## Letter to the Secretary: June 8-10, 2003, Uvalde, Texas

June 2003

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

Dear Secretary Thompson,

The National Advisory Committee on Rural Health and Human Services recently met in Uvalde, Texas June 8-10th and I wanted to share with you some of the lessons learned during our time there. The meeting afforded the Committee an opportunity to continue work on its 2004 report. That report will focus on a number of important issues including the integration of behavioral health and primary care in rural settings; access to oral health care services and how to improve services for the elderly. We continue to look forward to the challenge of expanding the focus of the Committee to examine human service issues. The 2004 report will reflect this change and we look forward to the formal announcement of the five new human service members.

The meeting in Texas also provided the Committee an opportunity to hear about a number of other important issues. Dr. Eduardo Sanchez, the Texas Health Commissioner, testified before the Committee and focused his remarks on the growing problems of obesity in our population and the dimensions of that problem in Texas. The Committee shares the Commissioner's concerns. This issue has serious implications for rural communities given associated risk factors such as low socio-economic status and high proportions of minority populations. In addition, rural areas have high rates of obesity-related diseases including diabetes and cardiovascular disease. The Committee notes that the Secretary has already made this issue a priority and commends you hosting the April 15, 2003 "Steps to a Healthier U.S." symposium and the subsequent distribution of \$15 million in grants as part of the Healthy Communities initiative. As you well know, the failure to address issues of obesity poses huge hidden costs in terms of disease burden later in life.

The obesity issue provides the Committee with a unique opportunity to focus on an issue that has both health and human service implications. The health implications, as we noted, are

obvious. However, other important programs administered by the Department of Health and Human Services also have an important role to play in helping to address this problem by emphasizing nutrition and healthy lifestyle choices that are an essential part of any wellness strategy. This topic may provide a unique opportunity for the Committee to address a crosscutting issue in the future.

As the Committee continues its work on its 2004 report topics, we continue to be concerned about the problems posed by restrictive scope of practice laws for health care professionals. These issues have come up time and again as the Committee hears testimony and gathers information for the report chapters that will focus on behavioral health-primary care integration and access to oral health services. The Committee also looks forward to working with staff from the Administration on Children and Families and the Administration on Aging. This will help inform the Committee's efforts to see how the Department's programs focusing on the elderly meet the need in rural America.

The Committee also wants to note that while in Uvalde it had the opportunity to visit a community health center, Community Health Development, Inc. During that site visit, the Committee saw firsthand the benefit of the Administration's effort to increase the number of community health center access points. This health center is a key access point within this South Texas community and has been for 20 years. It has expanded from one site to three to meet the needs of the community. The Committee was particularly impressed with the oral health services provided by the clinic. Given the great need for improving access to oral health services in rural America, this clinic may serve as an excellent model. As the Administration's health center expansion continues, the Committee expresses its support for this activity but also urges the Secretary to ensure that as health centers expand, they coordinate with the existing health care delivery system in vulnerable rural areas. This will ensure the continued viability of all essential health care providers as well as other key community organizations in the community.

The Committee meets again in Charleston, West Virginia September 7-9th to continue its work on the 2004 report. This meeting will afford the Committee an opportunity to meet with local providers and service providers and gather a local perspective on the 2004 topic areas. We look forward to hearing the Department's response to the 2003 report focusing on health care quality issues in rural America. Thank you for your support of this Committee and for addressing health and human service issues in rural communities.

Sincerely,

The Honorable David M. Beasley Chair