

February 13, 2023

Carole Johnson Administrator Health Resources and Services Administration Department of Health and Human Services 5600 Fishers Lane Rockville, MD 20857

Dear Administrator Johnson,

The National Rural Health Association is writing regarding rural emergency hospital (REH) eligiblity for the National Health Service Corps (NHSC) program. NHSC is a valuable program for rural providers and patients as it expands access to care in high-need areas, like rural communities.

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.

We appreciate HRSA's continued commitment to the needs of the more than 60 million Americans that reside in rural areas, and we look forward to our continued collaboration to improve health care access throughout rural America.

NRHA asks HRSA to add REHs as NHSC-eligible sites. REHs are one option for financially vulnerable rural hospitals to remain open and retain a point of access to primary and emergency care for rural communities. The Consolidated Appropriations Act of 2021 created the REH model and the Centers for Medicare and Medicaid Services (CMS) recently finalized conditions of participation and payment policies for REHs. Hospitals eligible to convert to an REH are critical access hospitals (CAHs) and small rural hospitals with less than 50 beds. Hospitals are now able to begin converting to an REH as of January1, 2023, thus it is imperative to ensure that REH eligibility for certain programs is established quickly to minimize uncertainty for hospitals that convert.

**NRHA** believes that the nature of the REH model and services align with the purpose and goals of the NHSC. REHs fit within the current list of eligible sites as most hospitals that convert to an REH will be CAHs which are allowable NHSC entities.¹ Additionally, REHs are prohibited by statute from providing inpatient services and may only furnish emergency department and outpatient services. Current eligible site guidelines prohibit all inpatient hospitals (except CAHs and Indian Health Service hospitals) and other inpatient facilities from participating in the NHSC. REHs would not

<sup>&</sup>lt;sup>1</sup> George H. Pink, et al., *How Many Hospitals Might Convert to a Rural Emergency Hospital (REH)?*, North Carolina Rural Health Research Program, University of North Carolina Chapel Hill (July 2021) <a href="https://www.shepscenter.unc.edu/download/23091/">https://www.shepscenter.unc.edu/download/23091/</a>.



change the composition of the program as they are not inpatient providers and are focused on keeping access to primary care services in the local community.

NRHA thanks HRSA for its continued support of rural communities across America. We look forward to working towards our mutual goal of improving quality and access to care. If you would like additional information, please contact Alexa McKinley at <a href="mailto:amckinley@ruralhealth.us">amckinley@ruralhealth.us</a>.

Sincerely,

Alan Morgan

**Chief Executive Officer** 

National Rural Health Association

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