



March 4, 2022

Dr. Luis Padilla  
Associate Administrator for Health Workforce  
Health Resources and Services Administration  
5600 Fishers Lane  
Rockville, MD 20857

Dear Dr. Padilla,

On behalf of the National Rural Health Association (NRHA), I write to express concerns with the number of Health Professional Shortage Areas (HPSA) being designated for withdrawal by the Health Resources and Services Administration (HRSA). Since HRSA's announcement proposing HPSAs for withdrawal, we have heard significant concerns from members around the country on the impact this will have on ability to access health care providers through programs such as the National Health Service Corps and the J-1 Visa program.

NRHA is a non-profit membership organization with more than 21,000 members nationwide that provides leadership on rural health issues. Our membership includes every component of rural America's health care, including rural community hospitals, critical access hospitals, doctors, nurses, and patients. We provide leadership on rural health issues through advocacy, communications, education, and research.

As you know, HPSA status is one of the primary indicators used nationally to identify areas with shortages of primary care and dental or mental health professionals. Because HPSA designation carries such heavy weight in allocation of resources from various HRSA workforce programs, our members have significant concerns with the large swath of HPSAs being proposed for withdrawal.

Further, the timing of HPSA withdrawals has also caused significant heartburn for many of our members. Workforce shortages have plagued rural providers for years, pre-dating the COVID-19 pandemic. Unfortunately, the onslaught of the pandemic has only exacerbated workforce shortages due to provider burnout, early retirement, and siphoning of traveling nurses. Many of the communities having their HPSA proposed for withdrawal are already experiencing significant workforce shortages and are reliant on programs like the National Health Service Corps, the Nurse Corps Loan Repayment Program, and the J-1 Visa program to rebound beyond the COVID-19 pandemic. In many places across the country, rural providers, and their Primary Care Offices (PCO) are still combating and responding to the COVID-19 pandemic, thus administrative abilities remain burdened, potentially resulting in delays in data collection and dissemination.

**NRHA urges HRSA to provide transparency, flexibility, and technical support on the de-designation process, including clarifying timing on notification and effective dates of the withdrawal and redesignation processes.**

Many of our members are unsure of the process HRSA used to propose HPSAs for withdrawal and are unclear as to when notifications will be formalized. NRHA believes it may be helpful for the Bureau of Health Workforce to share information reminding providers of the HPSA update process and what data



is used to make these determinations. Further, additional technical support may be needed to ensure providers and state PCOs understand how data has changed due to COVID-19 and how additional data for resignation can be submitted. NRHA would be happy to work with staff at HRSA to share information and/or cohost a webinar on the topic, as well as gather questions and input from stakeholders to ensure clarity on this critical issue before HPSAs are filed for withdrawal.

**NRHA requests ample time for providers to apply for redetermination and for HRSA to maintain HPSA status as-is until the redetermination process is complete.**

Given the current uncertainties emerging from the COVID-19 pandemic, NRHA requests ample time to ensure the most accurate data is used for the designation process. COVID-19 underscores the need for this process to be extended to ensure rural providers who have legitimate data to object to their HPSA withdrawal can. As such, NRHA requests that providers have until at least July 1, 2022, to present additional data for HRSA to consider in the redetermination process. While HRSA considers additional data and information, NRHA requests HPSA status remains intact until the redesignation process is complete. This will provide for continuation of services and ensure providers are able to continue growing and recruiting a necessary workforce.

NRHA appreciates the work HRSA is doing to ensure rural providers have the health care workforce resources they need to ensure access to care in their communities. NRHA looks forward to our continued collaboration to ensure rural providers are prepared for future crises. If you have any questions, please contact Josh Jorgensen ([jjorgensen@ruralhealth.us](mailto:jjorgensen@ruralhealth.us)).

Sincerely,

A handwritten signature in black ink, appearing to read "Alan Morgan", is positioned above the typed name.

Alan Morgan  
Chief Executive Officer  
National Rural Health Association