

National Leaders Discuss Rural Providers' Role In Ensuring Access to Quality Healthcare

Washington, D.C. — “Rural America is critically important—not only to people who live in small towns, but to the future of this country,” said Doug O'Brien, Under Secretary for Rural Development at the U.S. Department of Agriculture in his opening remarks at a press conference at the National Press Club in Washington, D.C., one of the many events held on National Rural Health Day on November 21st.

Although employment in rural areas has been stagnant in recent years and childhood poverty there has been increasing, O'Brien said, “There are huge opportunities in rural America—whether it's related to energy, food production, agriculture or exports. It's a place of great potential, and certainly is deserving of significant focus of policy and resources.” O'Brien noted that USDA Rural Development (USDA-RD) programs support broadband implementation, connecting hospitals & health care clinics for state-of-the-art health care. Last year, USDA-RD invested \$650 million in 183 rural health care facilities, he said.

O'Brien read a [special message from President Barack Obama](#) celebrating National Rural Health Day.



Seated (L-R): Doug O'Brien, Under Secretary of Agriculture, U.S. Dept of Agriculture; Madhulika Agarwal, Deputy Under Secretary for Health for Policy & Services, Dept. of Veterans Affairs; Mary Wakefield, Administrator for the U.S. Health Resources & Services Admin.

Standing (L-R): David Lee, Director of Federal Affairs, National Rural Health Association; Tom Morris, Director, Federal Office of Rural Health Policy; Bill Finerfrock, Executive Director National Association of Rural Health Clinics; Gina Capra, Director, Office of Rural Health; Teryl Eisinger, Executive Director, National Organization of State Offices of Rural Health

Mary Wakefield, HRSA Administrator, said, “What’s most important about NRHD is recognizing the vital contributions across the U.S. from State Offices of Rural Health and from rural health care providers, contributions that make a difference every day to the health of rural communities.” Wakefield, who hails from a town of 7,400 in North Dakota, said that she knows first-hand what a difference a doctor or a dentist can make in a rural community—it can mean the difference in not having to travel 50 miles to receive health services. “While there clearly are unique challenges, there are also, always, seeds of innovation, continuously sown in rural health care, which grow into new approaches to longstanding concerns impacting rural communities.” Wakefield noted that half of health centers designated as PCMHs are in rural areas. In addition, the 250 ACOs in the United States (which were originally thought might only work in urban infrastructures), currently exist in 17 percent of non-metro counties.

Dr. Madhulika Agarwal, Dept. of Veterans Affairs, spoke of how the VHA has been “continuously identifying and implementing innovative services to overcome geographic barriers to bring services to rural veterans in their homes.” There are 6.1 million veterans that live in rural areas. Access to care has been improved through telehealth, Agarwal said, especially for veterans with chronic diseases. Additionally, Agarwal described how the VA’s rural health care and training initiative is bringing physical therapists, psychologists, advanced practice nurses, dentists and social workers, in addition to physicians and physician specialists into rural areas.

Finally, the speakers and Tom Morris of the Federal Office of Rural Health Policy, responded to questions from the listening audience on funding for HIT and hospitals, recruitment of rural physicians, preventing closures of Critical Access Hospitals and implementation of electronic health records in rural facilities. A video recording of the press conference is [available online](#).