

Won't Medicare for All hurt rural areas that need the most help?

Rural areas have unique health care challenges, ranging from a shortage of available doctors, less modernized facilities, and a hospital closure crisis. Medicare for All will help rectify these issues and improve the quality and accessibility of care provided in rural areas.

- One quarter of rural hospitals are <u>currently at risk of closure</u> under the current system, a trend that will be reversed by enacting Medicare for All. Medicare for All under HR 1384 will stabilize these hospitals through global budgets, which will make sure these hospitals always have the resources they need to keep their doors open.
- Rural health facilities will receive priority grants to upgrade and modernize their facilities under Medicare for All, as well as address doctor shortages. Medicare for All under HR 1384 includes both <u>capital expenditures and special project budgets</u> to provide grants to build, upgrade, and modernize facilities and hire staff. These grants are crafted to ensure rural areas will get their fair share of those funds. These budgets, plus a new <u>Office of Primary Care</u>, will help address shortages in underserved areas
- Reducing the number of uninsured will have a substantial effect on health care access for people who live in rural areas. Rural Americans are more likely to be uninsured or underinsured than those living in urban or suburban areas. Eliminating uninsurance and underinsurance will remove a critical barrier to care for many people in rural areas.
- Medicare for All will give most primary care doctors a raise, making it easier for new doctors to provide primary care instead of specialty services. Currently, many primary care physicians are underpaid, while many specialists make out extremely well. Medicare for All addresses this imbalance to ensure primary care physicians practicing in rural areas are compensated fairly.

Join the Nurses' Campaign to Win Medicare for All! www.medicare4all.org

