

FALL 2023

PENNSYLVANIA RURAL HEALTH

Climate Change

Health Needs

THE IMPACT OF CLIMATE CHANGE ON HEALTH

A PRESCRIPTION TO HEAL THE PLANET | STOP MEDICARE FRAUD AND ABUSE

A Prescription to Heal the Planet

By Ruth McDermott-Levy, Ph.D., MPH, RN, FAAN

*Professor and Co-Director, Mid-Atlantic Center for Children's Health and the Environment
M. Louise Fitzpatrick College of Nursing, Villanova University*



In early June of 2023, following a full day of teaching and meetings, I was driving home and noticed a gray haze in front of me. I flipped on the radio to the local news station and heard that wildfires in Eastern Canada had spread a smoky haze into Pennsylvania. Once home, I checked the Environmental Protection Agency's app, AirNow.gov, and found that the air quality index (AQI) had moved from the typical green (good) zone to orange (unhealthy for sensitive groups) and by the end of

the day, the local AQI reading was in the maroon zone (hazardous for everyone). In the following weeks, after our air cleared, we learned that June 2023 was the hottest June in recorded history. None of this is good news for the planet or our health. Earth is sick and the wildfires and extreme heat are symptoms of a sick planet.

As a public health nurse educator, practitioner, and scholar, I work to address and prevent health problems. I collaborate with health care

providers, public health professionals, and parents in preventing children's environmental health risks and exposures. But the environmental issues related to our changing climate are more complex and multifaceted. My professional interests and work have moved from isolated environment exposures, that are often related to structural and social determinants of health, to working to restore and maintain public health when Earth is sick. Earth's diagnosis is climate change.

There are unique challenges related to climate change for rural communities. Many rural residents are outdoor workers, employed in positions such as agriculture, recreation, and construction. This makes them vulnerable to extreme weather events such as heatwaves and poor air quality. Many schools and homes are not air conditioned, making escaping the relentless heat and poor outdoor air quality more difficult for rural residents. There are fewer health care providers in rural communities to address heat adaptation and other climate change-related events. However, a strength in most rural communities is the social connections between neighbors and community organizations and the connection to the natural environment.

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 **PENNSYLVANIA OFFICE OF
RURAL HEALTH**

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THE IMPACT OF CLIMATE CHANGE on Health



By Andy Shelden

During the summer of 2023, wildfire smoke traveled thousands of miles from the Canadian woodlands to the eastern United States and blanketed the skies for days, pushing people indoors due to dangerous air quality. Devastating wildfires on Maui razed a historic neighborhood in minutes and turned into the deadliest natural fire event in the U.S. in more than a century. In the American Southwest, in heavily populated areas like Dallas, TX and Phoenix, AZ, residents lived through weeks of unrelenting, triple-digit daytime heat, straining power grids and taxing daily life. 2023 has already given us ample evidence that climate change is here right now and that we need to change our social, economic, and civic priorities and adapt much more quickly if we are going to avoid catastrophic effects in the very near future.

“We are in trouble,” says Ruth McDermott-Levy, Ph.D., MPH, RN, FAAN, professor and co-director of the Mid-Atlantic Center for

Children’s Health and the Environment at Villanova University in Villanova, PA. “Climate change is going to affect everything.”

For more than a generation, climate change has been recognized as an environmental threat that will affect our natural resources like clean air and water while making certain places more inhospitable to live. But the impact of climate change goes well beyond its environmental effects; climate change exacerbates poverty, food insecurity, and leads to widespread social and economic disruption. The root causes of climate change and health inequities are often the same: energy, transportation, and land use; housing; and scarce food and water resources, all of which are tied to broad socioeconomic systems.

“Climate change makes everything harder,” says Peter Buck, co-director of Penn State’s Local Climate Action Program and associate director of Climate and Sustainability Education for the Penn State Sustainability Institute. “Every year [the effects of climate change] pull harder on us and, eventually, something is going to break. And we’ve already seen things break all over rural America because of

climate change: health systems, power outages, huge floods that shut everything down, protracted heatwaves, droughts.”

Rural America is, in some ways, more vulnerable to climate change because of its preexisting inequities. Rural America has less access to health care providers, a higher percentage of outdoor workers, a lack of quality affordable housing and shared community spaces, little or no public transportation options, and antiquated public infrastructure, all of which will be stressed further by climate change.

“The whole thing is a challenge and part of it is our own fault,” says McDermott-Levy. “We waited too long. We knew [as a society] that this was coming but we would say, ‘well, that’s down the road.’ But it is here now.”

Climate Change 101

Climate change is caused by a shift in the earth’s energy balance. The earth’s atmosphere is gaining energy and has been since the Industrial Revolution due to the burning of fossil fuels which release large quantities of carbon dioxide and other climate pollutants into the air. When released, those gases act like a greenhouse and block the energy from leaving the atmosphere; now in the post-Industrial age, more of the sun’s energy is being retained in the atmosphere than is radiated or reflected back into space. Over time, the retention of that energy is increasing the average global temperature. As temperatures rise, the environment is undergoing critical changes that threaten our way of life. Those changes include:

- A gradual warming of the earth’s surface and ocean waters.
- Changes in the global water cycle that create more violent and unpredictable storms.
- Declining snow caps, shrinking glaciers, and less snowpack at high altitudes.
- Rising sea levels that threaten low-lying communities.
- Ocean acidification that harms marine life and coral reefs.

Scientists have been recording these changes for decades and warning the public about potentially devastating consequences. However, it has been challenging to get all sectors of society to adopt a set of policies and behaviors that can stem that average global temperature rise and its many repercussions.

“The consequences of our behaviors used to be unintentional,” says Buck. “But it’s not unintentional anymore. We’re choosing to do things that we don’t have to do. And sure, change is hard, but the cost of not changing now will come at the expense of human health and well-being, and of the beauty of the world that we love.”

As the surface of the earth warms, extreme heat poses a real health danger to the population, and especially to vulnerable groups like infants and the elderly. Dehydration and heat stroke are the most

direct threats to health when temperatures rise to unsafe levels, and heat exposure also triggers physiological responses that can aggravate cardiovascular and respiratory illnesses. Extreme heat can strain an individual’s mental health status too.

Drought conditions pose significant dangers to communities as well, particularly in rural America. Droughts lead to water access issues for residents and threaten food production. Individual health can be negatively affected as can the availability and cost of food. Further, droughts can exacerbate groundwater pollution. As the earth dries out, chemicals that have infiltrated the stream cycle become further concentrated and seep into water systems in dangerous quantities. When droughts are followed by sudden storms, which is another effect of climate change, the groundwater ecosystem often can’t handle the excess volume and dangerous flooding can occur.

“If people’s lives are in danger from a flood, that obviously affects health,” says Nate Wardle, who is working on environmental health and climate-related projects as part of his role at the Pennsylvania Department of Health (PA DOH). “But afterward, if people are exposed to flood water or their homes are flooded, there are risks there too. What is in that water? Are there hazardous materials and substances transported by the flood water? Is there mold in your home? That’s a danger some people might not recognize.”

Beyond extreme flooding, droughts also often aggravate wildfire conditions, which we’ve seen all too regularly in the U.S. in recent years. In 2015, a U.S. Department of Agriculture (USDA) study concluded that one-third of the U.S. population lives in areas that are vulnerable to wildfires, and that number is expected to grow. Wildfires create threatening conditions to homes and structures immediately in their path, and the smoke from wildfires also contributes harmful particulate matter to the atmosphere that can trigger cardiovascular and respiratory issues in vulnerable populations. Wildfire smoke can also travel long distances and linger for long periods of time, so even communities not in their direct path can be affected by changes in air quality.



The list of climate change’s environmental impact goes on. There are catastrophic weather events like tornadoes and hurricanes linked to climate change. There are air quality concerns beyond wildfires, simply from the release of climate pollutants into the atmosphere. In a place like Pennsylvania, higher average temperatures lead to fewer hard freezes in the winter, which makes vector-borne diseases like Lyme Disease and

West Nile Virus more common. It also means that allergens and air pollen are more prevalent in the summer, which leads to increases in respiratory risks. As more carbon dioxide is absorbed into the ocean, sea life may die off, coral reefs might disappear, and whole ecosystems could collapse. If we are unable to act or act quickly enough in the face of these mounting conditions, there may be no end to the potential consequences.



Climate Change as A Threat to Public Health

The American Public Health Association (APHA) has labeled climate change a public health emergency, but making the connection between the environmental impact of climate change and its community-wide health impact has been a challenge for federal, state, and local health officials.

“Here in Pennsylvania, we are working now to make that connection to help people be better prepared,” says Wardle. “It may be hard for a person to understand what their emissions levels are or what their carbon footprint is, but it should be easier to communicate to people how their health is changing as a result of climate change.”

Climate change causes emergency weather events that lead to immediate health consequences, injuries or even deaths. These emergencies include fires, flooding, tornadoes, hurricanes, and extreme heat or sudden storms, to name a few. What is especially pernicious is that these events tend to hit communities hardest where they are most vulnerable. When a flood or wildfire strikes, residents can be displaced from their homes and relocate to shelters where they rely on community assistance, sometimes for weeks or months. But those emergency services, and the funds required to maintain them, are often lacking in America’s rural communities. Those who are displaced the longest by a climate emergency tend to be poorer, may lack close familial connections or live without reliable home insurance coverage that will help them recover. Residents may feel compelled to return to their homes even if they are no longer safe, in the case of floods and mold growth. With wildfires, staying indoors may be perceived as a safe option, but particulate matter from wildfire smoke can infiltrate homes and reduce air quality, triggering respiratory ailments or aggravating chronic heart and lung diseases in vulnerable populations. The ripple effects of these events can, in many cases, be more devastating to health than the events themselves.

The collapse of public infrastructure is another downstream effect of climate change that can have an impact on health. When climate emergencies like hurricanes, floods or tornadoes occur, they affect the integrity of roads, bridges, levees, and dams. Power grids are often stressed or overwhelmed by these events, and they are increasingly strained by extreme heat as well. As vital parts of the infrastructure begin to fail, communities are in trouble. A public health system cannot respond effectively to these challenges without stable power and water supplies.

“Investment in rural health has to be coupled with investment in physical infrastructure and mitigation efforts in climate change,” says Buck. “If we want to afford people a decent quality of life, their roads need to stay open, their power needs to stay on. Whether people say they’re vulnerable or not, they are vulnerable. We have a significant percentage of people aging-in-place here in rural Pennsylvania and we want them taken care of. It is incumbent on a society that wants to take care of itself that we pay for that.”

In rural America, the impact of climate change on health may be felt most acutely in the agricultural industry. As extreme heat becomes more common, farm workers face increasingly dangerous conditions on the job. In a recent study noted by the Association of American Medical Colleges (AAMC), agricultural workers were found to be



*“Heat is the greatest threat to mortality
and air conditioners are more efficient
now, as long as we can keep working to
get a clean electric grid to power them.”*

—Ruth McDermott-Levy

thirty-five times more likely to die of heat-related illnesses than those in other industries. Agricultural laborers are usually paid by the piece rate, i.e., the volume picked on a given day, and as a result, they are incentivized to continue working despite dangerous conditions.

“It’s not just extreme heat that leads to hospitalizations,” Wardle stresses, “often it’s the repetitive accumulation of heat over days or weeks.”

Complicating matters, many farm workers are migrant laborers who are undocumented and uninsured, so they often delay treatment or, when they do seek care, they face language barriers or cultural insensitivities that lead to less timely, less effective care overall. Rural health advocates are cognizant of these preexisting inequities, but those inequities will only be amplified by climate-related health issues.

The effects of climate change on the health of water systems also pose a threat to rural America. If drought conditions continue to worsen, the agricultural sector could struggle to reliably grow and harvest traditional crops in established geographic locations. Rural Americans tend to rely on private water sources like well water to service their homes, and those private sources are at increased risk of contamination from pollutants during drought-flood cycles. Wastewater treatment centers may have outdated infrastructures and may not be equipped to process volumes of water received during sudden storm events.

Whether it’s clean air, water or soil, climate change is already having a grave effect on these environmental conditions, and as those conditions worsen, the threats to human health multiply.

Policy Choices & Personal Responsibility

Federal, state, and local governments are tasked with addressing the immediate problems of climate-related disasters—how to respond effectively to wildfires, floods, and the like, to keeping people safe—and with long-term structural issues that are exacerbated by climate change—the power, water, and infrastructure issues that lead to health vulnerabilities. It’s not always easy to align those objectives and get public buy-in, but the common variable has to be investment.

“Is this going to be expensive? Yes. But so is misery,” Buck asserts. “To me, it’s the golden rule principle. Do unto others... Let’s start from that. Let’s try to help each other.” McDermott-Levy echoes that idea. “Policy will make it better. We’ve committed to helping climate change and the federal government has committed a lot of money to environmental justice issues recently, via the Inflation Reduction Act passed by the Biden administration. But you still need to add these pieces to get people onboard on a personal level. People are more willing to hear you if you meet them where they are.”

Rural communities can direct investments or policies to combat climate-related health effects. To address extreme heat, communities can provide public cooling centers for residents with no air conditioning to help them regulate their temperature. The proliferation of energy-efficient air conditioning is also important. “I think we need to get air conditioners into more homes,” says McDermott-Levy. “Heat is the greatest threat to mortality and air conditioners are more efficient now, as long as we can keep working to get a clean electric grid to power them.”

States also are enacting regulations to protect farm workers from some of the health demands they face due to extreme heat, including mandating shade breaks, water availability, and reducing the length of shifts.

Beyond extreme heat, governments need to be responsive to growing infrastructure needs as climate change evolves. When climate emergencies occur, public infrastructure needs to be reliable and responsive. Roads and bridges need to be built to withstand severe weather events. Wastewater systems need to be updated to handle the increased load that will come with major flood events.

Wardle emphasizes this point. “It’s so important for us to be proactive about these issues rather than having to be reactive after someone’s home has been destroyed or their life has been devastated or we have, unfortunately, lost lives because of these weather-related issues and the effects of climate change on our daily lives. The more we can employ a mitigation and adaption approach, the more we can help ensure that people’s health and safety are protected.”

Addressing the intersection of climate change and health needs to occur at the individual level as well. An individual or household can positively impact the effects of climate change. “I’m a big fan of active transportation,” says McDermott-Levy, “which means walking or riding your bike to get places. It helps air quality. It helps physical health. And it also helps mental health, to get exercise.”

“The mental health effects of climate change are very real,” says Wardle. “If you’ve been through a hurricane or a flash flooding event before, there’s going to be some PTSD when the next storm comes in. People should take steps to find someone who can be a good ear and talk about those anxieties with them.”

We can also try to address climate change on the front end, by taking stock of our emissions on a community-wide or household level and try to lower our carbon footprint. At the individual level, for instance, the federal government offers subsidies for installing solar panels on homes and rebates for purchasing electric-powered vehicles. Composting organic material and recycling can reduce the amount of trash that goes into landfills, which helps reduce emissions of carbon dioxide. Every bit helps, even if the challenge is daunting.

“One of the first things a community can do is assess its contributions to climate change by doing a greenhouse gas inventory,” says Buck, speaking to the idea of a community-wide approach. “Through the Local Climate Action Program, we figure out what greenhouse gas emissions in a community are coming from transportation, buildings, agriculture, wastewater, etc. Once you have a baseline, you can decide what’s in your power to change, to reduce those greenhouse gases. From there, you can work with other levels of government, private industry, and others, and bring those numbers down.”

“Making individual choices to lower your emissions does open a dialogue at the very least,” says McDermott-Levy. “And once you start talking about these issues, that can change hearts and minds of people who might be hesitant to do so.”

The bottom line is that everyone—individuals, communities, state and federal governments, non-government organizations, and

international groups—needs to accelerate the pace at which they are responding to these climate challenges. We need to devote more funding, resources, and ingenuity to addressing this crisis, because the threat it poses is dangerous and multi-faceted and the consequences may uproot everyday life for people at all levels of society.

Buck makes this point succinctly. “Many people live in these rural areas where they love the old stuff that they’re used to, but they also want it to work better. And they’re used to a way of life and a way of being. But things are different now—with flooding or sewage overflows or lack of broadband—and so they’re also saying, ‘I’m getting hurt here, someone help me’. They don’t want to be told what to do and they don’t want to pay for it. It can be psychologically difficult to work with. But still, it has to be done somehow if we want people to be happy and healthy and live in place.”

There also are future generations to consider. The challenges in front of us right now might seem hard to surmount, but they could pale in comparison to the challenges we leave for the generations after us.

“I have three kids,” says Wardle, “and I think all the time about what their future is going to look like. What world are we leaving for them? How do we make sure we’re leaving them something where they can move us forward on these issues? We don’t want to get to a point where we’re too far gone, to where we can’t protect people and their health.”

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Evans was recognized for her tireless efforts and outstanding leadership skills, her readiness to take on new tasks, ask insightful questions, and assist in streamlining human resources. Evans advocated for rural populations and public health by assisting every department in the hospital to function more efficiently and developing protocols to streamline department functions. Noted Fetzer, “The amount of work Katelyn put into these efforts improved the quality of care for our patients.”

Fetzer continued. “As an experienced human resources director, I can evaluate professional and desirable employee behaviors. Katelyn exemplifies these traits. She is very enthusiastic, empathetic, eager, dependable, and detailed-oriented. Katelyn is also very humble.”

During the second year of her MHA program, Evans was a graduate assistant at PORH and, in addition to projects at Penn Highlands Tyrone, provided data and analytical support to PORH, and compiled an extensive matrix of rural hospital community health needs assessments. She also served as a Silk in the Penn State Marching Blue Band, played the piano for her local church, and helped community charities raise funds.

“We are very pleased to present this award to Katelyn Evans and to honor the legacy of Jennifer Cwynar, who was an exceptional student and intern with our office,” said Lisa Davis, director of PORH and outreach associate professor of health policy and administration. “This is one way in which we can encourage excellence in those who will become leaders in advocating for the health of vulnerable populations.”

The Rural Health Research Gateway offers easy and timely access to research completed by the Rural Health Research Centers, funded by the Federal Office of Rural Health Policy. The Gateway provides

policy briefs, chart books, fact sheets, journal articles, infographics, and more for use by policymakers, educators, public health employees, hospital staff, and others.



Rural Health
Research Gateway

To learn more, access
the Rural Health
Research Gateway at
ruralhealthresearch.org.

2023 COMMUNITY AND PUBLIC HEALTH CONFERENCE

Pennsylvania Public Health Matters! People, Strategies, and Policies to Advance Health Communities

The 2023 Community and Public Health Conference was held on June 13, at the Penn Stater Hotel and Conference Center in State College, PA. The event was focused on Public Health Matters! Emphasizing the need to integrate public health principles and practices into policies and programs that impact all Pennsylvania residents and communities. The oral and poster presentations highlighted community and public health issues and initiatives for diverse and underserved populations.

The Community and Public Health Conference is a forum to bring together educators, researchers, community-based leaders, and others to discuss current and emerging topics that impact rural and public health in Pennsylvania. The event included

182 attendees, two keynote speakers, twenty-eight oral presentations, fifty-four individual oral presenters, nineteen poster presentations, and thirteen exhibitors, providing a wonderful opportunity to connect advocates from across the state.

The conference was sponsored by the Pennsylvania Public Health Association, the Pennsylvania Office of Rural Health, the Pennsylvania Rural Health Association, the Penn State College of Medicine's Public Health Program, the Society for Public Health Education–Pennsylvania Chapter, and the Northeast Pennsylvania Area Health Education Center. Concurrently, the Pennsylvania Nutrition Education Network (PA NEN) held its annual conference at the same location, to meet the needs and educational requirements for nutrition education professionals. This event, supported by USDA's Supplemental Nutrition Assistance Program through the Pennsylvania Department of Human Services, connects advocates to continue providing necessary services and programs throughout the Commonwealth.

The 2024 conference will be held on April 8, in State College, PA. Make your plans now to attend! For more information, contact the Pennsylvania Office of Rural Health at porh@psu.edu.





2024

**Pennsylvania Rural Community
and
Public Health Conference**
(abstract submission)

CALL FOR ABSTRACTS

Deadline: November 3, 2023 by 5:00 PM

Offered by the Pennsylvania Public Health Association, the Pennsylvania Office of Rural Health, the Penn State College of Medicine's Public Health Program, the Society for Public Health Education - Pennsylvania Chapter, and the Northeast Pennsylvania Area Health Education Center.

APRIL 8, 2024

THE PENN STATER HOTEL AND CONFERENCE CENTER, STATE COLLEGE, PA

This one-day conference will highlight community and public health issues and initiatives for diverse and underserved populations. Abstracts are now being accepted on topics that address:

- Innovative community and public health strategies;
- Best practices in improving the health of special and underserved populations, with a special focus on migrant and immigrant farmworkers;
- Use of data-driven and evidence-based practices in public and community health; and
- Intersection of public health and nutrition.

If you wish to submit more than one abstract, please submit each abstract with a different email address. Paid conference registration is required for all presenters whose abstracts are accepted for either oral or poster presentations.

For more information, contact PORH at 814-863-8214 or porh@psu.edu.

(abstract submission) web.cvent.com/event/2bf8bbce-d1e0-4b85-9ca1-01e63e937fd5/summary

So, what does one do to heal the planet? When I consider my nursing education, there are some similarities to addressing a disease in humans and the health of the planet to sustain human health. These similarities are listed below.



Understanding basic (climate) science. In nursing school, I studied human anatomy, physiology, pathophysiology, chemistry, microbiology, and pharmacology. I learned the body's normal, healthy responses; how the organs responded when there was disease; how the patients with each disease present; and the actions to address the symptoms of illnesses. With a sick Earth, I have learned the sources and impacts of rising greenhouse gases and the ecological response to the Earth's symptoms. Like human illness, science is evolving, so I must keep up with the changing pace of climate science, as well.



Be humbled by the compensatory ability of nature. A patient with heart disease typically experiences increased heart rate and more rapid breathing to compensate for a weakened cardiac condition. Similarly, our sick Earth attempts to compensate for rising greenhouse gases by trees taking in carbon dioxide and oceans storing large amounts of carbon dioxide and absorbing heat. In both instances, without intervening and eliminating or managing the root cause, both the heart's and Earth's compensatory mechanisms are not sustainable. Eventually they cannot effectively compensate.



Know early symptoms. To effectively address illnesses, the sooner health care providers recognize the symptoms, the sooner they can intervene, thus, improving chances for good health outcomes. For our planet, the rising temperatures since early industrialization and increasing frequency of extreme weather events are the symptoms of our sick Earth. However, we often treated each event as an isolated incident with few addressing the relationship of all these events collectively. Thus, we did not respond quickly or efficiently.



Understanding unique social and cultural perspectives.

We are not just our anatomy; we are whole people. Our personal preferences, social contacts, income, and worldviews influence our response to illness. The same is true for the human response to our sick Earth. We must work with everyone and leverage the strength of people's unique perspectives to move climate action forward. This also includes learning from one another about effective actions for healing Earth.



Communicate the symptoms to those who can intervene.

Addressing a disease requires an interdisciplinary approach, typically at the minimum this includes a physician, nurse, pharmacist, insurance company, and the health care system. With climate change, the response requires federal, state, and local policy makers; climate scientists; community stakeholders; public health professionals; economists; engineers; emergency planners; and many others. To build resilient communities, this vast array of professionals and those impacted must work effectively and collaboratively to mitigate and adapt to outcomes of a sick Earth.



Support adaptation to the sequela of illness.

If our patient with heart disease is not able to return to their previous level of activity, we work with them to find adaptation strategies such as modifying activities, using portable oxygen, and providing medications to support the heart. For our sick Earth, we must plan for periods of heat, flooding, drought, wildfires, and poor air quality. We must learn to read Earth's symptoms and accommodate to maintain human health, such as monitoring the air quality and adapting our activity related to the AQI.

After our hot and smoky summer, fall is a welcome relief. But the cooler autumn weather does not mean that the days of air quality warnings and prolonged heat are in the rearview mirror for good. These environmental phenomena are part of climate change. Climate change affects every aspect of our health, and this is especially true in Pennsylvania's rural communities. We must all work together acknowledging our strengths and challenges to heal our sick Earth, adapt to climate change, and thrive in resilient communities.



Diane M. Hall,
Ph.D., MEd
*Director, CDC Office
of Rural Health*

CDC ANNOUNCES Director of Office of Rural Health

The Centers for Disease Control and Prevention (CDC) announced that Diane M. Hall, Ph.D., MEd, has been selected to serve as the permanent director of the CDC Office of Rural Health. She has served as the Office's acting director since March 2023. As director, Hall will continue to lead and coordinate CDC's rural health work and strategy to strengthen the delivery of rural public health services across the U.S.

Prior to coming to the Office of Rural Health, located in CDC's Public Health Infrastructure Center, Hall served in CDC's Office of the Associate Director for Policy and Strategy, Office of the Director, as CDC's rural health lead; led the office's Strategic Engagement

and Capacity Building work; and oversaw training activities focused on using policy to improve the population's health. As a recognized expert in knowledge synthesis and translation, she led the development of the office's policy portal, the Policy Analysis and Research Information System.

Throughout the COVID-19 pandemic, Hall held several leadership positions within CDC's response. She also held various positions in CDC's Division of Violence Prevention where she worked on research related to the prevention of teen dating violence, intimate partner violence, sexual violence, and youth violence. Prior to coming to CDC, she held an academic appointment at the University of Pennsylvania, serving as the lead coordinator for a master's program in psychology.

Hall and the CDC Office of Rural Health look forward to strengthening relationships with all who have an interest in improving the health and well-being of rural America!

National Rural Health Day

Celebrating the **Power of Rural!**®



THURSDAY, NOVEMBER 16, 2023

National Rural Health Day: Celebrating the Power of Rural!

The National Organization of State Offices of Rural Health will celebrate
National Rural Health Day on November 16, 2023!

National Rural Health Day is an opportunity to "Celebrate the Power of Rural" by honoring the selfless, community-minded spirit that prevails in rural America. It is a day to showcase the efforts of rural health care providers, State Offices of Rural Health, and other rural stakeholders to address the unique health care challenges that rural citizens face today and into the future.



**Join the Pennsylvania Office of Rural Health as we celebrate
National Rural Health Day and Rural Health Week in Pennsylvania.
And pledge to support the Power of Rural!**



Stop Medicare Fraud and Abuse:

SUPPORTS AND SERVICES FOR PENNSYLVANIA CONSUMERS

Mrs. Farina recently called the Pennsylvania Senior Medicare Patrol (SMP) office to report a \$7,600 charge to her Medicare plan for urinary catheters. After Medicare paid its portion, \$1,366 was sent to her secondary insurance plan. Mrs. Farina stated that she never ordered or received any of these supplies and had not heard of the business that made this claim or the provider who approved the order. She never spoke to anyone on the phone or shared her Medicare ID number with anyone who was not directly involved in her care. In other words, Mrs. Farina did everything right: she guarded her Medicare number like a credit card and never engaged with folks who were not her providers. What happened?

Unfortunately, this scenario is on the rise in Pennsylvania. Although it's not fully understood how these scammers acquire Medicare numbers, it is possible that they were obtained as part of a data breach. Due to the nature of our increasingly digital culture, these breaches may continue to rise.

SMP's mission is to help protect the state's Medicare beneficiaries against Medicare fraud and detect, and report any potential fraudulent claims. Fraud can increase out-of-pocket costs and can impact personal health by decreasing quality of care. Consumers CAN do something about it!

If no one calls and nothing comes in the mail, how do consumers know that fraud has occurred? By doing what Mrs. Farina did: reading her Medicare Summary Notices. She went one step further and kept a journal of all the medical services she received, including dates, names of providers, and what services or tests she received. Like balancing her checkbook, she could compare the two records, make sure they matched, and detect any fraudulent charges.



Beneficiaries can keep track of claims made to Medicare or their insurance company by carefully reviewing their Medicare Summary Notices or health care statements.

In SMP's ongoing effort to assist in the fight against Medicare fraud, they developed free tools, available to all Pennsylvania Medicare beneficiaries, including the Personal Health Care Tracker. This tool includes tips and information on protecting against fraud, detailed instructions on how to make sense of Medicare Summary Notices or Explanation of Benefits (for those with Medicare Advantage plans), and using the personal health care tracker to record all medical services.

Remember this motto: Protect, Detect, Report! Protect personal information and don't give it out to anyone you don't know, including people who solicit you on the phone, via e-mail or by text messages. Remember that Medicare and Social Security will never place an unsolicited call and ask for personal information. Detect problems by keeping a health care journal. And report potential problems to Medicare or the SMP program.

If you need help, or to get your free Personal Health Care Tracker, call the Pennsylvania Senior Medicare Patrol at 1-800-356-3606 or visit carie.org. Assistance is always free and confidential.

The Rural Impact: A Podcast Connecting the Dots Between Policy & Rural Everything

Hear from problem solvers, advocates, storytellers, and policy pros, who explore how to sort out the complexity of critically important issues and dial into the details that listeners appreciate learning and understanding. On each episode, guests share resources that help inform discussion, encourage listeners to keep the conversations going, and ultimately, inspire movements toward rural equity and prosperity.

When launching her company, Impact! Communications, Inc., in 1989, Michelle Rathman furthered her mission to connect people and organizations with solutions. Working with rural hospitals determined to survive and thrive, while facing community and competitor opposition throughout the process, she facilitates courageous conversations about complex issues. Rathman creates a space for local health care leaders to convene a cross-sector of community stakeholders to identify issues, create common goals, and design strategies to address critical rural health issues.

For over twenty years, spending several months a year working in rural communities, Rathman gained a deep understanding of the challenges within and beyond a hospital's walls. Even with a contemporary replacement hospital, factors like insecurities in housing, food, transportation, and jobs loom and ultimately place more demand on vulnerable rural health systems.

When presented with an opportunity to host the Rural Matters! podcast in 2018, Rathman accepted the role, feeling it was a unique opportunity to expand conversations with a broader audience. Over the next four years, nearly 150 episodes were recorded with hundreds of guests, including previous and current federal administration cabinet members. In May 2022, she created a new podcast that closely aligned with her philosophy of "all roads to quality of life are paved by policy."

The Rural Impact: A Podcast Connecting the Dots Between Policy and Rural Everything launched in May 2023, with the first series, "Rural Health on Life Support." Joining Rathman was Alan Morgan, CEO of the National Rural Health Association, to discuss the multiple pressing challenges facing the industry; Julia Interrante, Ph.D., MPH from the University of Minnesota's Rural Health Research Center to examine the rural maternal mortality crisis, and Joan Alker, executive director of the Georgetown Center for Children and Families, who detailed the single most consequential policy impacting health equity for rural populations, Medicaid.

Listen in and subscribe to Rural Matters! and The Rural Impact: A Podcast Connecting the Dots Between Policy and Rural Everything podcast at myimpact.academy.



Pennsylvania Office of Rural Health
The Pennsylvania State University
118 Keller Building
University Park, PA 16802



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