

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 institutions to meet their health care needs by providing research, education, communication, and advocacy.

INVESTING IN A STRONG SAFETY NET

Since 2010, nearly 170 rural hospitals have shuttered their doors or discontinued inpatient services. Nationally, 50% 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.



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 170 rural hospitals have shuttered their doors or discontinued inpatient services. Nationally, 50% of rural hospitals are operating with negative margins and therefore vulnerable to closure. 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)

Reps. Graves (R-MO) & 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
- Making permanent telehealth enhancements for RHCs and FQHCs
- Eliminating the 96-hour Physician Certification Requirement for CAHs
- Equalizing CAH beneficiary copayments
- Reauthorizing the Medicare Rural Hospital Flexibility Program

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

**Sens. 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 by amending outdated staffing, laboratory requirements, and definitional requirements related to census definition and primary care thresholds.

→ Extend MDH & LVH Designations

**Sens. Casey (D-PA), Grassley (R-IA),
Reps. Miller (R-WV), Sewell (D-AL)**

The Rural Hospital Support Act (S. 1110) and Assistance for Rural Community Hospitals Act (H.R. 6430) would extend two critical rural hospital programs, the Medicare Dependent Hospital designation and Low-Volume Hospital payment adjustment.

→ Rural Hospital Closure Relief Act (S. 1571)

Sens. Durbin (D-IL) & Lankford (R-OK)

Updates the Critical Access Hospital 35-mile distance requirements and enables states to certify a hospital as a "necessary provider" under certain circumstances.

→ Protect Rural Access to 340B

**Reps. Spanberger (D-VA), Johnson (R-SD),
Matsui (D-CA), and Sen. Welch (D-VT)**

The PROTECT 340B Act (H.R. 2534) and 340B PATIENTS Act (H.R. 7635/S.5021) would protect providers from discrimination on the basis of participating in 340B and preserve critical contract pharmacy arrangements.



Building a Robust Rural Healthcare Workforce

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)

Sens. Tester (D-MT), Barrasso (R-WY), Reps. Harshbarger (R-TN), Cuellar (D-TX), Schrier (D-WA), Bacon (R-NE)

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. Ensures rural providers are adequately represented in the Medicare Graduate Medical Education (GME) program.

→ Healthcare Workforce Resilience Act (S. 3211 H.R. 6205)

Sens. Durbin (D-IL), Cramer (R-ND), Reps. Schneider (D-IL), Caraveo (D-CO), Bacon (R-NE), Cole (R-OK)

Addresses workforce shortages by allowing nurses and physicians in the U.S. on a temporary work visa to obtain permanent status by recapturing unused employment-based visas.

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

Sens. Blackburn (R-TN) and Durbin (D-IL), 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.

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

Sens. Merkley (D-OR), Lummis (R-WY), Reps. Joyce (R-OH), 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 Residency Planning and Development Act (H.R. 7855)

Reps. Caraveo (D-CO) and Carol Miller (R-WV)

Authorizes the Rural Residency Planning and Development program that awards funding to support start-up costs to establish new rural residency programs.





Addressing Rural Health Equity

Rural populations often encounter barriers that limit their ability to obtain the care they need. The past five years 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. The federal investment in rural health programs is a small portion of 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)

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

Extend temporary additional reimbursement for ground ambulance services in rural areas to ensure access to vital emergency services.

→ CONNECT for Health Act (S. 2016/H.R.4189)

**Sens. Schatz (D-HI), Wicker (R-MS),
Reps. Thompson (D-CA), Schweikert (R-AZ)**

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

→ CDC Office of Rural Health (S. 2799/H.R.5481)

**Sens. Hyde-Smith (R-MS), Merkley (D-OR),
Reps. Guest (R-MS), Gluesenkamp (D-WA)**

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

→ TREATS Act (S. 3193/H.R. 5163)

**Sens. Murkowski (R-AK), Whitehouse (D-RI),
Reps. Trone (D-MD), Fitzpatrick (R-PA)**

Permanently allows prescribing medications for opioid use disorder via telehealth to increase access to lifesaving care.

→ Rural Health Innovation Act of 2023 (S.953/H.R. 1712)

**Sens. Blackburn (R-TN), Hickenlooper (D-CO),
Reps. Kustoff (R-TN) 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.

→ Rural Obstetrics Readiness Act (S. 4079/H.R.8383)

**Sens. Hassan (D-NH), Collins, (R-ME), Britt (R-AL),
Smith (D-MN), and Reps. Kelly (D-IL), Kim (R-CA),
Meuser (R-PA), and Schrier (D-WA)**

Helps rural hospitals without obstetric units prepare to handle the obstetric emergencies through training programs, grants for equipment and training, and a tele-consultation pilot program.

