

Senator Herb Kohl's Health Care Reform Advisory Committee

Talking Points by Tim Size for the Rural Wisconsin Health Cooperative Marshfield Clinic Boardroom, 1000 North Oak, Monday, June 29th, 2009, 1:30 p.m. – 2:30 p.m.

I. Three Rural Health Priorities

Assure Local Access to Quality and Cost Effective Care

• We believe that if a Wisconsin community has available local providers, health plan enrollees should not be forced to travel beyond that community because the health plan refuses to contract with local providers, when those providers would accept a contract with financial and quality terms comparable to other providers with whom the health plan contracts.

Address Forecasted Health Workforce Crisis in Both Rural and Urban Communities

- Make sure promoting diversity in the health workforce addresses the unique recruitment and education needed for rural and inner-city practice.
- The expansion and/or reallocation of resources that currently go into Graduate Medical Education needs to be made more flexible so as to include both new rural training tracks and rural rotations.

Make Workplace Wellness and Healthy Communities a National Priority

 Reform must help individuals and communities to become healthier, to not need as much health care. Rural patients face the most daunting of health care challenges: they are older, poorer and sicker. Rural America is less healthy due to too much smoking, drinking and eating, and too little exercise, education, jobs and income.

II. Key Threats to Rural Health in Current Congressional Reform Proposals

- Failure to Recognize and Incent High Quality and Appropriate Utilization
- Assuming that Medicare Payment Levels Can Sustain the Rural Health Safety Net
- Congress Relinquishing It's Role to the Medicare Payment Advisory Committee
- Experimenting with Bundled Payments in Rural Communities Without Prior Testing
- Readmission Rates and Penalties that Ignore the Limited Resources of Rural Communities
- Rural Providers Not Being Given a Fair Chance to Demonstrate the Quality of Their Care
- Inequitable Access to Capital for Health Information Infrastructure
- Eliminating Rural Hospitals' Key Justification for Tax-Exemption