

Critical Access Hospitals—The Lifeline of Rural America

In the vast rural landscapes of America, where miles of open fields separate communities, access to quality healthcare can be a challenge. This is where Critical Access Hospitals (CAHs), like Melissa Memorial, serve as an essential lifeline. Designed to provide vital medical care in remote areas, CAHs are a crucial component of our healthcare system. It is imperative that policymakers and citizens alike recognize their significance and work to ensure their sustainability.

Critical Access Hospitals differ significantly from larger, urban medical centers. Established under the Medicare Rural Hospital Flexibility Program in 1997, our hospital must meet specific criteria, including being located in a rural area, having no more than 25 inpatient beds, and maintaining an average patient stay of no more than 96 hours. Additionally, we must be at least 35 miles from another hospital (or 15 miles in mountainous terrain or areas with only secondary roads). Melissa Memorial and Haxtun Hospital have an exemption to this rule. Vetting these qualifications, we receive cost-based reimbursements from Medicare, helping us stay financially viable while serving our small populations.

Unlike major metropolitan hospitals, CAHs operate with limited resources, including smaller medical staff and fewer specialized services. Yet, our impact is profound. We provide emergency care, inpatient treatment, outpatient services, and often serve as the first and only line of defense in medical crises. Without CAHs, like Melissa Memorial, residents would have to travel hours to receive even the most basic care—an unacceptable situation that could mean the difference between life and death.

Despite their importance, CAHs face significant threats. Financial constraints, workforce shortages, and evolving healthcare regulations make it difficult to operate sustainably. Rural populations are often older and sicker, leading to higher care costs. At the same time, lower patient volumes make it difficult for CAHs to generate sufficient revenue. Closures of these facilities have been on the rise, leaving rural communities stranded without adequate healthcare access. This is why Melissa Memorial strives to be engaged with our state and federal partners and legislators, why we constantly seek innovative best practices to maintain high quality care, and why we constantly seek creative means of financial support...for example we aggressively pursue grant funding for operations and growth. In 2024, virtually all MMH capital expenditures were grant funded.

We are determined to see Melissa Memorial continue to thrive, we advocate in support of federal and state policies that strengthen all CAHs. We support incentives for medical professionals to work in rural areas, and updated reimbursement structures can all help keep hospitals like ours afloat. Telemedicine expansion is another promising solution, allowing CAHs to connect with specialists in urban centers while maintaining quality local care. In the Emergency Department we partner with a cutting-edge resource called Avel E-Care that reduces the burden on our nurses and providers while making a board-certified ER Physician available by video to assist our staff and patients. Emergency care second to none.

Melissa Memorial Hospital is here for you, and we really appreciate your support.