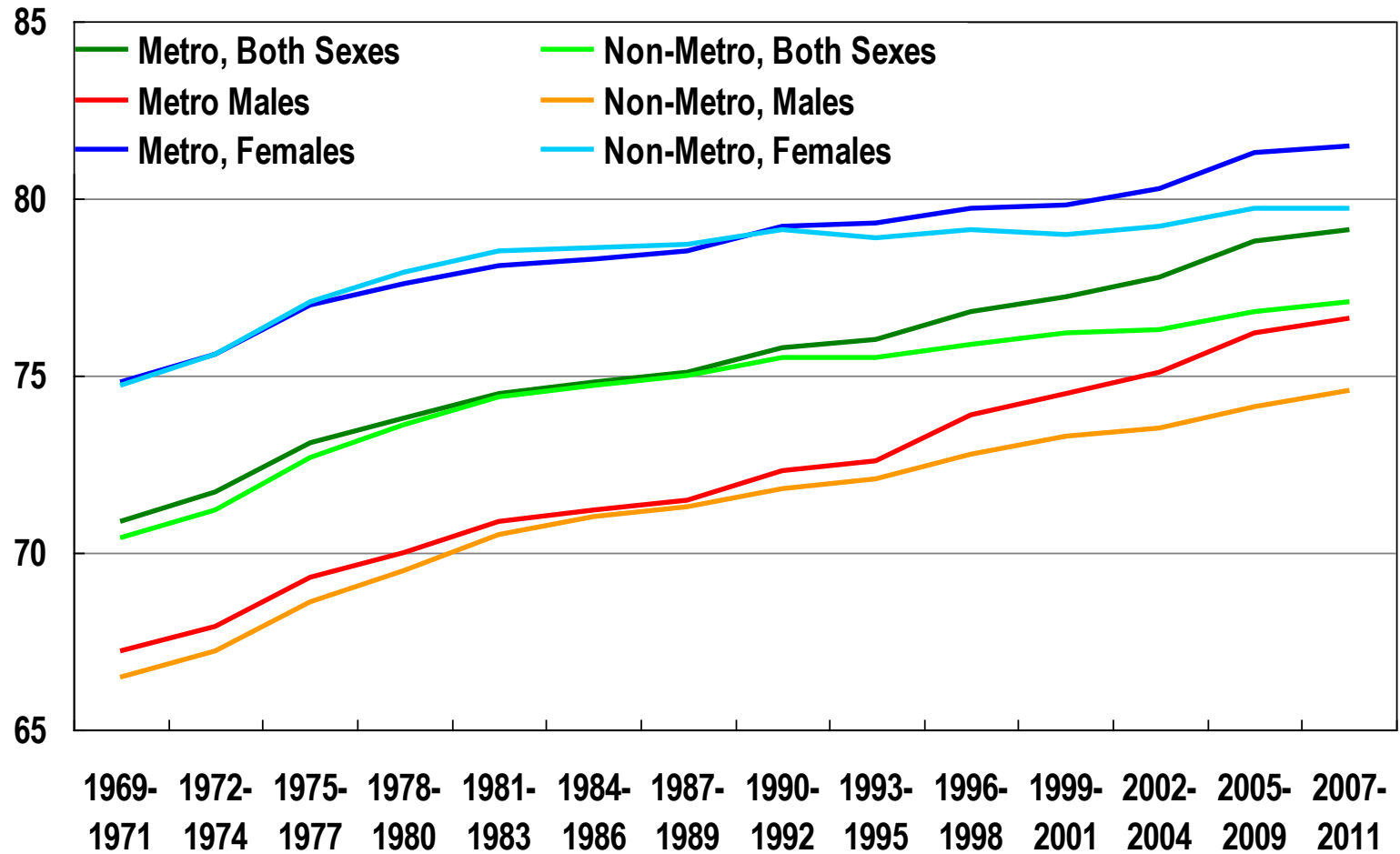
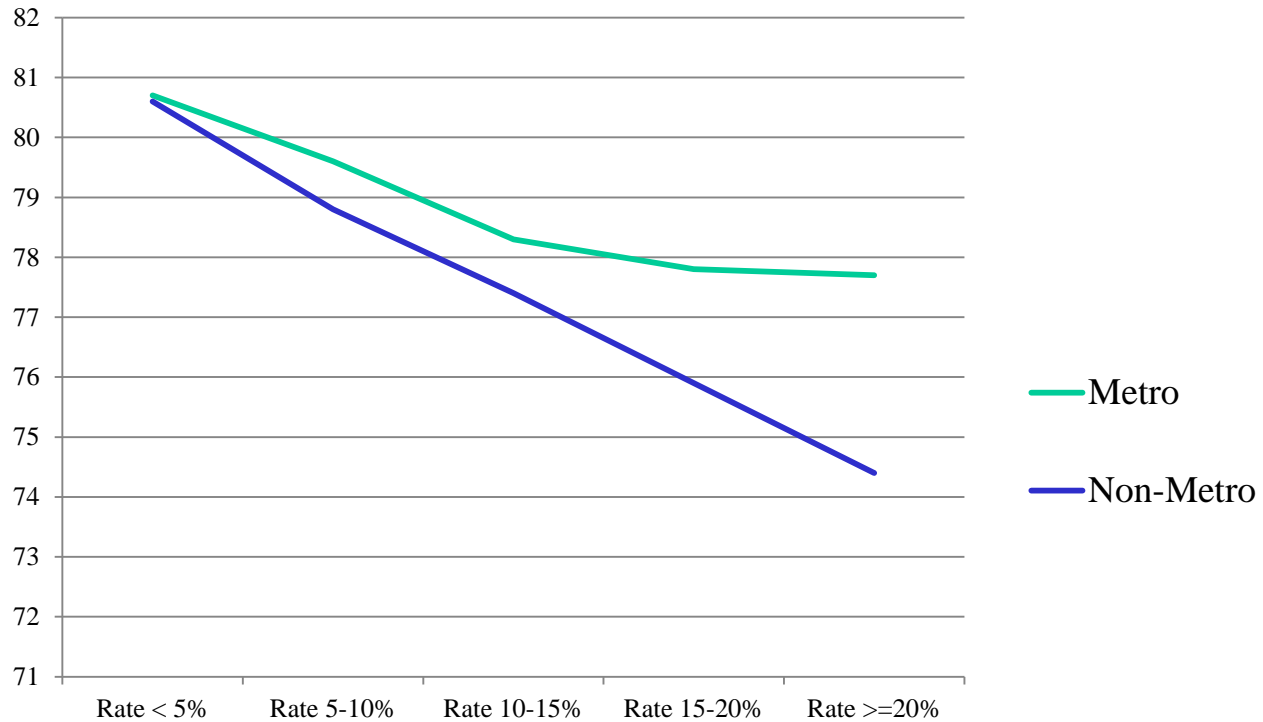


Trends in Life Expectancy at Birth (Years) in Metropolitan and Non-Metropolitan Areas of the United States, 1969-2011



Source: Singh GK, Siahpush M. American Journal of Preventive Medicine. 2014;46(2):e19-e29 (updated data)

Life Expectancy (years) by Poverty Level, U.S., 2005-2009

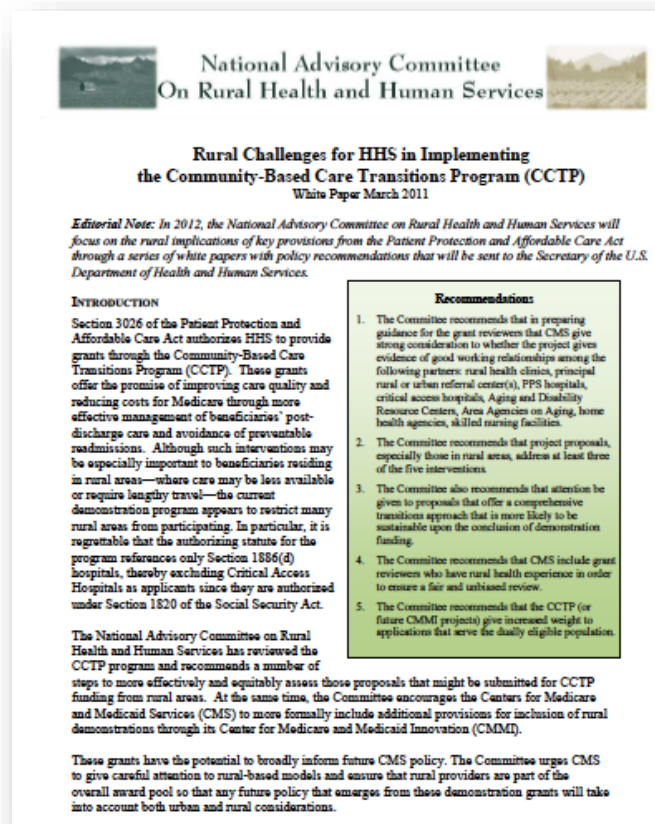


Poverty level measured as percent of 2000 Census county population below the Federal poverty level. Source: Based on updated data reported by Singh GK, Siahpush M. American Journal of Preventive Medicine. 2014;46(2):e19-e29.

Another Policy Voice

The National Advisory Committee on Rural Health & Human Services

- Policy Briefs and Recommendations Available online



**National Advisory Committee
On Rural Health and Human Services**

**Rural Challenges for HHS in Implementing
the Community-Based Care Transitions Program (CCTP)**
White Paper March 2011

Editorial Note: In 2012, the National Advisory Committee on Rural Health and Human Services will focus on the rural implications of key provisions from the Patient Protection and Affordable Care Act through a series of white papers with policy recommendations that will be sent to the Secretary of the U.S. Department of Health and Human Services.

INTRODUCTION

Section 3026 of the Patient Protection and Affordable Care Act authorizes HHS to provide grants through the Community-Based Care Transitions Program (CCTP). These grants offer the promise of improving care quality and reducing costs for Medicare through more effective management of beneficiaries' post-discharge care and avoidance of preventable readmissions. Although such interventions may be especially important to beneficiaries residing in rural areas—where care may be less available or require lengthy travel—the current demonstration program appears to restrict many rural areas from participating. In particular, it is regrettable that the authorizing statute for the program references only Section 1856(d) hospitals, thereby excluding Critical Access Hospitals as applicants since they are authorized under Section 1820 of the Social Security Act.

The National Advisory Committee on Rural Health and Human Services has reviewed the CCTP program and recommends a number of steps to more effectively and equitably assess those proposals that might be submitted for CCTP funding from rural areas. At the same time, the Committee encourages the Centers for Medicare and Medicaid Services (CMS) to more formally include additional provisions for inclusion of rural demonstrations through its Center for Medicare and Medicaid Innovation (CMMI).

These grants have the potential to broadly inform future CMS policy. The Committee urges CMS to give careful attention to rural-based models and ensure that rural providers are part of the overall award pool so that any future policy that emerges from these demonstration grants will take into account both urban and rural considerations.

Recommendations:

1. The Committee recommends that in preparing guidance for the grant reviewers that CMS give strong consideration to whether the project gives evidence of good working relationships among the following partners: rural health clinics, principal rural or urban referral center(s), FFS hospitals, critical access hospitals, Aging and Disability Resources Centers, Area Agencies on Aging, home health agencies, skilled nursing facilities.
2. The Committee recommends that project proposals, especially those in rural areas, address at least three of the five interventions.
3. The Committee also recommends that attention be given to proposals that offer a comprehensive transitions approach that is more likely to be sustainable upon the conclusion of demonstration funding.
4. The Committee recommends that CMS include grant reviewers who have rural health experience in order to ensure a fair and unbiased review.
5. The Committee recommends that the CCTP (or future CMMI) projects give increased weight to applications that serve the dually eligible population.

The Role Played by Rural Research



The screenshot shows the Rural Health Research Gateway website. The header includes the site title, navigation links for 'About' and 'Contact Us', and social media icons for RSS and Facebook. A search bar is located in the top right. The main content area features a large banner with the text 'connecting research to diverse audiences' and an image of a family in a field. Below the banner are three columns: 'Research Alerts' with a list of links (E-mail, RSS Feed, Facebook), 'Rural Health Research Centers' with a welcome message and a link to learn more, and 'Featured Resources' with two links to reports. The footer contains a comprehensive list of navigation links.

Rural Health Research Gateway

connecting research to diverse audiences

Research Alerts
Stay on top of the latest federally-funded rural health research:

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Rural Health Research Centers
Welcome to the Rural Health Research Gateway. This site provides access to publications and projects funded through the federal [Office of Rural Health Policy \(ORHP\)](#) as part of the [Rural Health Research Centers and Analysis Initiatives grant program](#).
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Featured Resources
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[Toxics Release Inventory Discharges and Population Health Outcomes in Rural and Urban Areas of the United States \(Final Report\)](#)

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