



NATIONAL RURAL HEALTH ASSOCIATION

2015 Rural Health Policy Institute Requests

Cosponsor the CARE Act

Since 2010, 47 rural hospitals have closed. In fact, in the last two years more rural hospitals have closed than in the previous ten years—COMBINED. Right now, **283 additional facilities** are at risk of closing. If these facilities close, more than **700,000 patients will lose access** to their local emergency rooms. These closures are creating gaps in access to care for all rural Americans, but hurt rural Medicare beneficiaries the most. Rural Medicare beneficiaries already face a number of challenges when trying to access health care services close to home. Rural seniors are more likely to be forced to travel longer distances for care, especially specialty services, than urban or suburban seniors. **97 percent of rural counties in the United States are Primary Care Health Professional Shortage Areas.** Additionally, rural populations as a whole are more likely to be underinsured or uninsured, be poorer than their urban counterparts, and experience more chronic disease. The Community Access and Rural Health Equity (CARE) Act will help protect Medicare beneficiaries and the hospitals and professionals that provide their care while developing innovative, sustainable delivery models for the future of rural health care.

Support Stable Funding for Rural America

The federal investment in rural health programs is a small portion of federal healthcare spending, but it is critical to rural Americans. These programs increase access to health care providers, improve health outcomes for rural Americans, and increase the quality and efficiency of health care delivery in rural America. NRHA supports mandatory, long-term funding for the Teaching Health Center and Rural Training Track professional training programs, the National Health Service Corps, and the Community Health Center Fund. Sustaining the recently-expired Medicaid primary care parity payments is critical to increasing access to providers for the rural poor. Increasing Rural Health Clinic's capitated payment rate to reflect the cost of providing care will sustain these critical rural safety net providers as they treat new populations under health care reform. Annual appropriations for programs like the Rural Hospital Flexibility grants, State Offices of Rural Health, Area Health Education Centers, the Small Hospital Improvement Program, Title VII nurse training programs, and the Telehealth investment line-item are vital to the efficient and effective delivery of health care in rural America. NRHA encourages Congress to continue funding these important programs in FY 2016 and beyond.

Join the Senate Rural Health Caucus and House Rural Health Care Coalition

Join your colleagues in the Senate and House of Representatives as part of the Senate Rural Health Caucus or House Rural Health Care Coalition. The Caucus and the Coalition are a collection of rural health champions and have passed significant legislation improving the lives of 62 million rural Americans. Stand up for rural in the 114th Congress by joining these important groups!