

March 9, 2022

The Honorable Sam Graves U.S. House of Representatives Washington, D.C. 20515

The Honorable Jared Huffman U.S. House of Representatives Washington, D.C. 20515

Dear Representatives Graves and Huffman,

On behalf of the American Academy of Family Physicians (AAFP) and the 127,600 family physicians and medical students across the country we represent, I write to offer our support for the Save America's Rural Hospitals Act (H.R. 6400).

Your legislation includes provisions that would permanently raise Medicaid primary care payments for rural physicians to Medicare levels, allow Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) to continue providing telehealth services beyond the public health emergency (PHE), and permanently raise payment for telehealth services provided by FQHCs and RHCs to be equal to payment for in-person services. This legislation is critical to support clinicians in rural communities and ensure their patients have timely access to comprehensive health care.

In rural areas, about 42 percent of visits Americans make to their physicians are to family physician offices. With their extensive breadth of training, family physicians provide a significant amount of emergency care in rural areas and are some of the best equipped to coordinate and maintain care continuity for these populations through regular visits. Our rural physicians who work in hospitals or refer patients to them need adequate payment and support to be able to continue doing so.

Low Medicaid physician payment rates have historically been a barrier to health care access for Medicaid enrollees and with the COVID-19 pandemic, the demand for primary care physicians in Medicaid is more acute than ever. Your legislation to permanently raise Medicaid primary care payments for rural physicians will ensure physicians have adequate resources to care for Medicaid patients and help alleviate barriers to care for these patients most in need.

Rural areas are home to about 21 percent of the U.S. population and have been medically underserved for decades. Rural residents often must travel long distances to access health care, and when they do find care, often face additional barriers such as affordability/costs, denial of care based on insurance status, and poor health literacy. The pandemic has only heightened the health disparities rural patients experience compared to urban- and suburbanresiding patients.

Unfortunately, the closure of FQHCs, RHCs, and critical access hospitals has made it even more difficult for rural patients to access health care. This affects where our family physicians can treat or refer their patients for care, interrupts care continuity, and risks worse health outcomes. The AAFP supports initiatives that ensure financial stability and delivery system

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support for physicians serving rural communities to eliminate longstanding disparities in access to quality care for all populations, which also includes support for the hospitals our rural physicians are employed in. Your legislation will ensure that patients in rural communities continue to have access to in-person and virtual outpatient care and hospital care.

Thank you for introducing legislation to strengthen our health care system and address health disparities in rural communities. If you have any questions, please contact Erica Cischke, Director of Legislative and Regulatory Affairs, at ecischke@aafp.org.

Sincerely,

Ada D. Stewart, MD, FAAFP

Board Chair, American Academy of Family Physicians