

June 27, 2022

The Honorable Patty Murray
Chair
Labor-HHS-Education Subcommittee
United States Senate

The Honorable Roy Blunt
Ranking Member
Labor-HHS-Education Subcommittee
United States Senate

Dear Chair Murray and Ranking Member Blunt:

Nearly 60 million Americans live in a rural area. There are significant health disparities that rural Americans face, and while the Centers for Disease Control and Prevention (CDC) has undertaken efforts to address the challenges facing rural Americans, there is no centralized entity within CDC tasked with this work. As we continue to advocate for rural visibility and work towards reducing rural health disparities, the undersigned organizations urge you to appropriate adequate resources to establish and operate an Office of Rural Health within the CDC.

The COVID-19 pandemic further underscored the structural barriers to addressing healthcare needs in rural communities. To address these longstanding disparities, we need targeted, sustainable funding for an Office of Rural Health at the CDC to help support rural public health agencies and workers support their communities.

In recent years, the CDC has acknowledged the health challenges and disparities routinely encountered by the nearly 60 million Americans that call rural home. These have become increasingly evident as structural barriers to addressing rural health needs have become more apparent. Creating an Office of Rural Health at the CDC will ensure rural communities are adequately represented. The Office of Rural Health would serve as the primary point of contact for CDC on rural health matters as well as assist in data collection and funding dissemination needs.

We urge you to focus on the health and disparities faced by rural Americans by appropriating adequate resources to establish and operate a CDC Office of Rural Health. The COVID-19 pandemic has shown starkly that public health support in rural populations is behind that of their urban counterparts. A sustained commitment to transform rural public health support including mental and behavioral health treatment will ultimately improve not only how rural public health agencies can serve their communities through the end of the COVID-19 public health emergency, but also how they serve and better the health outcomes moving forward and prepare for future public health crises.

Thank you for your consideration of this important issue. If you have any questions, please contact Carrie Cochran-McClain at ccochran@ruralhealth.us or Josh Jorgensen at jjorgensen@ruralhealth.us.

Sincerely,

National Rural Health Association

American Academy of PAs

American Association of Nurse Anesthesiology

American Association of Nurse Practitioners

American College of Nurse-Midwives

American Optometric Association

American Physical Therapy Association

American Podiatric Medical Association

American Psychological Association

National Association of Pediatric Nurse Practitioners

National Association of Rural Health Clinics

National League for Nursing