# The Rural Health Landscape: Overview and Key Issues

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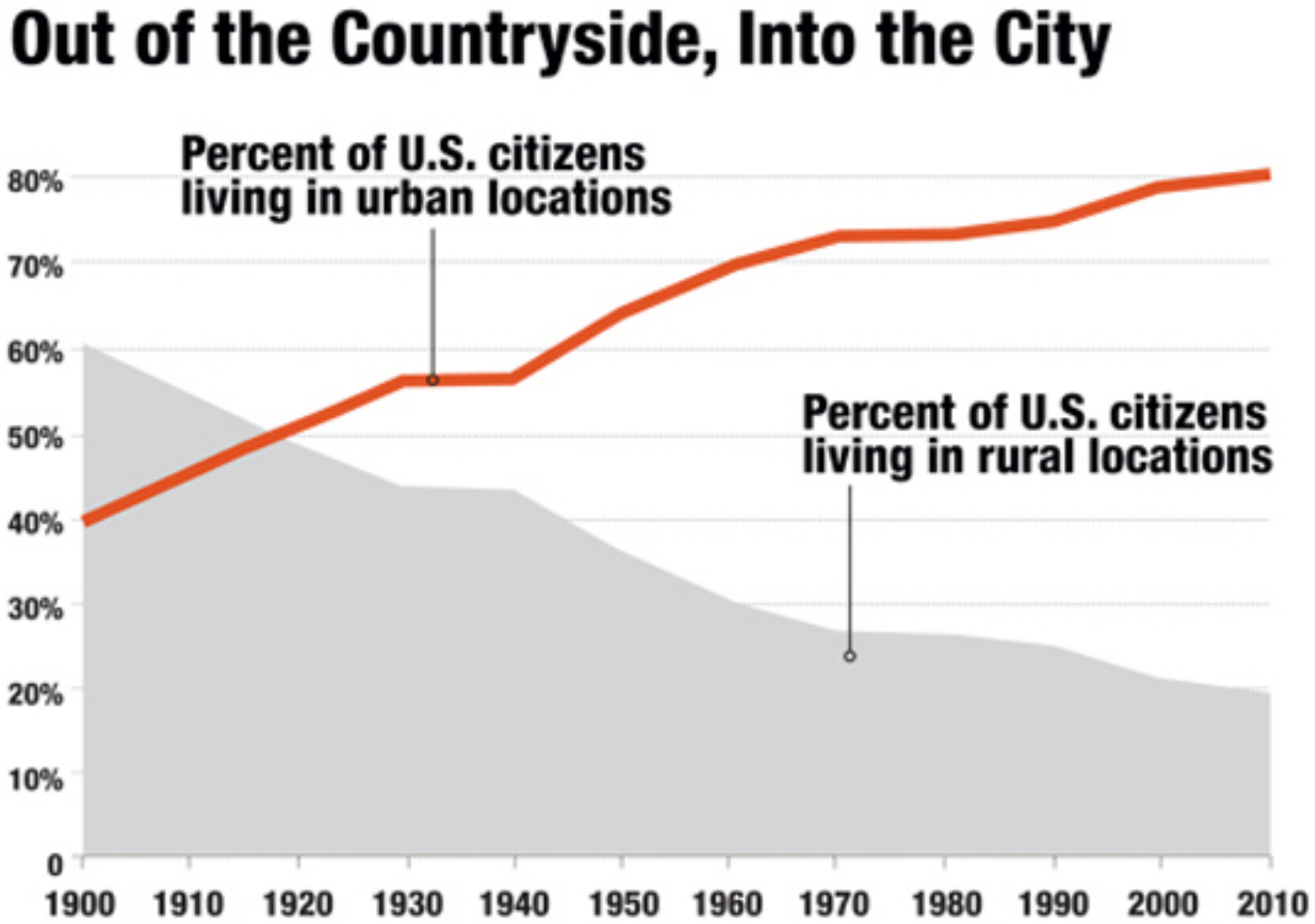
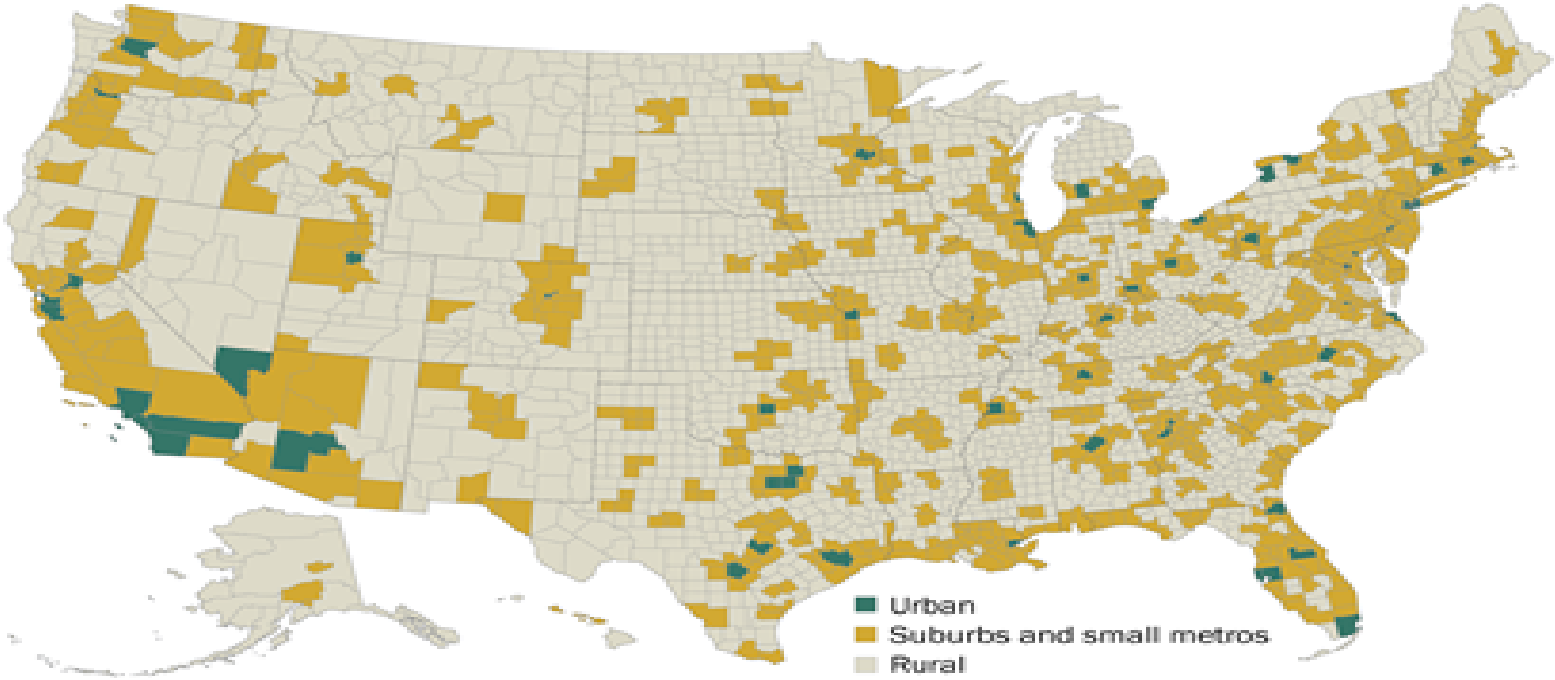
RURAL
URBAN

# Changing Demographics




15% OF ALL
AMERICANS
LIVE IN
RURAL AREAS

## Majority of U.S. counties are rural, especially in the Midwest




Source: Pew Research Center analysis of National Center for Health Statistics Urban-Rural Classification Scheme for Counties.
"What Unites and Divides Urban, Suburban and Rural Communities"

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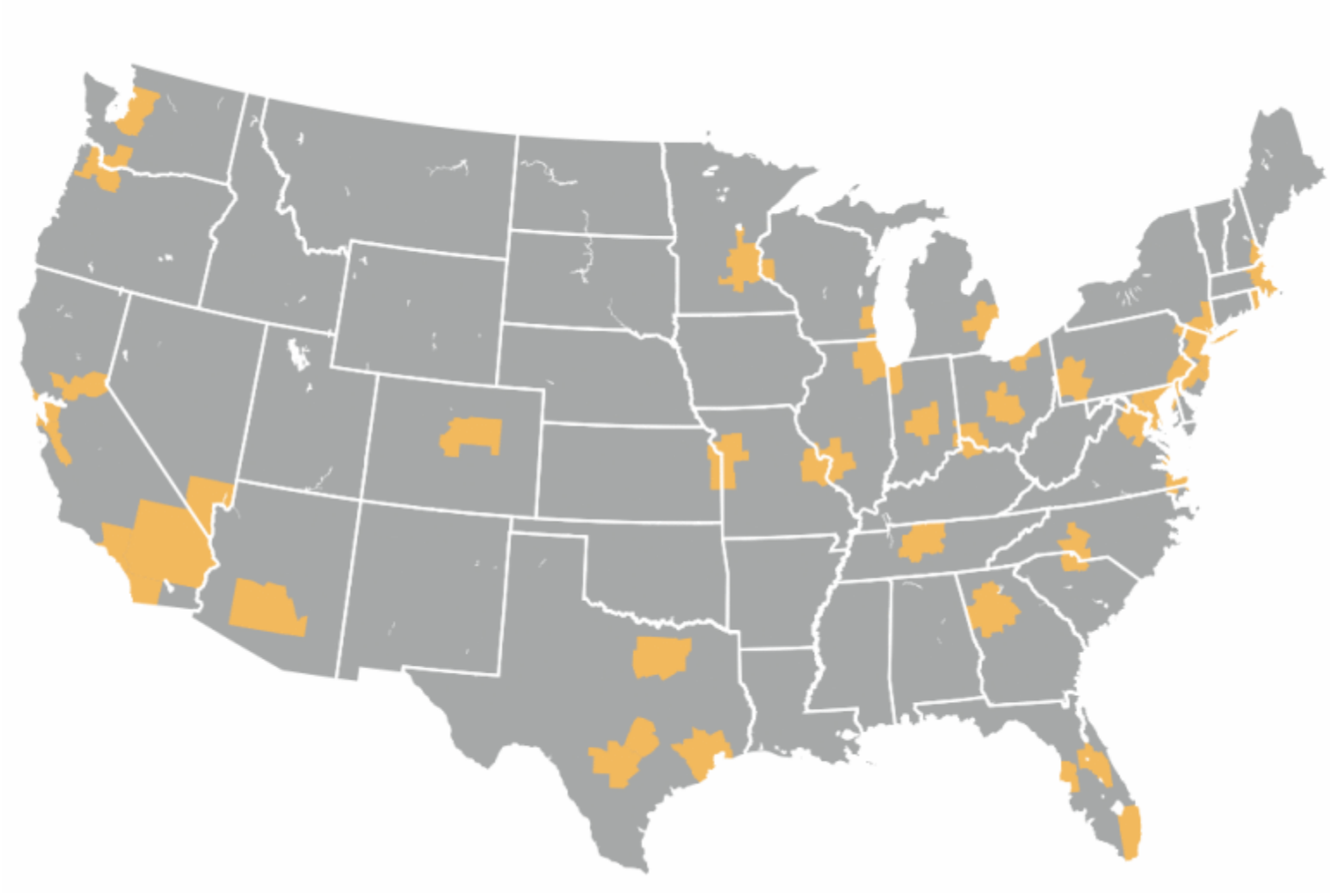
# In 2012, Half the Total U.S. Population Lived Within the 39 Largest Metro Areas



# Rural Communities Are Not Homogenous

- If you have seen one rural community…..you have seen one rural community
- Wide variation in economies, population demographics, health systems and health infrastructure

# Rural Health Disparities

- Rural populations are older, poorer and sicker.

  Compared to urban populations they have:

- Higher
  - % of children living in poverty
  - % those under 65 without health insurance
  - Mortality rates for children and young adults
  - Rates of smoking, obesity, inactivity
  - Rates of disability and suicide
  - Rates of preventable hospitalizations
  - Rates of food insecurity
- Lower
  - Household income
  - Number of healthcare and mental health providers
  - % of adults with postsecondary education

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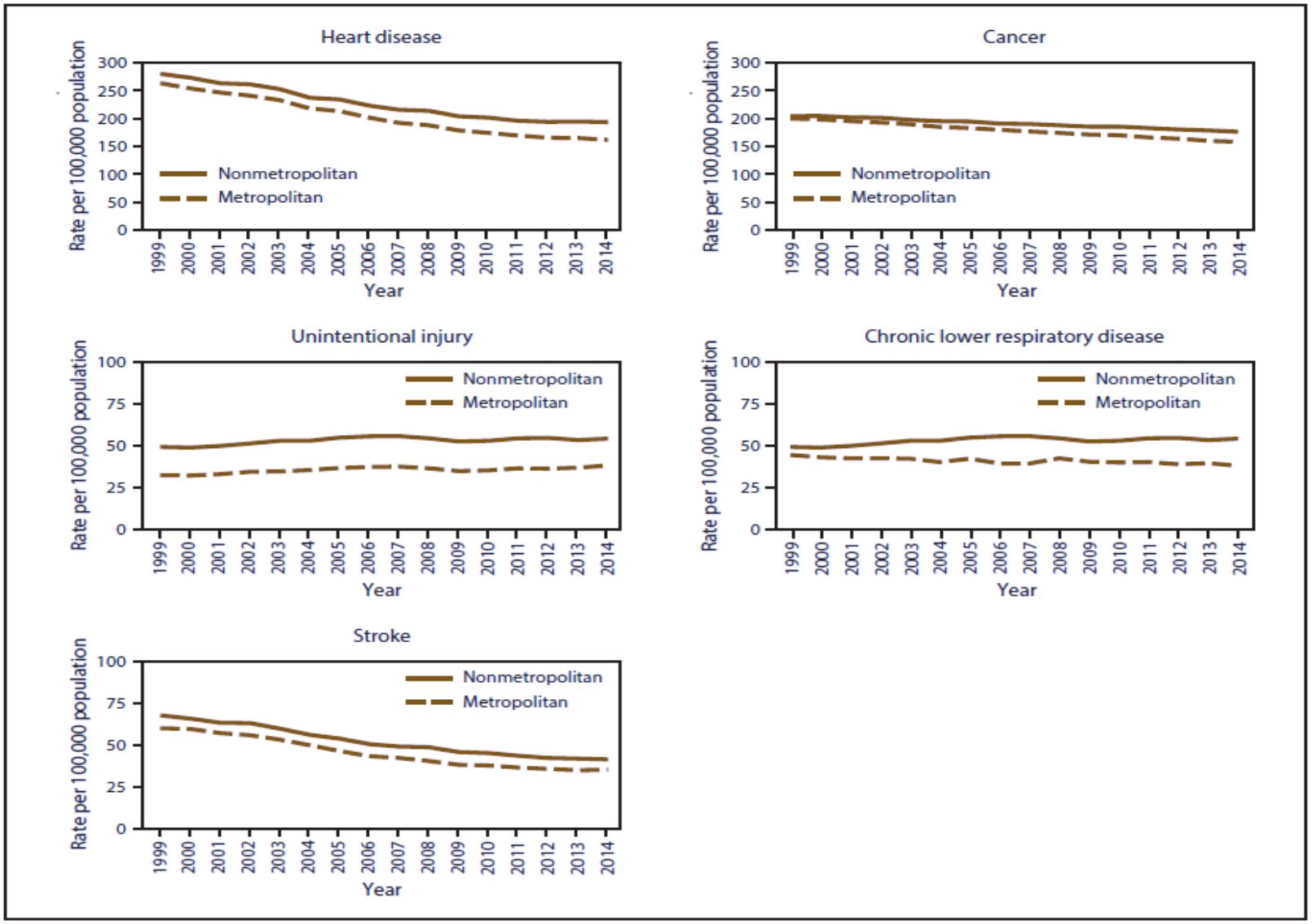
**FIGURE 2. Age-adjusted death rates among persons of all ages for five leading causes of death in nonmetropolitan and metropolitan areas,* by year — National Vital Statistics System, United States, 1999–2014**




* Nonmetropolitan and metropolitan areas were identified using the Office of Management and Budget's 2013 county-based classification scheme. (**Source:** Office of Management and Budget, White House. Revised delineations of metropolitan statistical areas, micropolitan statistical areas, and combined statistical areas, and guidance on uses of the delineations of these areas. Washington, DC: Office of Management and Budget; 2013. https://www.whitehouse.gov/sites/default/files/

# WHY?

- In general
  - Rural demographics work against health - older, poorer and sicker
  - Less physical activity and more behaviors that adversely impact mortality
- Regarding unintentional injury specifically :
  - Age adjusted death rate is almost 50% higher than urban areas
  - More high speed motor vehicle trauma
  - More Opioid use
  - More behaviors that lead to injury – impaired driving, less seatbelt use, more Opioid and alcohol use
  - Delayed access to emergency care

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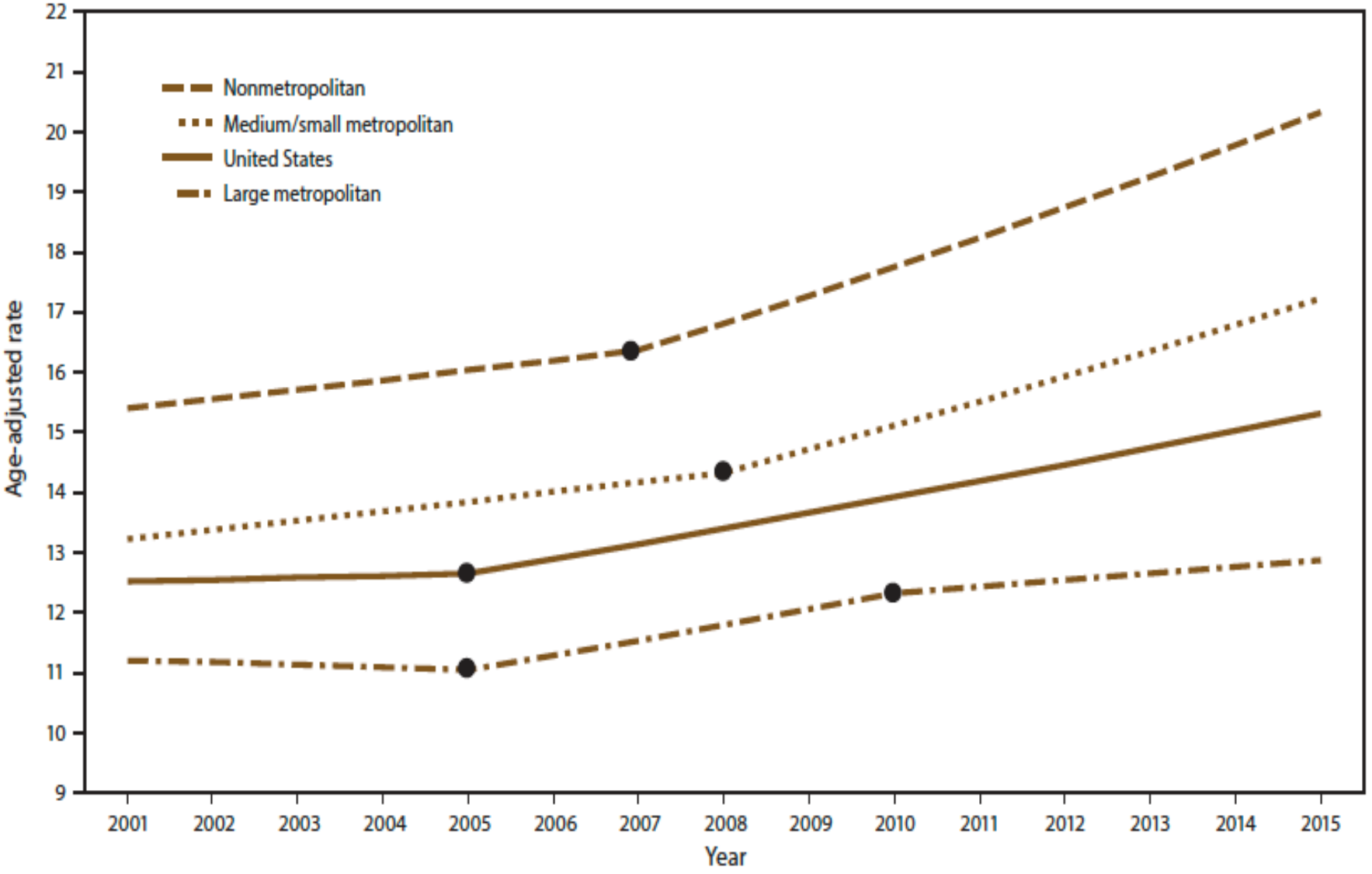
**FIGURE 1. Suicide rates* among persons aged ≥10 years, by county urbanization level† — United States, 2001–2015§**



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Nearest Town 13 km
Health Care 300 km

# Key Issues

- Less access to care – primary care, behavioral health, specialty services, hospital
- Workforce shortages
- Hospital viability
- Availability of prompt emergency services
- Transportation
- Limited choice/lack of health care providers/insurers
- Health care is a major source of economic viability for some rural communities
- Privacy

# Historical Policy Response to Rural Health Issues

- Focus on access to care
  - Funding support to retain rural hospitals and providers
  - Funding to recruit rural providers – loan repayment, tax credits
  - Enhanced reimbursements
  - Changes to scope of practice

# Time to Expand Our Options?

- Rural disparities remain – time to expand beyond access
- How will our national focus on cost containment and the "triple aim" impact rural communities
- How do we improve health and quality of care in rural communities?
  - Is it time to incent quality as well as access?
  - How do we tackle the issues of:
    - Greater volume/experience = improved quality
    - Limited choice of provider
    - Data – low numbers make measurement difficult
    - Social and behavioral factors

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# Moving Forward: How We Can Impact the Health of Rural Communities

- Telehealth
- New delivery models – free standing ED's, community health workers, community paramedics
- Payment innovations – global budgets, value based payments
- Focus on behaviors – smoking, seatbelts, substance abuse

# Moving Forward: How We Can Impact the Health of Rural Communities (continued)

- Improved access to mental health and substance abuse treatment
- Focus on social determinants
- Policies re: emergency services availability – payment, practice
- Funding opportunities:
  - Improved coverage for substance abuse
  - Allocate funding based on burden of disease (not population)