

Challenges in Rural Communities



New York State Comptroller
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Rural New York: Challenges and Opportunities

September 2023

“Demographic and other changes pose difficulties for local and state officials as they look for policies to boost communities and increase connectivity and access to health care and other services.

While many of the issues faced by rural New Yorkers are similar to those faced in more urban areas, solutions that are effective in urban communities may not be well suited to rural ones.”

- Comptroller Thomas P. DiNapoli



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Overview

- Rural challenges rooted in:
 - **Geography**: Low population densities across vast terrain
 - **Demographics**: Population decline; aging
 - **Economies**: Stagnant jobs; shrinking labor force
 - **Lack of connectivity**: Reliance on personal vehicles; little to no broadband connection



Selected Challenges



Housing

Declining Units
High Vacancy Rates



Broadband

Low Rates of
High-Speed Service



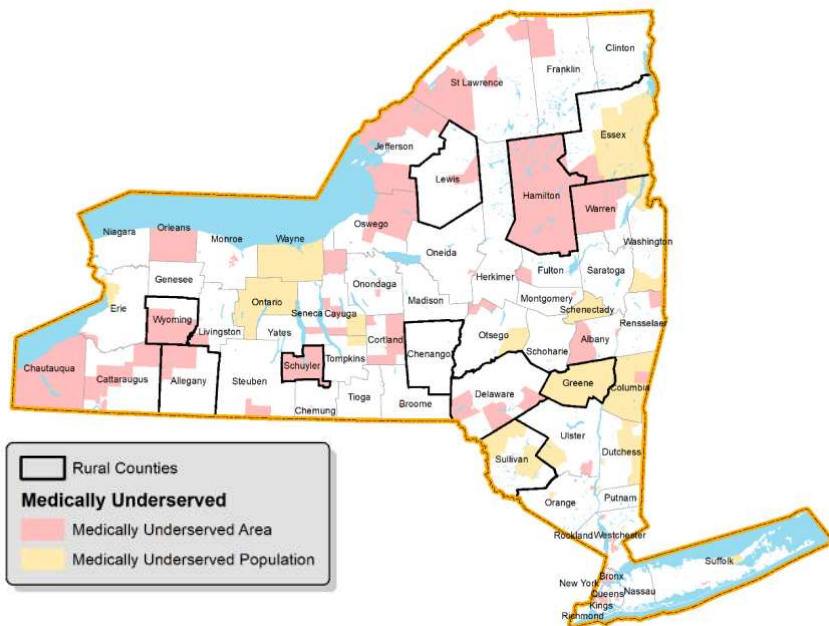
Health

Access to
Care and Food



Accessing Health Care

Underserved Areas & Populations



- Health professional shortages in all rural counties examined
- Medically underserved areas and populations in rural counties examined (except Chenango)
- Some counties without hospitals; hospitals that exist may have had to reduce services
- EMS provision also challenging

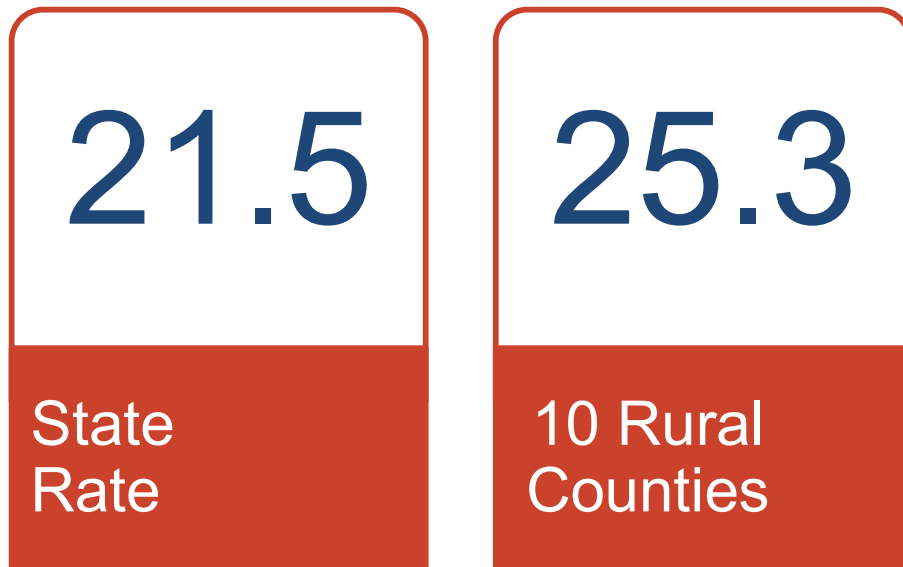
Source: U.S. Health Resources & Services Administration



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Accessing Drug & Alcohol Treatment

Death Rate Per 100,000



In 10 Rural Counties:

- Higher admissions rate to opioid treatment programs
- No OASAS-certified opioid *outpatient* treatment programs in counties
- Of 56 *crisis* programs, 1 in Sullivan County with 6-person capacity
- Of 65 *inpatient* programs, 1 in Delaware County with 10-person capacity
- Only Allegany (17 beds), Greene (12 beds), and Sullivan (186 beds) have residential treatment programs



Conclusions

- Many current policies do not adequately accommodate the circumstances specific and unique to the rural communities
- While economies of scale may be difficult to achieve for some services, improved connectivity, both digital and physical, can help mitigate many challenges



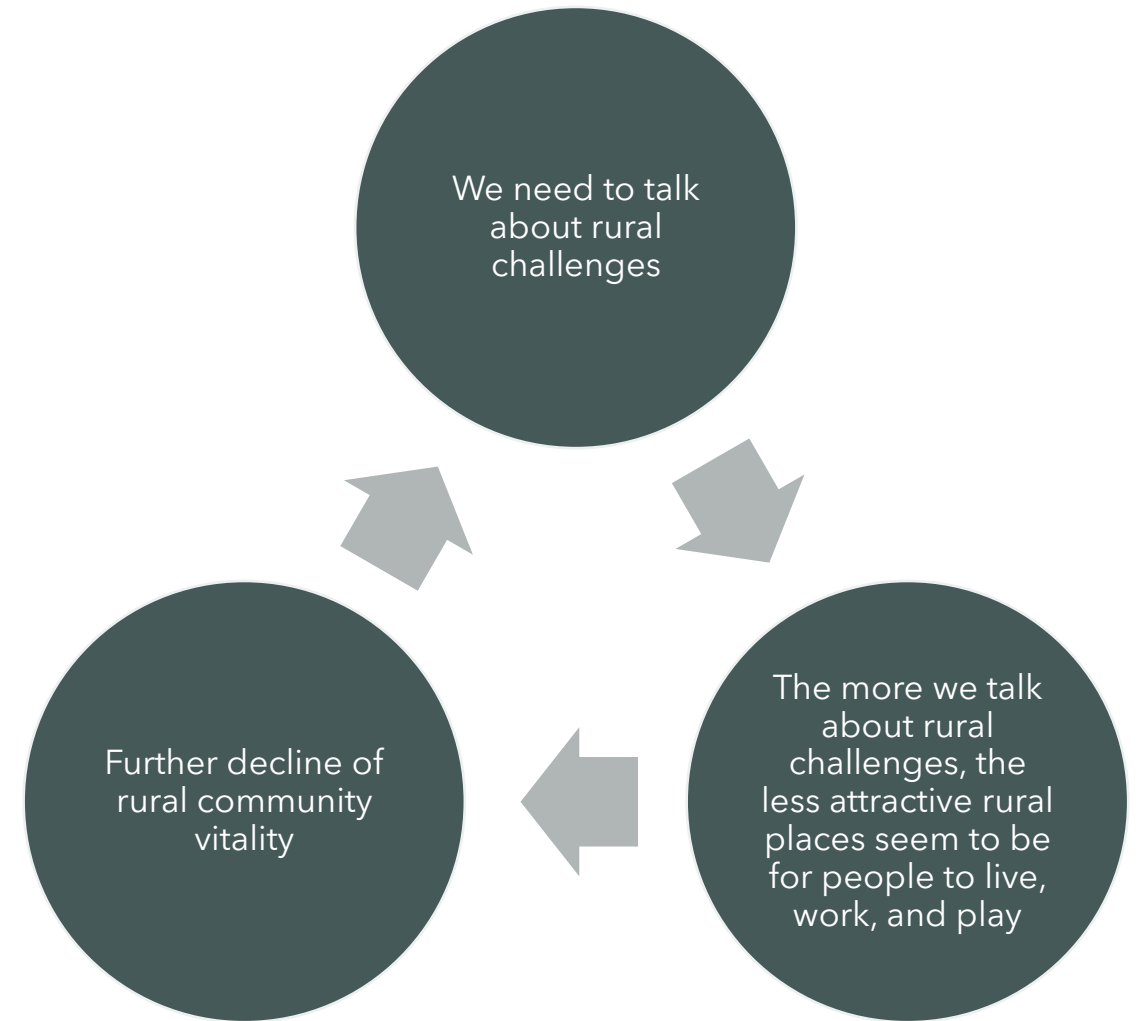
New York State Association for Rural Health

Alison Coates, MS, MBA, PhD(c)

Vice President



The deficit perspective harms rural communities



Perennial Challenges

Access to care

Health
workforce

Transportation

Broadband
and cellular
availability

Emergency
Medical
Services

Infrastructure

Root Challenge:

Our health system has evolved to reward a set of assets that don't align with the strengths of rural communities.

Resourcefulness
Innovativeness
Tenacity
Social Capital



We need opportunities to build solutions that make sense for our communities



“

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NYS Structures and Programs in Support of Rural Health

CLAIRE PARDE, EXECUTIVE DIRECTOR, THE HEALTHCARE CONSORTIUM

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NYS Structures focused on Rural Health

- The Rural Health Council
- Legislative Commission on Rural Resources
- Charles D. Cook Office of Rural Health

Rural Health Council

The Rural Health Council is responsible for advising the Commissioner of NYSDOH with respect to all aspects of rural health care and rural health care delivery including, but not limited to, the impact of proposed programs, statutes, regulations and health care reimbursement policies.

Currently being reconstituted to comply with legislation that changed the way in which members are appointed.

Expectation is that the first organizational meeting will occur by the end of 2023 calendar year or early in 2024.

Legislative Commission on Rural Resources

Established by the New York State Legislature in 1982

This bipartisan Commission is charged with examining the impact of rural resources on the State's economy, reviewing existing laws and regulations as they relate to rural resources, and assessing the effectiveness of programs designed to promote rural viability

The 10-member Commission includes five State Senators and five members of the Assembly, who shape the agenda of the Commission to sponsor legislation, recommend policy, and promote efforts to enhance and protect New York's rural resources to benefit rural communities.

Office for Rural Health

The repository with NYSDOH for all rural health policy and programs aimed explicitly at improving health in NY's rural places

Oversees the following programs:

- Rural Health Network Development Program (RHNDP)
- Rural Health Care Access Development Program (RHCADP)
- The New York State Rural Hospital Flexibility Program
- Small Hospital Improvement Program

Rural Health Care Access Development

- The Rural Health Care Access Development Program provides funds to the State's **44 rural hospitals** to help them (1) reduce duplication of services, (2) improve operational efficiencies and (3) develop affiliations with community-based providers.
- Objectives are to:
 - plan for or implement the conversion or diversification of underutilized acute care beds;
 - plan or implement projects that diversify hospital services;
 - plan and/or implement activities for improving cost efficiencies;
 - develop long-term finance or resource plans for the hospitals;
 - integrate services with other hospitals and community-based providers;
 - further strengthen rural health networks statewide.

Rural Hospital Flexibility Program (RHFP)

- The purpose of the program is to ensure that NY's 18 Critical Access Hospitals (CAHs) successfully address the health care needs of their communities
- This program focuses on:
 - implementing programs and educational forums to improve financial and clinical performance for CAHs
 - improving collaboration and cooperation between hospitals and providing resources and technical assistance directly to CAHs
 - This work is done through **the New York State Critical Access Hospital Performance Improvement Network**, which is facilitated by the Office of Rural Health and includes participation from all 18 CAHs

Small Hospital Improvement Program

- The Small Rural Hospital Improvement Grant Program (SHIP) helps **rural hospitals** meet **value-based payment** and **care goals** for their respective organizations through purchases of hardware, software, and training. 22
- SHIP also:
 - enables small rural hospitals to become or join accountable care organizations (ACOs);
 - participate in shared savings programs; and,
 - purchase health information technology (hardware and software), equipment, and/or training to comply with quality improvement activities, such as advancing patient care information, promoting interoperability, and payment bundling.

Rural Health Network Development Program

- The Rural Health Network Development Program provides funding to develop formal networks of health and human service providers in various rural communities throughout the state
- These networks identify strategies to strengthen local healthcare and public health systems
- Currently, there are 32 Rural Health Networks in the state, collectively serving most of NY's rural counties
- Rural Health Networks are a ready-made vehicle for responding to the pressing needs of our State's rural communities by developing "homegrown" solutions that rely on their intimate knowledge of place and leverage local relationships

Office of Rural Health

The Office of Rural Health also works very closely with the Department's Division of Workforce Transformation and the newly created Office of Healthcare Workforce Innovation (both within the Center for Health Care Policy and Resource Development) on policies and programs to increase the number of health care workers in underserved and rural communities.

Additionally, the Office of Rural Health works with the Office of Public Health and the Office of Health Equity and Human Rights on their various programs and initiatives to provide input on issues that are specific to rural communities.