

# United States Senate

WASHINGTON, DC 20510

April 11, 2018

The Honorable Roy Blunt  
Chairman  
Subcommittee on Labor, Health and Human  
Services, Education and Related Agencies  
United States Senate  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member  
Subcommittee on Labor, Health and Human  
Services, Education and Related Agencies  
United States Senate  
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

As rural health advocates, we ask that you consider continued support for rural health care programs as you move forward with the Fiscal Year (FY) 2019 Labor, Health and Human Services and Education funding measure. We thank you for your leadership and support for rural health care programs and hope that you will continue these important efforts.

While current spending for all rural health discretionary programs is relatively small, it plays a critical role in solidifying the fragile health care infrastructure in rural communities. We urge you to continue supporting government policies that improve rural health outcomes and strengthen care delivery.

**Health Centers:** The Health Centers program helps support community health centers (CHCs). CHCs provide services to an estimated 27 million people living in underserved areas, with more than half of users being from rural areas. CHCs specialize in providing high-quality, cost-effective primary and preventative care to their patients. These providers are a vital part of the rural health care safety net and play an enormous role in access to care for those living in rural and frontier areas. We urge the Committee to work to ensure their continued sustainability and viability.

**National Health Service Corps (NHSC):** The NHSC plays a critical role in maintaining the health care safety net by placing primary health care providers in our nation's most underserved rural communities. Today, 10,200 NHSC clinicians are practicing in underserved communities, roughly half of which are in rural communities. However, the demand for primary care providers far exceeds the supply, and the needs of our rural communities continue to grow. Rural communities must have the resources necessary to hire primary care, dental and mental health practitioners, and NHSC is an efficient and effective way to support these efforts. We urge the Committee to recognize the importance of the NHSC program in eliminating provider shortages across the country.

**Health Professions:** We ask the Committee to provide adequate funding for programs that further develop our national health care workforce, in particular the Rural Physician Training Grant program and the Targeted Support for Graduate Medical Education program. These



programs are an essential source of education and training for rural health care providers, and help to ensure that individuals living in rural communities have access to quality health care.

**Area Health Education Center (AHEC):** The AHEC Programs and Centers play a critical national role in addressing health care workforce shortages, particularly those in primary care. The AHEC Program grantees support the recruitment and retention of physicians, students, faculty, and other primary care providers in rural and medically underserved areas by providing local, community-based, interdisciplinary primary care training.

**Rural Health Outreach Grant Program:** These grants fund community-based projects for three years to increase access to care. Typical projects include efforts to address diabetes, obesity, health promotion, health screening, and mental health. Programs have brought care that would not otherwise have been available to more than 2 million rural citizens across the country. In fact, this is the only federal rural health care program that allows communities to use these funds based on their community needs. We urge continued support for this essential grant program.

**Rural Health Research Grant Program:** This grant program supports academic-based rural health research centers that study rural health issues, including work on rural hospitals, health professionals, delivery of mental health services, and the functioning of managed care systems in rural areas. Rural health research centers have also conducted analysis of the impact of budgets, regulations, legislation, and current law on the rural health care delivery system. We ask your support for this program to build upon the important work of the rural health research centers that assist federal legislators in crafting national rural health policies.

**Rural Network Development:** This grant program provides support to multiple rural providers who work in formal networks to better integrate administrative, clinical, technological, and financial functions. These funds have enabled grantees to improve coordination, increase efficiency, and enhance the capability of rural networks to innovate and respond to payment and policy changes. We urge the Committee to support this important assistance that helps providers secure a viable future in delivering quality care.


**Rural Hospital Flexibility Grants:** These grants are used by states to implement new technologies, strategies, and plans in Critical Access Hospitals (CAHs). CAHs provide essential services to a community and essential jobs to the rural economy. These grants provide crucial funding for updating equipment, improving care delivery models, and enhancing the quality of care provided. We ask the Committee to recognize the necessity of these grants and continue its support for this important program.

**State Offices of Rural Health:** State offices of rural health exist in all 50 states and help rural communities build and maintain health care delivery systems. They accomplish this mission by collecting and disseminating information, providing technical assistance, helping to coordinate rural health interests state-wide, and by supporting efforts to improve recruitment and retention of health professionals. We urge your continued support for this program.

**Office for the Advancement of Telehealth (OAT):** The OAT promotes the use of telehealth technologies by fostering partnerships among federal agencies, states, and private sector groups to create telehealth projects; administering telehealth grant programs; providing technical assistance; and promoting best practices. These grants and supports help reduce the isolation of rural providers and foster integrated delivery systems through network development. Telemedicine technologies are critically important to the delivery of care in remote rural and frontier areas. We urge the Committee to continue its support for this program.

We believe maintaining fiscal responsibility is a top priority. Consistent with that priority, we hope you will recognize the important role these programs play in ensuring that Americans living in rural communities can access quality, cost-effective health care. Please consider this as the Committee prepares to mark up the FY 2019 funding measure for the Department of Health and Human Services and related agencies. Thank you for your consideration of these requests.

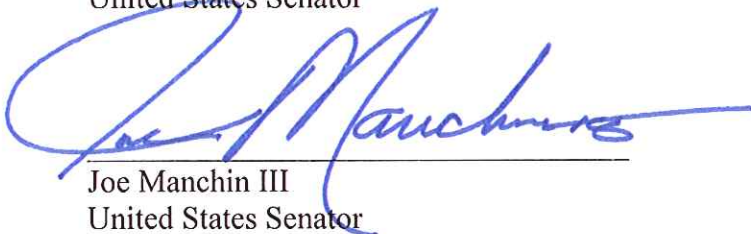
Sincerely,



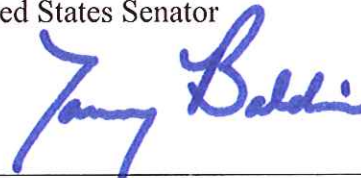
Heidi Heitkamp  
United States Senator



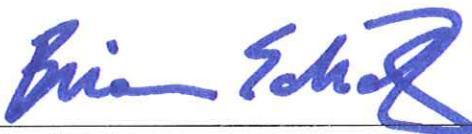
Tina Smith  
United States Senator



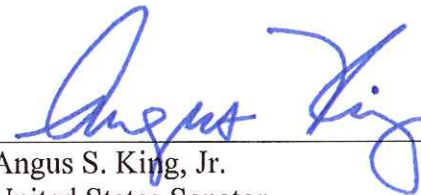
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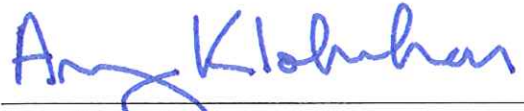




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