



VISION OF RURAL HEALTH IN MINNESOTA

Minnesota Rural Health Association is missioned to strengthen the health, health care, and well-being of rural Minnesotans. In staying true to our mission, we believe a rural health system that best serves the people who live in, work in, learn in, and visit rural Minnesota should:

- Focus on prevention, primary care, chronic disease management, and medical services to improve health.
- Provide access to health services within a reasonable distance and time of travel.
- Encourage collaborative local and regional solutions for patient-centered delivery of service.
- Place an emphasis on quality and patient safety.
- Promote operational efficiencies that contain cost and provide value to the patient.
- Embrace the use of technology to expand access and involve patients in their care.
- Fairly reimburse for services to ensure providers have the resources they need to sustain and thrive.
- Develop a standardized system to assess Social Determinants of Health and refer vulnerable rural residents to resources designed to reduce preventable health conditions and health care utilization.

2022 POLICY PRIORITIES

- **Workforce** – Rural Minnesota has struggled for years to recruit and retain an adequate health care workforce. The COVID-19 pandemic only made this tougher. All efforts need to be made to retain the current workforce and recruit the workforce of the future.
- **Emergency Medical Services** – It is becoming increasingly difficult for ambulance services to respond to emergencies across rural Minnesota. Workforce shortages, out of area transports, and increasing financial needs have contributed to these challenges. Support for the basic functions of ambulance services and encouraging deeper health care integration is needed.
- **Telehealth** – The use of telehealth in rural Minnesota is dependent on quality broadband, provider engagement, and patient acceptance. Investments in broadband for those who are unserved and underserved in conjunction with support for providers and patients will provide access for rural Minnesotans for years to come.
- **Long-term & End of Life Care** – Care in rural Minnesota has become increasingly difficult. Financial strains and a depleted workforce have limited admissions, hospice care has been suspended, forcing persons to seek care outside their community, or forgo services altogether. An immediate investment in the training of the workforce and reimbursement is needed to continue providing services close to home.