



Rural Hospital Closings In Missouri Reach Critical Level

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(NAPSA)—Rural health care is in a nationwide crisis, and it is no more evident than right here in Missouri. Just last month, the Twin Rivers Regional Medical Center in Dunklin County closed for good, forcing many residents to drive more than an hour to the closest hospital.

According to the NC Rural Health Research Program at the University of North Carolina at Chapel Hill, 86 rural hospitals have closed since 2010, and, according to iVantage's The Hospital Vulnerability Index, 673 are at risk nationally. Besides Twin Rivers, the state of Missouri has lost the Southeast Health Center in Ellington (2016), the Parkland Health Center (formerly Mineral Area Regional Medical Center) in Farmington (2015) and the Sac-Osage Hospital in Osceola (2014). In addition, four other health care facilities outside the research program's definition of hospital have closed as well.

Think about a pregnant woman who goes into premature labor in the middle of the night, someone involved in a life-threatening accident or who has had a stroke where treatment is needed in minutes...and the closest medical care center is more than 50 miles away.

"Medical help is growing dangerously distant...in rural America," wrote Jack Healy recently in *The New York Times*. "Specialists are increasingly clustered in bigger cities."

In Missouri, nearly 2 million people live in rural areas and for them air ambulances increasingly serve as a bridge to critical care. According to a 2017 report from the Association of Air Medical Services (AAMS), "75 percent of air medical Medicare transports are designated as rural" and an air ambulance is often the difference between life and death.

As vital as air medical transport is for millions of rural residents, the service is coming under increasing pressure from Washington in reaction to reports of individuals being surprised by enormous bills, some more than \$30,000. The real problem with cost isn't gouging air ambulance companies but rather that Medicaid and Medicare are still reimbursing based on rates set 20 years ago that don't line up with the cost of operating flying ambulances in 2018. Additionally, some private insurance companies use the government rate as the basis for payments, which is often far below the cost of providing the service.

Our own Senator Claire McCaskill



Air ambulances get critically ill Missourians to the medical help they need when they need it.

(D-MO) has introduced a bill that attempts to control costs, but it could have negative unintended consequences. This bill aims to change 40 years of standardized, federal government regulation by allowing states to individually oversee the medical portion of flights.

"State regulation might sound like a good idea, but to those of us who live this every day we know it isn't," said Bill Patt, EMS director for Steelville Ambulance. "This patchwork quilt of regulations, coupled with Medicare reimbursement rates falling way below the 50 percent range, will cause more harm than good, forcing air ambulance companies to close bases that are the only connection between our community and advanced medical care. We need solutions, not more red tape making it harder for patients to get the critical care they need."

Unlike air ambulances, ground ambulances are regulated by individual states, and while one might assume that states have agreements in place allowing for interstate transport, many do not.

More than 90 percent of air ambulance transports are with patients suffering from cardiac arrest, strokes or severe trauma, so getting them to the closest, most appropriate medical facility is critical to saving lives. According to AAMS, nationally, 30 percent of all air ambulance flights are rural, but that figure is more than 50 percent here in Missouri.

Rural health care is in crisis as the epidemic of hospital closings, like Twin Rivers in Kennett, clearly shows.

"Air ambulances are helping to fill the gap in getting critically ill, rural patients to the medical care they need," said Seth Myers, president of Missouri-based Air Evac Lifeteam. "Instead of trying to change the uniform system of national regulation that allows patients to be transported to the facility they need, regardless of where it is located, the government needs to focus on the bigger issue, which is outdated Medicare and private insurer reimbursement rates."