
- We are ***radically responsive***. We answer questions immediately when possible, and always connect within 24 hours.
- We adhere to the ***highest ethical standards*** of the American Institute of Certified Public Accountants.



Case Study

Immediate Operational Improvements



Coffee Regional Medical Center

PYA was selected through a competitive process to provide short- and long-term strategic and operational improvement plans for Coffee Regional Medical Center (CRMC), an 88-bed hospital in rural Georgia, that experienced significant operating losses for the prior two years.

First, PYA “pressure tested” CRMC’s then-current strategic plan and made specific recommendations in five areas: growth (reducing outmigration and expanding specific service lines), service-mix profitability, post-acute care, value-based opportunities, and affiliations/network development.

Second, PYA performed an operational assessment across seven workstreams: **(1)** labor and employee benefits, **(2)** cost management, **(3)** revenue cycle, **(4)** payer contracting, **(5)** physician practice, **(6)** pharmacy (including 340B), and **(7)** information technology.

We provided nearly 50 recommendations across all workstreams and partnered with CRMC’s finance team to forecast the financial impact of those recommendations over five years. In addition, PYA delivered detailed tactical plans for the revenue cycle and physician practice workstreams.

For each of the seven workstreams, a PYA and CRMC expert were paired to drive detailed reviews and recommendations. PYA produced all deliverables within six months in compliance with the project timeline. With PYA’s continued engagement, CRMC has implemented several of PYA’s recommendations, achieving improved financial performance. Additionally, PYA has provided ongoing IT Overwatch services and interim leadership for CRMC’s physician practices.

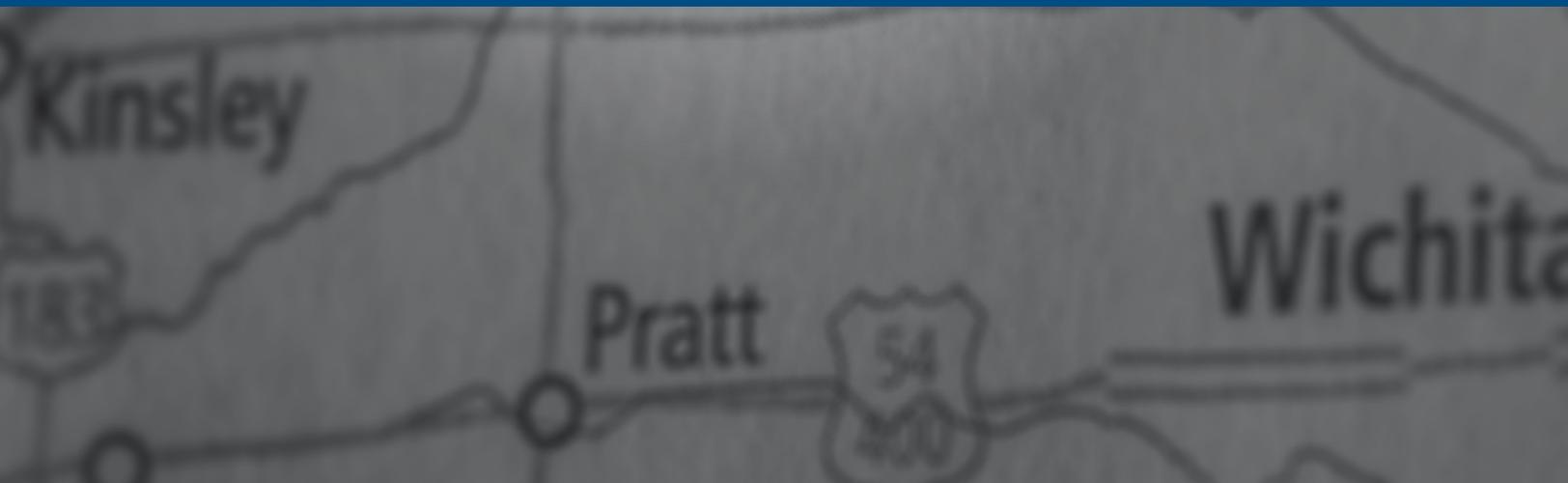
 *PYA brought value to our health system by providing both strategic and operational recommendations yielding immediate results and setting the course for our future. PYA’s team of experienced professionals in the areas of strategy, physician practices, hospital operations, and payer relations was extremely beneficial for this engagement. The PYA project was organized and met our timelines with minimal disruption with our leadership team. They understood the unique qualities of a rural provider and were a great partner in the overall engagement.*

Vicki Lewis
CRMC President and CEO



Case Study

Long-Term Sustainability



University of Kansas Health Care Collaborative

In 2014, the University of Kansas Health System (UKHS) received a four-year \$12.5 million Center for Medicare & Medicaid Innovation (CMMI) Health Care Innovation Award to establish a rural clinically integrated network. PYA developed this concept and prepared the application on UKHS's behalf.

The network, now known as the University of Kansas Health Care Collaborative, brings the power of academic medicine to 76 participating providers across 69 Kansas counties. For more than seven years, PYA has served as UKHS's partner in expanding and enhancing the network's operations. Today, the network's core operations include the following:

Supporting providers' adoption and implementation of evidence-based guidelines for time-critical diagnoses, chronic conditions, preventive care, and substance use disorder. The network has trained more than 3,000 providers at local "boot camps" held in every participating community. During COVID-19, the network has furnished protocols, workflows, best practices, and sponsored weekly provider calls.

Evaluating providers' compliance with those guidelines and assisting with related performance improvement initiatives. Network staff have reviewed more than 18,000 cases involving time-critical diagnoses, and worked directly with providers to address identified issues. By way of example, the network updated its sepsis protocols in 2018 to comply with the Surviving Sepsis Campaign's hour-1 bundle, representing the most current evidence-based practice. In a single year, network participants improved their compliance with the hour-1 bundle from 24% to 65%. As a result, network participants improved their sepsis mortality rate from nearly 10% in 2016, to just over 2.5% in 2019.



Making ambulatory care management, resiliency training, and remote physiologic monitoring services available to individuals with chronic conditions residing in rural Kansas. The network's health coaches have provided more than 62,000 chronic care management services for Medicare beneficiaries. A recent Medicare claims data analysis performed by PYA showed beneficiaries receiving care management experienced a 22% year-over-year reduction in total cost of care, while a similar group of beneficiaries not receiving these services experienced a 12% increase.

Supporting participants in the transition from volume-based to value-based payment including successful participation in the Medicare Shared Savings Program (MSSP) and Direct Contracting Model. More than 30,000 rural Medicare beneficiaries are attributed to the network under these programs. The network has improved quality scores each year and earned shared savings in two of the four years it has participated in the MSSP.

Making available opportunities to participate in clinical research, including treatment for cancer and Alzheimer's disease, to rural communities.

Enhancing the rural continuum of care, including improved access to specialty care through telehealth services and coordination of ambulance transports.

“ *The challenges rural providers face are not theoretical or on the horizon. They are real, they are here now, and patients are struggling. Since we are headquartered in Tennessee—the state leading the nation in rural hospital closures per capita—we see it first-hand, and we are fully committed to helping providers find solutions.*

Marty Brown
PYA CEO



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For more information, please call 865-673-0844

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THE GLOBAL ADVISORY AND ACCOUNTING NETWORK