

# NATIONAL RURAL HEALTH ASSOCIATION



## WHO WE ARE

The National Rural Health Association (NRHA) is a non-profit membership organization with more than 21,000 members nationwide that provides leadership on rural health issues. Our membership includes nearly every component of rural America's health care, including rural community hospitals, critical access hospitals, clinics, long-term care, providers, and patients.

## WHAT WE DO

NRHA serves rural communities by advancing rural health issues and seeking to solve rural health care challenges. NRHA helps rural citizens build, maintain, and improve the institutions to meet their health care needs by providing research, education, communication, and advocacy support.

## INVESTING IN A STRONG SAFETY NET

Since 2010, nearly 150 rural hospitals have shuttered their doors, including dozens since the onset of COVID-19. Over 40% of rural hospitals are operating with negative margins and therefore vulnerable to closure.

## CREATING A ROBUST RURAL HEALTH WORKFORCE

Maintaining an adequate supply of primary care providers remains one of the key challenges in rural health care. Nearly 70% of rural counties are Health Professional Shortage Areas.

## ADDRESSING RURAL HEALTH EQUITY

Medical deserts are appearing across rural America leaving many without timely access to care. Addressing rural inequities and declining life expectancy rates are a top priority for NRHA in 2023.



### RURAL HEALTH EQUITY

Ensuring rural residents have the same opportunities to access care as urban and suburban counterparts.



### WORKFORCE

Assisting rural communities by testing new models of team-based care, reforming rural Graduate Medical Education (GME), and supporting workforce programs.



### HOSPITAL CLOSURE CRISIS

Testing new payments models of care, while providing stabilizing relief for rural providers across the safety net.



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# Investing in a Strong Rural Safety Net

Since 2010, nearly 155 rural hospitals have shuttered their doors, including dozens since the onset of COVID-19. Over 40% of rural hospitals are operating with negative margins and therefore vulnerable to closure. While federal pandemic relief eased closure rates, it didn't address key factors impacting rural hospital viability. When a rural hospital closes, not only does the community lose access to vital health care, but a major employer and community lynchpin ends, affecting the larger community. Investing in a strong rural health infrastructure is critical to the future of rural areas.

## → Save America's Rural Hospitals Act (H.R. 833)

**Representatives Graves (R-MO) and Huffman (D-CA)**

Works to support critical rural providers by:

- Ending Medicare sequestration permanently
- Making permanent Low-Volume Hospital and Medicare-Dependent Hospital designations
- Reversing cuts to reimbursement of bad debt
- Making permanent increased Medicare payments for ground ambulance services
- Providing a fix to provider-based rural health clinics cost-based reimbursement
- Eliminating the 96-hour Physician Certification Requirement for CAHs
- Reauthorizing the Medicare Rural Hospital Flexibility Program

## → RHC Burden Reduction Act (S. 198/H.R. 3730)

**Senators Barrasso (R-WY) & Bennet (D-CO) & Reps. Smith (R-NE) & Blumenauer (D-OR)**

Modernizes the Rural Health Clinic (RHC) program and provides important regulatory relief for RHCs including relief from outdated staffing, laboratory requirements, and definitional requirements related to census definition and primary care thresholds.

## → Rural Hospital Support Act of 2023 (S. 1110)

**Senators Casey (D-PA) and Grassley (R-IA)**

Makes permanent payment designations for Medicare-Dependent Hospitals and Low-Volume Hospitals. Indexes payment adjustments for Sole Community Hospitals and Medicare-Dependent Hospitals to FY2016 operating costs.

## → Rural Hospital Closure Relief Act (S. 1571)

**Senators Durbin (D-IL) and Lankford (R-OK)**

Updates the Critical Access Hospital eligibility requirements so more rural hospitals can qualify for the financial lifeline.

## → PROTECT 340B Act of 2023 (H.R. 2534)

**Representatives Spanberger (D-VA) and Johnson (R-SD)**

Prohibits health insurers and PBMs from discriminating against 340B Drug Pricing Program participating providers and contract pharmacies.



# Building a Robust Rural Healthcare Workforce

The COVID-19 pandemic exacerbated the workforce shortage in rural America. Rural residents in many parts of the United States have faced chronic and sometimes severe shortages of primary care providers for decades. Maintaining an adequate supply of primary care providers has been, and remains, one of the key challenges in rural health care. Nearly 70% of rural, or partially rural, counties are Health Professional Shortage Areas, and close to one in ten counties have no physicians at all. With far fewer providers per capita, the maldistribution of health care professionals between rural and urban areas results in unequal access to care.

## → Rural Physician Workforce Production Act of 2023 (S. 230/H.R. 834)

**Senators Tester (D-MT), Barrasso (R-WY), Reps. Harshbarger (R-TN), and Cuellar (D-TX)**

Allows rural hospitals, Critical Access Hospitals, Sole Community Hospitals, and Rural Emergency Hospitals to receive payment for time by spent by a resident in a rural training location. The bill ensures rural providers are adequately represented in the Medicare Graduate Medical Education (GME) program.

## → Improving Care and Access to Nurses Act (S. 2418/H.R. 2713)

**Senators Merkley (D-OR), Lummis (R-WY), Reps. Joyce (R-OH) and Bonamici (D-OR)**

Allows Advanced Practice Registered Nurses (APRNs) to practice at the top of their license and broaden the scope of services to meet the needs of rural patients.

## → Rural America Health Corps Act (S. 940/H.R. 1711)

**Senators Blackburn (R-TN) and Durbin (D-IL) and Reps. Kustoff (R-TN) and Budzinski (D-IL)**

Establishes a student loan repayment program for eligible providers who agree to work for five years in a rural area with a shortage of primary, dental, or mental health care providers.

## → Doctors of Community (DOC) Act (H.R. 2569)

**Representatives Pallone (D-NJ), Vasquez (D-NM) and Ruiz (D-CA)**

Permanently authorizes the Teaching Health Center Graduate Medical Education (THCGME) program to support training of primary care and dental residents in rural and underserved communities.

## → Midwives for MOMS Act (S. 1851)

**Senators Lujan (D-NM) and Collins (R-ME)**

Establishes grants for establishing midwifery programs, with special consideration for underrepresented groups or areas with limited access.





# Addressing Rural Health Equity

Rural populations often encounter barriers that limit their ability to obtain the care they need. COVID-19 devastated the financial viability of rural practices, disrupted rural economies, and eroded availability of care. Medical deserts are appearing across rural America leaving many without timely access to care. Addressing rural inequities and declining life expectancy rates are a top priority for NRHA in 2023. The federal investment in rural health programs is a small portion of federal health care spending, but is critical to rural Americans. These safety net programs expand access to health care, improve health outcomes, and increase the quality and efficiency of health care delivery in rural America.

## → Protecting Access to Ground Ambulance Medical Services Act (S. 1673/H.R. 1666)

**Senators Cortez Masto (D-NV), Collins (R-ME), Reps. Wenstrup (R-OH), Sewell (D-AL)**

Extend temporary additional reimbursement for ground ambulance services until the Medicare ambulance fee schedule is reformed.

## → CONNECT for Health Act (S. 2016)

**Senators Schatz (D-HI) and Wicker (R-MS)**

Expand coverage of telehealth services through Medicare and making permanent COVID-19 telehealth flexibilities.

## → CDC Office of Rural Health (S. 2799)

**Senators Hyde-Smith (R-MS) and Merkley (D-OR)**

Authorizes the Office of Rural Health at the Centers for Disease Control and Prevention to enhance the agency's rural health portfolio and coordinate rural public health efforts across CDC programs.

## → Better Mental Health Care for Americans Act (S. 923)

**Senators Bennet (D-CO) and Wyden (D-OR)**

Reforms and improves mental health and substance use care under the Medicare and Medicaid programs to ensure full parity and integration of these services.

## → Rural Health Innovation Act of 2023 (H.R. 1712)

**Representatives Kustoff (R-TN) and Kuster (D-NH)**

Establishes two new grant programs to increase access to emergency care in rural areas through Rural Health Clinics, community health centers, and local health departments.

## → Healthy Moms and Babies Act (S. 948)

**Senators Grassley (R-IA) and Hassan (D-NH)**

Improves maternal health coverage under Medicaid and CHIP, modernizes telehealth, coordinates care, and addresses social determinants of health.

