

The Nebraska Rural Health Association (NeRHA) will join the National Organization of State Offices of Rural Health (NOSORH) and other state/national rural stakeholders in celebrating the first-ever National Rural Health Day on Thursday (today), Nov. 17. Governor Dave Heineman has issued a proclamation designating that day as National Rural Health Day in Nebraska.

NOSORH created National Rural Health Day as a way to showcase rural America; increase awareness of rural health-related issues; and promote the efforts of NOSORH, State Offices of Rural Health and others in addressing those issues.

Plans call for National Rural Health Day to become an annual celebration on the third Thursday of each November. Events recognizing National Rural Health Day and “Celebrating the Power of Rural” are being planned throughout the nation.

Approximately 62 million people—nearly one in five Americans—live in rural and frontier communities throughout the United States.

“These small towns, farming communities and frontier areas are wonderful places to live and work; they are places where neighbors know each other and work together,” notes NeRHA Executive Director John L. Roberts. “The hospitals and providers serving these rural communities not only provide quality patient care, but they also help keep good jobs in rural America.”

These communities also face unique healthcare needs. “Today more than ever, rural communities must tackle accessibility issues, a lack of healthcare providers, the needs of an aging population suffering from a greater number of chronic conditions, and larger percentages of un- and underinsured citizens,” Roberts says. “Meanwhile, rural hospitals are threatened with declining reimbursement rates and disproportionate funding levels that makes it challenging to serve their residents.”

State Offices of Rural Health and rural health associations play a key role in addressing those needs. All 50 states maintain a State Office of Rural Health and 45 states have a rural health association. All share a similar mission: to foster relationships, disseminate information and provide technical assistance that improves access to and the quality of, health care for its rural citizens.

In Nebraska for example, the NeRHA has been working closely with the Nebraska Congressional delegation over the past month to oppose several proposals currently under review by the Joint Select Committee that target cutting Medicare payments to small, rural hospitals.

Because rural hospitals face a unique set of challenges—remote geographic location, small size, workforce scarcity, physician shortages, constrained financial resources among others—Congress enacted a special designation called the “Critical Access Hospital” under the Balanced Budget Act of 1997.

Prior to enactment, many rural hospitals were financially strapped or were on the verge of closing.

Since enactment, this designation and accompanying reimbursement have helped ensure and protect stable access to health care services for the elderly and others living in rural America. Critical access hospitals (CAHs) across the country often serve as both the health care mainstay in rural communities as well as its economic engine.

“Unfortunately, there are several proposals currently under review by the Joint Select Committee that target this special CAH designation and its reimbursement. Those proposals

include reducing payments to CAHs, eliminating the CAH designation for some hospitals or outright repeal of the CAH designation altogether” says Roberts.

“Cutting payments to these Nebraska hospitals—some of the largest employers in many rural communities—does great harm in terms of access to health care and jobs in our local economies,” he said.