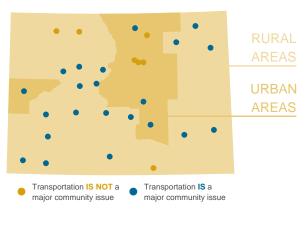


# ACTION FOR EQUITY

TRANSPORTATION ISSUES by Location of Community<sup>1</sup>



**14%** of rural adults have **I**ow incomes and **Iack transportation**, compared to the state average of **8%**<sup>2</sup>

Over 750,000 people live in rural Colorado. Because of the low population density and distance between population centers, rural Coloradans face unique challenges when it comes getting their health care needs met.

## **Geography and Transportation**

Transportation is necessary to access and secure basic needs, adequate employment, and health care services. Rural Coloradans face challenges with transportation, mainly with the availability of transit services and the ability to access needed health care.

**Transportation is a significant barrier to care in many rural communities, especially** for the low-income, working poor, senior, and disabled populations. We are therefore required to create and support unique, collaborative techniques to deliver care.

-Jen Fanning, Grand County Rural Health Network

## PER CAPITA PHYSICIANS by Location of Practice<sup>3</sup>



## PERCEIVED LACK OF PROVIDERS by Area of Residence<sup>1</sup>



## Health Care Workforce

Access to both providers and care facilities are necessary to meet a person's health care needs. In rural Colorado, there are fewer providers per capita than in urban areas. There are also shortages of specialists, clinics, and 18 counties without a hospital.<sup>2</sup>

The data is reinforced by public perception. More than twice as many rural Coloradans as urban Coloradans felt that the shortage of health care providers in their community was a major problem.<sup>1</sup>

## References

<sup>1</sup> Findings from The Colorado Trust's Environmental Scan. The Colorado Trust, May 2013.

- <sup>2</sup> Colorado Rural Health Center, 2014.
- <sup>3</sup> Peregrine Management Corporation. Analysis by the Colorado Health Institute, April 2014.

2014

# **Rural Colorado**





## **IMPROVE TRANSPORTATION OPTIONS**

**OPPORTUNITIES FOR ACTION** 

**Colorado has the opportunity to be an even better state if we commit to achieving health equity for all Coloradans, regardless of where they live.** Coloradans who live in rural communities are active contributors to agriculture, manufacturing, and tourism, which means rural areas are integral to the state's economy and health. The places where we live, learn, work, and play have a great impact on how long and how well we live; we must take action to ensure rural Coloradans have an equal opportunity to live a healthy life.

Transportation options are limited in Colorado, especially for non-emergency medical transit, which is important to ensuring timely access to care. Medicaid non-emergency transportation is limited to nine counties, none of which are rural, and there are few options for uninsured or privately-insured residents. A transportation evaluation would allow us to better understand the gaps and develop solutions.

## IMPROVE UNDERSTANDING OF CAPACITY

Current capacity analyses separate each component of the workforce and facilities physicians, nurse practitioners, physician assistants, clinics, and hospitals. Although rural areas may lack physicians and hospitals, they may have adequate capacity by utilizing other providers or clinics. An inclusive analysis will improve our understanding of capacity.

## SUPPORT COMMUNITY INNOVATIONS

Rural communities excel at innovating to maximize limited resources, such as utilizing community paramedics to provide basic health care services, telemedicine, and unique loan forgiveness and residency training programs to attract workforce. Sometimes regulation is a barrier to success, though. There is great opportunity to aid these communities in innovation by helping them navigate and develop the right regulatory framework. Recruiting providers to rural Colorado is the biggest challenge I face, but we manage to do a lot with our limited resources. If it were easier to get candidates to see our great opportunities, I know we could bring them on board.

> —Jay Brooke, High Plains Clinic

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