## June 6, 2012, Highlights of February 2012 Meeting and CMMI Policy Brief

June 6, 2012

The Honorable Kathleen Sebelius, Secretary U.S. Department of Health and Human Services 200 Independence Ave, SW Washington, D.C. 20201

Dear Secretary Sebelius,

I want to share with you highlights of the recent meeting of the National Advisory Committee on Rural Health and Human Services from February 15-17, 2012 in Washington, D.C.

Enclosed is a Policy Brief with recommendations on the Center for Medicare and Medicaid Innovation and its demonstration projects. It is our hope that the issues raised in this paper and its recommendations will help assist the Center as it works to include rural health care providers in the important effort to improve quality of care.

The increased attention being paid to rural health and human services by your staff was evidenced by the many top department officials who met with us to share their knowledge and to listen to the Committee's concerns. We appreciated hearing from Dr. Richard J. Gilfillan, the Director of the Center for Medicare and Medicaid Innovation, Dr. Howard K. Koh, the Assistant Secretary for Health, and George Sheldon, the Acting Assistant Secretary for the Administration for Children and Families. We appreciate that your interest in rural services has inspired this level of concern.

During our meeting, we also heard from Doug McKalip, M.P.P., who serves as Senior Policy Advisor for Rural Affairs at the White House Domestic Policy Council. The Committee was very moved by his personal story and concern for the availability of health care in rural areas.

One concern of Committee members has been the possible revision of the methodologies and criteria used to classify medically underserved areas/populations (MUA/Ps) and Health Professional Shortage Areas (HPSAs). The Committee reviewed the Negotiated Rulemaking Committee (NRMC) report that was sent to you in October, 2011. We also heard from Diana Espinosa, M.P.P., the Deputy Associate Administrator for the Bureau of Health Professions at

the Health Resources and Services Administration (HRSA) and Dr. Marcia K. Brand, Deputy Administrator of HRSA.

The Committee strongly supports the recommendations proposed by the NRMC on Designation of MUA/Ps and HPSAs. The recommendations are the product of months of rigorous analysis by the NRMC, and are a significant improvement over the current designation methodologies for MUA/Ps and HPSAs.

Likewise, the recommendations are supported by an overwhelming majority of the members of the NRMC, who together represent the patient populations to be most affected by any change in the designation methodology. In consideration of these circumstances, the Committee urges the Secretary to adopt the recommendations of the NRMC in the interim final rule.

In the implementation of the designation methodologies, the Committee believes it is important that the Secretary develop robust monitoring and evaluation capabilities, in order to analyze and understand the full effects, and possible unintended consequences, of the new designation methodologies. The Committee finds that monitoring and evaluation should be conducted on an ongoing basis, with mandated reporting as early as three years from the date of implementation of the interim final rule.

Thank you again for the opportunity to share highlights from our recent meeting and to raise specific concerns. We would welcome having you or your designee join us for our next Committee meeting in Kansas City, Missouri on June 18-20, 2012.

Please let us know if we can assist you in any way.

Sincerely,

The Honorable Ronnie Musgrove