



National Advisory Committee On Rural Health and Human Services



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Dear Rural Advocate,

It is a pleasure to announce the release of the National Advisory Committee on Rural Health and Human Services' 2010 Report to the Secretary. The Committee's 2010 Report is the culmination of a year-long effort to examine key health and human service issues affecting rural communities today.

The 2010 Report focuses on home and community based care for rural seniors, the rural primary care workforce, and rural health care provider integration, highlights key findings, and provides recommendations to the Secretary.

- The Committee believes that options for home-based care need to be expanded in rural areas. Studies have shown that seniors are happier remaining in the home as long as possible, but in practice too often seniors are placed into retirement homes without being offered an alternative. Allowing seniors to age-in-place is more difficult because the existing infrastructure and available resources are often concentrated on supporting nursing home care. Barriers such as geographic accessibility, ineligibility, workforce shortages, and limited awareness of options all affect seniors' decisions when choosing care. The Committee's recommendations to the Secretary include evaluating current laws prohibiting payment to family members for care and coordinating with the Secretary of Transportation to ensure seniors are able to access care.
- The Committee recognizes the importance of not only attracting Primary Care Physicians to rural America, but in utilizing Physician Assistants and Advanced Practice Nurses who can act as the sole primary care provider in a community. Declining interest in primary care has most notably affected rural communities. An aging rural population and a retiring medical workforce exacerbate the shortages rural America already faces. An expansion of health care insurance would intensify the unmet demand for primary care in rural America. The Committee recommends that the primary care system be strengthened through local leadership, an emphasis on preventative measures, and by attracting and training a workforce dedicated to care in rural areas.

- The majority of patient care in the United States is uncoordinated due in large part to an incomplete transfer of important patient information between providers. This fragmentation of care is acutely problematic in rural areas, which face higher rates of chronic diseases that require greater care coordination. The Committee believes that the quality of care and efficiency of delivering care will both increase if integration, or the seamless patient and information flow among providers, is achieved. In this report the Committee recommends specific ways to achieve integrated care in rural areas. These recommendations include fixes to Stark regulation and a call to include rural providers in future demonstrations of Accountable Care Organizations (ACO), bundling, and patient-centered Medical Homes.

It is our hope that this report will provide a valuable perspective for a wide audience of those who are interested in rural health and human service issues. The report will be available electronically on the Committee's Web site at: <http://ruralcommittee.hrsa.gov/>. A limited number of printed copies are available through the Office of Rural Health Policy. To request a copy, contact Deborah DeMasse-Snell at DDeMasse-Snell@hrsa.gov or (301) 443-0835.

The National Advisory Committee on Rural Health and Human Services is an appointed citizens' panel of nationally recognized rural health and human service experts that provides recommendations on rural issues to the Secretary of the Department of Health and Human Services. The Committee was chartered in 1987 to advise the Secretary of Health and Human Services on ways to address health care problems in rural America. If you have questions or concerns regarding the report, contact Jennifer Chang at JChang@hrsa.gov or (301) 443-0835.