



Key Takeaways

- Staffing shortages have strained the ability of health care facilities to provide quality care, and it will take government action to help strengthen and build the health care workforce.
- Telehealth is an increasingly viable means of providing access to high-quality medical care but is limited in areas without broadband.
- Implementing programs that enable seniors to age in place leads to improvements in health outcomes.
- Social determinants, such as availability of childcare, lack of transportation, and the ability to manage a complex health insurance system, are barriers to health care access in rural communities.

The 2021 Rural Policy Summit is a virtual series that brings together a wide range of stakeholders, including policymakers, nonprofit leaders, academic researchers, industry professionals, and others interested in rural, to learn about and discuss major policy issues that will affect rural Pennsylvania over the next 5 to 10 years.

The five topic areas for the series are education, health care, local services, economic development, and agriculture.

This session, which was held October 20 and highlighted here, focused on the challenges and opportunities facing our rural health care providers and facilities.

The series is being cohosted by the Pennsylvania Office of Rural Health, Pennsylvania Rural Development Council, Pennsylvania Department of Community and Economic Development, Pennsylvania Downtown Center, and Philadelphia Federal Reserve Bank's Community Development and Regional Outreach Department.

Scan QR code for the speakers list, presentation, and session recording.



Background on Rural Health Care

The healthcare industry is a significant employer in rural areas, providing 10 percent of rural Pennsylvania's Gross Domestic Product and 19 percent of rural jobs.

However, rural areas have fewer nurses, psychologists, doctors, and most other health care professionals per capita than urban areas. There are twice as many OB-GYNs and pediatricians in urban communities compared to rural communities, and almost half of rural families live more than 10 miles from a hospital with bassinets, a key indicator of a hospital's ability to provide obstetric care.

Staffing shortages have become an increasing concern in rural hospitals and other health care facilities as many health care workers retired or quit during the COVID-19 pandemic. Workforce issues will continue to be a top priority for health care facilities as the average age of Pennsylvanians increases and as more residents seek care.

Discussion Highlights

The roundtable panel discussion focused on four different aspects of rural health care. While the panel experts presented information specific to their field, there was significant overlap in the policy recommendations and legislative efforts they supported to increase health care access and availability in rural Pennsylvania.

Elder Care

Joanne Grossi, AARP Pennsylvania State President, noted the significant and growing needs of Pennsylvania's senior population for both in-home and more advanced care. She focused on the importance of allowing individuals to remain in their homes rather than move to nursing or other care facilities. She recommended implementing policies that would reimburse telehealth at the same rates as in-person care, since at-home medical care is essential to helping seniors age in place. She also noted that a significant barrier to telehealth is limited broadband access in rural communities and suggested that broadband access is essential to providing quality care. AARP is currently supporting state legislation that would expand the ability of nurse practitioners to operate independently, as well as legislation to reimburse telehealth at the same rate as in-person care as a means of improving access in rural areas.

Drug and Alcohol Treatment

Steven Ross of the Pennsylvania Department of Drug and Alcohol Programs (DDAP) discussed the system of drug and alcohol treatment provision in the Common-

wealth, which is largely overseen by a network of single county authorities. He spoke positively of the PA GetHelpNow hotline, a recent program that allows Pennsylvanians to call and access immediate substance use disorder treatment. Mr. Ross said that the lack of transportation is a major barrier in rural areas, and that even in areas with strong local support for recovery programs, affordable housing and other social determinants can be major barriers to those recovering from substance use. Naloxone access has bolstered rural communities' ability to counteract the opioid epidemic, and he commended policy that has enabled mail-order naloxone across Pennsylvania.

Maternity and Obstetrics

Dr. Omrana Pasha-Razzak, a hospitalist and professor with Penn State Hershey Medical Center, focused on the divergence in outcomes and access for rural women in the Commonwealth. She noted that the incidence of cardiac disease and diabetes are increasing among women between the ages of 30 and 45. These conditions can lead to complicated pregnancies that require complex care. Dr. Pasha-Razzak also noted that rural women have less access to the care these complications require. In 2018, 20 out of 46 rural Appalachian counties had no obstetric units, meaning that many rural women must drive one to three hours to receive obstetric care. She also noted that, in the long-term, the disparity between medical school graduates and available residency slots is likely to reduce the number of doctors in rural areas. This is further exacerbated by recent visa and travel restrictions on foreign-born medical graduates, who have more challenges accessing residencies and are also more likely to fill the proactive care positions that are needed in rural communities. She highlighted the ECHO Program at Penn State Hershey as a recent success in rural medicine, which provides ongoing information by linking rural health providers with Penn State Hershey specialists to allow information sharing within a group of professionals.

Rural Hospitals

Thomas Kurtz, President and CEO of Chan Soon-Shiong Medical Center at Windber, noted that, in his 40-year career, the past two years have been the most challenging he has seen for hospitals. The COVID-19 pandemic has significantly strained the workforce. There has been a significant increase in nurses retiring from the workforce in particular. Mr. Kurtz noted that it is difficult for rural hospitals to compete with the salaries offered by nursing agencies, whose rates of about \$150 or more per hour for visiting nurses far exceed the roughly \$40 rates that are traditionally paid to hospital staff nurses. He hoped that more government action could be taken to motivate health care professionals to work in rural settings. Along with the other panelists, Mr. Kurtz stressed the value of telehealth to help hospitals provide quality care in rural communities. He noted that Windber Hospital is part of the Pennsylvania Rural Health Model, which is an alternative payment model designed to address the financial challenges faced by rural hospitals by transitioning them from fee-for-service to global budget payments. Participation in that model has allowed Windber Hospital to implement successful programs, such as remote patient monitoring where patients are treated in their homes via telehealth. He also emphasized the need for state government to issue temporary licenses for nurses and for the federal government to provide tuition assistance to those considering a career in health care.

Thank you to our speakers and panelists: Senator Gene Yaw, Center Board Chairman; Dr. Nancy Falvo, Center Board Treasurer, and retired faculty at Clarion University of Pennsylvania; Joanne Corte Grossi, AARP Pennsylvania State President; Steven Ross, Special Assistant to the Secretary, Pennsylvania Department of Drug and Alcohol Programs; Dr. Omrana Pasha-Razzak, Professor of Medicine and Public Health Sciences and Attending Physician, Penn State Hershey Medical Center and Penn State College of Medicine; Thomas Kurtz, President and CEO, Chan Soon-Shiong Medical Center at Windber; and Lisa Davis, Director, Pennsylvania Office of Rural Health.

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