



ABOUT NOSORH

The **National Organization of State Offices of Rural Health (NOSORH)** was established in 1995 to assist State Offices of Rural Health in their efforts to improve access to, and the quality of, health care for America's 61 million rural citizens.

All 50 states maintain a State Office of Rural Health (SORH). Although each office varies by size, scope, organization and services/resources provided, each SORH helps rural communities in their state build effective healthcare delivery systems. Funding levels and sources also vary; however, each SORH receives a portion of its funding through the federal Office of Rural Health Policy. With this funding, SORHs are expected to:

- Collect and disseminate health-related information;
- Coordinate state rural health resources and activities;
- Provide technical assistance;
- Encourage the recruitment and retention of health professionals; and
- Strengthen state, local, and federal partnerships.

NOSORH enhances the capacity of SORHs and their partners to fulfill these objectives by supporting the development of state and community rural health leaders; creating and facilitating state, regional and national partnerships that foster information sharing and spur rural health-related programs and activities; and helping communities create a healthy rural America by enhancing access to quality healthcare services. NOSORH is especially interested in efforts that strengthen each state's ability to:

- Expand the rural healthcare workforce;
- Offer easily accessible, quality health care to the uninsured;
- Reduce oral and behavioral health disparities in rural communities;
- Enhance the delivery of rural emergency medical services;
- Improve the status of small rural hospitals; and
- Invest in, and expand the reach of, health information technology.

NOSORH works in partnership with the federal Office of Rural Health Policy and conducts regional and annual meetings of SORHs and their partners, broadcasts regular webinars on rural health issues, conducts learning institutes to promote leadership and grant writing skills.

Associate memberships are available to partners of the organization and the State Offices of Rural Health. For more information about associate membership or any programs please check our website at nosorh.org.

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NOSORH Legislative Fact Sheet and Requests

NOSORH supports the platform of the National Rural Health Association and provides the following information for the specific support of State Offices of Rural Health and Rural Health Clinics.

Fact: Rural healthcare systems are in a fragile state. The healthcare needs of rural populations and communities are constantly evolving; they are increasingly affected by accessibility issues, fewer healthcare providers, aging populations and growing numbers of un- and underinsured citizens. Rural communities must have the flexibility, control and support they need to implement systems and approaches that address the healthcare needs of their communities.

Fact: Rural areas are distinctly different than urban areas. Rural areas in each state are distinctly different than those in other states – rural Montana is not the same as Rural Arizona or Rural Florida. Rural areas also are distinctly different *within* states – rural communities in northeastern Pennsylvania are distinctly different than those in southwestern Pennsylvania, for example.

Fact: The Federal Government has a strong public policy interest in ensuring that residents of rural communities have access to quality health care and health information. However, these healthcare needs can't be addressed through a "one size fits all" approach – programs and policies must be flexible enough to enable states to identify and address the unique needs of their rural residents.

- **State Office of Rural Health Program:** The State Office of Rural Health Program creates a focal point within each State for rural health issues and links communities with State and Federal resources to help develop long-term solutions to rural health problems.

All 50 states maintain a State Office of Rural Health. These offices have a rich history of developing partnerships; creating and delivering programs; and providing resources and assistance that help meet the healthcare needs of rural Americans. State Offices of Rural Health provided technical assistance to 29,920 clients in rural communities during the 2009-2010 fiscal year.

NOSORH calls for the reauthorization of the State Office of Rural Health program to ensure anchors of information and federal, state and local collaboration in all 50 states of the nation.

- **Certified Rural Health Clinics:** Nearly 4,000 certified rural health clinics around the nation provide care to millions of Americans in their hometown.

Certified Rural Health Clinics (RHCs) are key safety net providers of care, ensuring access for primary care services to Medicaid and Medicare patients. Reimbursement to rural health clinics is unique from other safety net providers. Under existing policies professionals practicing in certified RHCs are not eligible for electronic health record and quality improvement incentives under Medicare.

NOSORH calls for the support of HR 3548 to amend title XVIII of the Social Security Act and allow for certified RHCs to be eligible for these incentives.

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