



## National Rural Health Association

The Honorable Bernard Sanders  
Chairman  
Senate Committee on Health, Education,  
Labor, and Pensions  
332 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Roger Marshall  
Ranking Member  
Subcommittee on Primary Health and  
Retirement Security  
Senate Committee on Health, Education,  
Labor, and Pensions  
479A Russell Senate Office Building  
Washington, DC 20510

Dear Chairman Sanders and Ranking Member Marshall:

The National Rural Health Association commends Chairman Sanders and Ranking Member Marshall for their efforts to augment the primary care workforce and improve health outcomes for rural populations through the *Bipartisan Primary Care and Health Workforce Act*. The U.S. is grappling with historic workforce shortages, and none are more affected than rural communities. Rural America is home to 60 million people, accounting for 20% of the nation's population; however, provider to population ratios in rural areas are much lower than urban areas despite disproportionate needs for care.

NRHA is a non-profit membership organization with more than 21,000 members nationwide that provides leadership on rural health issues. Our membership includes every component of rural America's health care, including rural community hospitals, critical access hospitals, doctors, nurses, and patients. We provide leadership on rural health issues through advocacy, communications, education, and research.

NRHA thanks Chairman Sanders, Ranking Member Marshall, and the members of the Health, Education, Labor, and Pensions (HELP) Committee for their bipartisan efforts to bolster primary care and strengthen workforce pipelines. The *Bipartisan Primary Care and Health Workforce Act* makes critical investments in rural physician training through the authorization of the Rural Residency Planning and Development Program (RRPD) (Section 201). The current RRPD pilot program has supported the development of new rural residency programs in rural America, successfully starting 39 new accredited programs and creating 515 new residency positions since 2018. It is essential that this very successful program is formally authorized in order to support rural residency capacity.

Title I of the legislation further strengthens the rural workforce through reauthorizing and increasing mandatory funding for Community Health Centers, the National Health Service Corps, and the Teaching Health Center Graduate Medical Education Program. These programs are vital to building the health care workforce in rural communities. NRHA also applauds significant investments in new workforce programs, including growing the allied health workforce through a grant program for rural health clinics that encourages community-driven training and pipeline solutions.

NRHA continues to closely monitor impacts of policies related to provider-based site-neutral payment and other decreases in rural provider reimbursement. Since 2010, [over 150 rural hospitals](#) have closed in communities across the country, impacting rural access to care. While addressing cost of care for rural residents is critical, it is essential that key safety-net provider viability is not inadvertently impacted.

### **RuralHealth.US**

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NRHA looks forward to working with Chairman Sanders, Ranking Member Marshall, and the Senate HELP Committee as they continue their work on this bipartisan workforce package that seeks to expand access to primary care and grow the rural workforce. As rural America continues to grapple with a workforce shortage crisis, we urge Congress to consider the specific needs of rural communities.

We thank the Chairman and Ranking Member for being stalwart champions for rural America. If you have any questions, please do not hesitate to contact Alexa McKinley ([amckinley@ruralhealth.us](mailto:amckinley@ruralhealth.us)).

Sincerely,

A handwritten signature in black ink, appearing to read "Alan Morgan".

Alan Morgan  
Chief Executive Officer  
National Rural Health Association