PROBLEM STATEMENT

The healthcare industry has transformed into a highly complex, constantly changing industry.

Individual rural health systems struggle to recruit the talent, support and infrastructure needed to thrive in this environment.

Without innovation, advocacy, collaboration, and flexibility, rural hospitals face significant threats to their ability to meet changing community needs.

Purpose & Mission

Why Do We Exist?

To support collaborative members to better serve their communities.

To overcome the challenges of rural healthcare.

To take advantage of the opportunities that a collective provides.

To speak with one rural voice.

What Do We Do?

We defend, create and design the future of rural health care through collective strategy and action.
They say that people rise out of the challenge of adversity stronger than ever. I believe that is exactly what the Rural Collaborative did, even though it may be difficult to see through the pain and tears of the last 15 months.

The pandemic hit the US in a way that few could have anticipated. Of course, it hit Washington first. Lucky us, right? But in the midst of those early days when it would have been easy to panic, the Rural Collaborative chose to take action. We immediately established a COVID-response group for our CFOs and CEOs, and we partnered with WSHA to acquire and distribute personal protective equipment to our member hospitals.

Of course, the pandemic was not the only focus of 2020. The chronic health issues that already existed in rural Washington did not go away just because we were dealing with a pandemic. They were still there, and in many ways, the pandemic has only exacerbated them. So, we reset our strategic plan with a focus on creativity, clinical quality improvement and financial resiliency; and in classic 2020 style, we did so both physically distanced and masked up at a Board retreat held at two separate locations.

With this plan in hand, seven Collaborative members joined the NW Momentum Health Partners ACO. Through the recruiting efforts of our Executive Director, we engaged three new members and are now 21 strong, serving a population of 480,000 in the most far-reaching rural corners of Washington state.

As rural warriors, we are no strangers to rolling up our sleeves and doing the hard work. This year pushed us to the extremes, but through our creativity, nimbleness, and resilience, we pulled through TOGETHER. As we look to 2021, I hope you will all take a moment to reflect on the strength of our members and our partnerships. Whatever challenges are to come… we got this.

Julie Petersen

2020... WHAT A YEAR, RIGHT?!

2020 MEMBER HOSPITALS • 2021 NEW MEMBERS

21 MEMBERS • 21 COUNTIES
480,000 LIVES

2020 BOARD OF DIRECTORS

Julie Petersen, CEO & Chair | Kittitas Valley Healthcare
Josh Martin, CEO & Vice Chair | Summit Pacific Medical Center
Tom Wilbur, CEO & Secretary/Treasurer | Newport Hospital & Health Services
Eric Moll, CEO & Past Chair | Mason General Hospital & Family of Clinics
Dr. Kim Witkop, Interim CEO | Snoqualmie Valley Hospital
Robb Kimmes, CEO | Skyline Health
Leslie Hiebert, CEO | Klickitat Valley Health
Heidi Anderson, CEO | Forks Community Hospital
Hilary Whittington, CAO | Jefferson Healthcare
Tyson Lacy, CEO | Jefferson Hospital and North Basin Clinics
Leanne Everett, CEO | Arbor Health, Morton Hospital
Larry Cohen, CEO | Ocean Beach Hospital
Ron Telles, CEO | Whidbey-Health Medical Center
Matthew Kempton, CEO | Willapa Harbor Hospital
Craig Marks, CEO | Prosser Memorial Health
Responding to COVID

“COVID presented our organization and our teams the opportunity to test all of the education, preparation and training we had done up until that point. This was the ‘make-it-or-break-it-moment’. And we ‘made it’. It was a true test of our grit and resiliency. We emerged a much different organization. A better one. A stronger one.”

JENNIFER CAPPS | CHIEF DEVELOPMENT & COMMUNICATION OFFICER AT MASON HEALTH

“2020 was a difficult year. It was all so unknown. Looking back over the year, I feel like I have grown. Our organization has grown. I feel like I have more confidence in myself and our organization, and the difficult times we can get through.”

KATELIN FORREST | HUMAN RESOURCES GENERALIST AT ARBOR HEALTH

“I am so impressed by WhidbeyHealth’s focus on safety and administering the vaccine for our community.”

SHANNA HARNEY-BATES | MANAGER OF PATIENT SAFETY & RISK MITIGATION AT WHIDBEYHEALTH

“Unlike my urban counterparts, I don’t have as many colleagues around to talk to in a rural setting. The Collaborative offers an opportunity to know that I am part of something bigger.”

DR. KEN DIETRICH | CMO AT SUMMIT PACIFIC MEDICAL CENTER

“RURAL MEMBERS ROSE TO THE CHALLENGE...”
TOTAL PATIENTS SERVED IN 2020
493,219

TOTAL COMBINED POPULATION SIZE OF ALL MEMBER HOSPITAL DISTRICTS IN 2020
438,756

TOTAL OUTPATIENT VISITS 1,826,780

- PRIMARY CARE CLINIC VISITS: 608,462
- SPECIALTY CLINIC VISITS: 268,247
- TELEHEALTH VISITS: 55,456
- EMERGENCY DEPARTMENT VISITS: 170,689
- PHYSICAL THERAPY VISITS: 115,442
- BEHAVIORAL HEALTH VISITS: 20,012
- COVID-19 OUTPATIENT SERVICES: 12,100
- DENTAL: 1,359
- ONCOLOGY OUTPATIENT SERVICES: 36,112

143,675 COVID-19 TESTS
3,038 BABIES DELIVERED

CHARITY CARE
$29,663,856
GRANT DOLLARS RECEIVED
$24,676,330

FORKS COMMUNITY HOSPITAL WAS AWARDED THE CORNERSTONE AWARD BY FORKS CHAMBER OF COMMERCE.
Defining the Future of Rural Healthcare

JOYCE BODEAU | CORPORATE COMPLIANCE OFFICER AT COULEE MEDICAL CENTER

"COVID forced us all to focus inward and become even more isolated than we already were in rural healthcare. The Collaborative gave us network to plug into and have critical conversations with our peers about how to fight the pandemic."

JENNIFER LARMER | CHIEF CLINICAL OFFICER AT LINCOLN HOSPITAL & NORTH BASIN MEDICAL CLINICS

"The Collaborative is an excellent resource for leadership positions. It allows us to network and learn what works well. It is extremely helpful to hear what others are doing. We don't have to reinvent the wheel."

CHRISTINA WAGAR | DIRECTOR OF OPERATIONS AT NEWPORT HOSPITAL & HEALTH SERVICES

"It is wonderful to be a part of a group of like-minded facilities. They understand what we are going through as a rural community and as an independent organization...I feel so supported. We may be rural, but we are not alone!"

"OCEAN BEACH found a new way to hold their 2020 Health Festival"
Savings Categories, Explained

Compliance Hotline
The Collaborative provides a dedicated reporting hotline and compliance case management software free of charge to any members that wish to use the service.

Data Analytics
The Collaborative utilizes a shared data repository to evaluate potential savings on purchased services across the membership. Members can also use this service to evaluate individual hospital spending.

GPO Affiliation
Members benefitted from increased GPO sharebacks.

Grant
The Collaborative participated in various state and federal grants on the members’ behalf. This combined approach resulted in savings and benefits for all members.

Insurance
Members are charged reduced premiums and earn larger dividends from pooling their medical malpractice, group property and cyber risk insurance.

Legal Consultation
Members work together and save time in their legal review, as well as paying a reduced rate for Collaborative-wide legal services.

PACS
Members benefit from ongoing support, licensing and maintenance of PACS and RIS systems.

Pharmacy 340B Program
Vendors audit member 340B Programs to ensure compliance with current standards.

Recruitment
The provision of internal and external temporary staff is managed through third-party agencies and suppliers.

Reference Lab
Hospitals receive volume discounts on clinic lab services through leveraging Collaborative-wide test volumes.

Retirement
Hospital employees pay reduced fees on their retirement accounts through joining the Collaborative retirement plan pool.

Transitional Care Consulting
Vendors partner with hospitals to develop new swing bed and transitional care programs.

Price Transparency & Revenue Cycle Management
Members realized savings on revenue integrity services, including billing and coding consultation. Vendors captured in this category also specialize in the creation of required price transparency tools on their patient-facing websites.

TOTAL SAVINGS FOR ALL COLLABORATIVE MEMBERS WERE $2,428,842. THIS IS AN INCREASE OF $814,435, OR 50.4% OVER 2019 NUMBERS.
Webster should swap out the dictionary definition of crisis with “see 2020”. Interestingly, the 15th century definition of crisis (root krei) is a vitally important or decisive state of things; a point at which change must come.

In my opinion, nothing could be truer. 2020 took the Collaborative to the next level. We grew our revenue. We grew our portfolio. We grew our membership. We grew closer. It was in this time of uncertainty that we embraced a culture of mutual respect and trust. It was in this time of great sadness over impacts to our lives, our families and our communities, that we reached out to help one another. And through it all, even though we were short staffed and isolated from each other, we managed to bring the Joy.

Oh and in our free time we moved our office from McCleary to Olympia, rebranded and changed our name to the Rural Collaborative. We were up for it! Nope, the pandemic did not slow us down one bit. We stared into the face of Crisis and said “SIX FEET BACK!”

With tremendous appreciation for all of our members, their boards, their employees and their employees’ families,

ELYA PRYSTOWSKY
EXECUTIVE DIRECTOR

Prior to joining the Rural Collaborative in June 2019 Dr. Prystowsky launched two accountable communities of health, one in the Olympic region and another in the North Sound region of Washington. Dr. Prystowsky holds a PhD in epidemiology from the University of Washington and an MS in population health from Harvard University. Dr. Prystowsky is a fierce advocate for rural health, women’s health and the use of data to drive decisions.

PAUL KENNELLY
SENIOR DIRECTOR

Paul Kennelly joined the organization in 2018. He oversees the organization’s Health Plan and Purchased Service contracting efforts. Paul has over 30 years of experience in healthcare in the areas of clinic operations, revenue cycle, contracting and strategic planning. He holds a Bachelor’s degree in Economics and a Master in Healthcare Administration both from the California State University, Long Beach.

MAGGIE MOORE
FINANCIAL & BUSINESS ANALYST

Maggie brings to the team a degree in Business Administration with an Accounting focus from the University of Washington. She has experience in public health at a local health jurisdiction and with the accountable community of health in the Olympic region. Maggie is a staunch advocate for the health and wellbeing of rural populations.

HEATHER MULLER
ADMINISTRATIVE COORDINATOR

Heather Muller is a Florida native who came to Washington six years ago. She is a graduate of Florida State University and her happy place is on the Gulf of Mexico. Heather brings extensive administrative experience to the team, including many years in the legal field. She is passionate about helping those in need and breaking down barriers to help the underdog.

KAROL DIXON
CONTRACTS SERVICES DIRECTOR

Karlo Dixon recently joined the team as the Contracts Services Director. She has worked with and for tribes throughout the Pacific Northwest and Alaska, and brings a broad background of healthcare administration, Medicaid policy and health care improvement experience. Karol has a B.A. in Economics from the University of Alaska Anchorage, a Juris Doctor from the University of New Mexico School of Law, and a Master of Public Health from Johns Hopkins University. She also achieved Improvement Advisor status from the Institute for Healthcare Improvement.

In September 2020 we divided up our 15 Board members into two teams in order to adhere to the Governor’s COVID Safe Start guidelines:

Team Rodeo in Ellensburg at Kittitas Valley Healthcare
Team White Water in Elma at Summit Pacific Medical Center

We agreed on three strategic goals.

1. Offer products and services which enable members to achieve and sustain Quadruple AIM goals.
2. The Collaborative is financially sustainable. Collaborative members benefit financially due to Collaborative services and offerings.
3. As the foundation for the defense and promotion of rural healthcare, begin the development and execution of a multi-year plan providing a springboard to a broader, more formal rural health network.

In my opinion, nothing could be truer. 2020 took the Collaborative to the next level.

We grew our revenue. We grew our portfolio. We grew our membership. We grew closer. It was in this time of uncertainty that we embraced a culture of mutual respect and trust. It was in this time of great sadness over impacts to our lives, our families and our communities, that we reached out to help one another. And through it all, even though we were short staffed and isolated from each other, we managed to bring the Joy.

Oh and in our free time we moved our office from McCleary to Olympia, rebranded and changed our name to the Rural Collaborative. We were up for it! Nope, the pandemic did not slow us down one bit. We stared into the face of Crisis and said “SIX FEET BACK!”

With tremendous appreciation for all of our members, their boards, their employees and their employees’ families,