



July 10, 2023

The Honorable Bernard Sanders
Chair
Committee on Health, Education, Labor, and
Pensions
United States Senate
Washington, DC, 20510

The Honorable Bill Cassidy, M.D.
Ranking Member
Committee on Health, Education, Labor, and
Pensions
United States Senate
Washington, DC, 20510

RE: Committee on Health, Education, Labor and Pensions Request for Comment on the Pandemics and All Hazards Preparedness Act Discussion Draft

Dear Senator Sanders and Senator Cassidy,

The National Rural Health Association (NRHA) is pleased to offer comments on the Health, Education, Labor, and Pensions Committee request for comment on the Pandemics and All Hazards Preparedness Act (PAHPA) discussion draft. NRHA applauds the work Senators Sanders, Casey, Cassidy, and Romney are doing to protect our nation, including the 60 million Americans that reside in rural areas, from future disasters and public health emergencies (PHE).

NRHA is a national nonprofit membership organization with more than 21,000 members, and the association's mission is to improve the health of rural Americans and provide leadership on rural health issues through advocacy, communications, education, and research. NRHA membership consists of a diverse collection of individuals and organizations, all of whom share the common goal of protecting rural health.

NRHA urges greater rural representation in the finalized package for the Pandemics and All Hazards Preparedness Act (PAHPA). Rural America accounts for 20 percent of the United States population. While infection rates for COVID are similar in rural and urban areas, rural residents were 38% more likely to experience COVID-related deaths.¹ Rural communities experienced worse health outcomes during the pandemic due to a misdistribution of providers and resources, worse health outcomes, and underdeveloped public health channels. It is critical that the final PAHPA package includes rural specific language to decrease geographic disparities.

As part of Sec. 104, Pilot Program to Support State Medical Stockpiles, Congress should include language to strengthen and/or prioritize support to rural areas. Small rural facilities reported more difficulties accessing our strategic stockpiles during the pandemic due to a scarcity of funds and limited technical assistance. According to the Centers for Disease and Control, rural residents had fewer opportunities to access vaccines than their urban and suburban counterparts, especially early into the pandemic. To expand regional support, greater coordination is needed between state public health departments, health officials and rural health entities.

Further, the full-scale impact of COVID-19 on rural areas is still largely unknown due to the lack of geographically stratified data. Prior to the passage of the Consolidated Appropriations Act of 2023, rural

¹ <https://www.cdc.gov/mmwr/volumes/71/wr/mm7109a2.htm>

residents did not have a dedicated voice housed within the Centers for Disease and Control to track and analyze health disparities experienced by rural residents. As Congress looks to expand data tracking and collection for public health, it is important that geographic disparities are measured. **We urge Congress to stratify data based on rurality to determine how potentially catastrophic disease outbreaks affect geographically isolated areas.**

As part of Sec. 304, Congress created a new program to increase technical assistance for eligible entities to address the unique needs of people with disabilities and other at-risk populations. NRHA is pleased that Congress has developed a geographically diverse Advisory Committee to provide recommendations to the Secretary and Congress, but it is important that rural representation is expressly outlined. People living with disabilities in rural and urban locations face many similar barriers when trying to access care, but rural residents experience unique socioeconomic factors that contribute to their health. Rural residents are more likely to experience chronic disease and evidence suggests 20 percent of all rural Americans may be living with long covid.² As of 2021, the Department of Health and Human Services determined that long covid can be a disability under the ADA. NRHA looks forward to working with members of the Senate HELP committee to develop strategies to improve health outcomes for people with disabilities living in rural areas.

NRHA strongly encourages Congress to include authorizing language for the CDC Office of Rural Public Health in Title V of PAHPA. NRHA is pleased Congress appropriated 5 million dollars to stand up an Office of Rural Public Health (ORPH) within the CDC in FY23, but authorizing language is needed to make this office more consequential. The ORPH will serve as the primary point of contact in the CDC on matters of rural health by:

- Assisting the CDC Director in conducting, coordinating, promoting, and disseminating data and researching public health issues affecting rural populations;
- Working across CDC to develop, refine, and promulgate policies, best practices, lessons learned, and coordinating successful programs to improve care, services, and social determinants of health for populations who reside in rural areas of the United States;
- Conducting, supporting, and disseminating rural health research, educational outreach, and evidence-based interventions to promote health behaviors, prevent death, disease, injury, and disability among rural populations;
- Identifying disparities in the availability and accessibility of health care and public health interventions for populations living in rural areas;
- And administer grants, cooperative agreements, and contracts to provide technical assistance and other activities as necessary to support improved health and healthcare in rural areas.

We urge you to focus on the health and disparities faced by rural Americans by authorizing the CDC Office of Rural Public Health. The COVID-19 pandemic has shown starkly that public health support in rural populations is behind that of their urban counterparts. A sustained commitment will ultimately

² Temple, Kay Miller. "Perspectives on the Long of COVID: From Doomscrolling to Rural Management Strategies." *The Rural Monitor*, 1 May 2023, www.ruralhealthinfo.org/rural-monitor/long-covid/.



improve rural public health agencies' abilities to serve their communities and better the health outcomes moving forward.

NRHA appreciates the work the Senate Health, Education, Labor, and Pensions Committee is doing to ensure the American health care infrastructure is prepared for the next PHE. NRHA looks forward to our continued collaboration to ensure rural providers are prepared for future crises. If you have any questions, please contact Carrie Cochran-McClain (ccoehran@ruralhealth.us).

Sincerely,

A handwritten signature in black ink, appearing to read "Alan Morgan", is positioned above the typed name.

Alan Morgan

Chief Executive Officer