



**Put on Your Rural Lens:**

**Rural Communities  
are Vital to Michigan!**



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# Pressing Need for Collaborations and Tools and for Teaming with Communities to Address Rural-Specific Disparities

- The 2019 age-adjusted **Natural-Cause Mortality (NCM)** for **prime working-age population** (aged 25-54) was **43 percent higher in rural** (non-metropolitan) areas than in urban (metropolitan areas)
- Death rates due to natural causes (disease-related deaths per 100,000 residents) outnumber deaths due to external factors (suicide, accidental overdose, alcohol-induced deaths)

USDA Economic Research Service  
U.S. DEPARTMENT OF AGRICULTURE

Economic Research Service  
Economic Information Bulletin  
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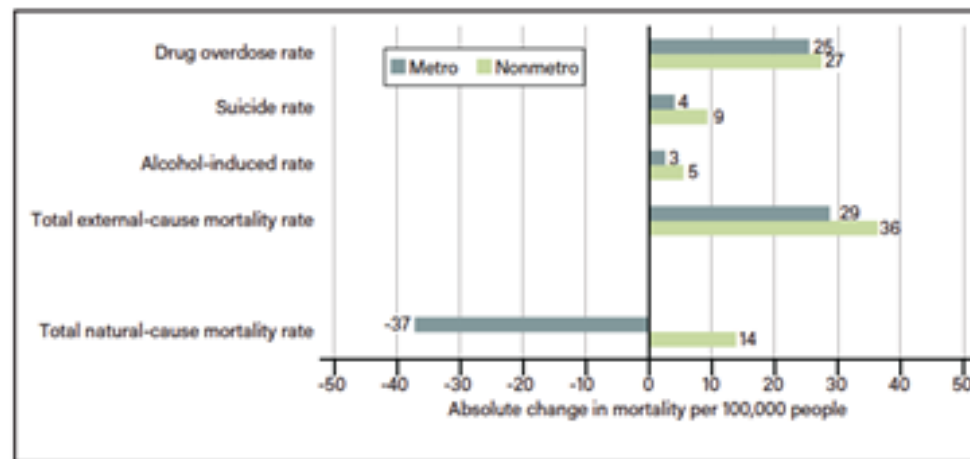
## The Nature of the Rural-Urban Mortality Gap

Kelsey L. Thomas, Elizabeth A. Dobis, and David A. McGranahan

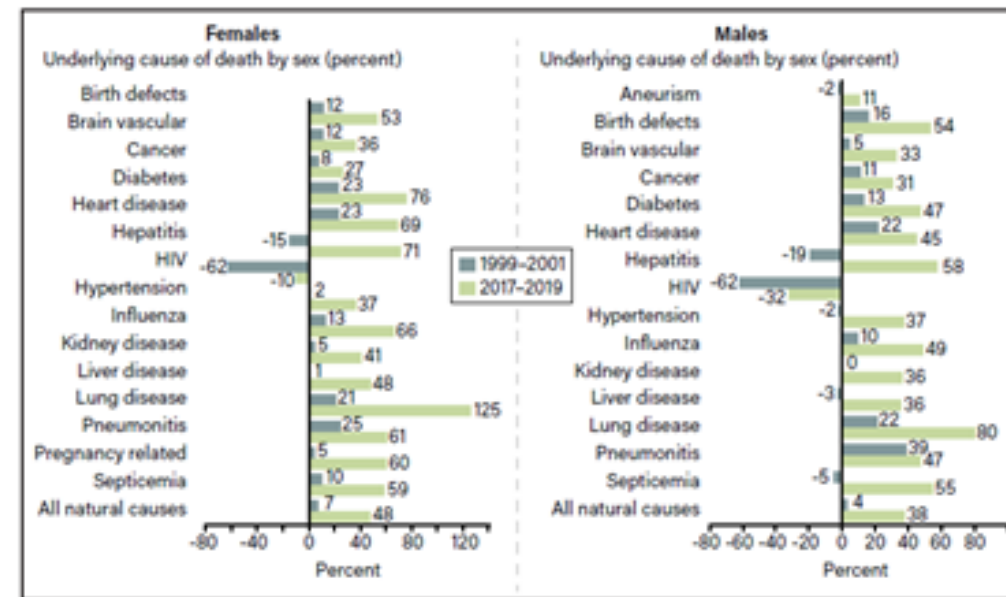


Cover illustrations from Getty Images

Change in age-adjusted, prime working-age, external- and natural-cause mortality rates for metro and nonmetro areas, 1999-2001 to 2017-2019



Nonmetro age-adjusted, prime working-age mortality rates by sex for 15 leading natural causes of death, 1999-2001 and 2017-2019, as percent above or below corresponding metro rates



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# Michigan's Rural Landscape *(UV Spectrum)*

## *Unique Vitality*

- Diverse and dynamic continuum includes communities experiencing rapid growth, economic transitions, and chronically impoverished
- 20% Michigan population
  - Diverse in age, experience, backgrounds
  - On-average older, higher rates of poverty and ALICE populations
- 94% of Michigan's land is rural; 70 counties are rural or mostly rural
- Largest employment sectors: education, healthcare and manufacturing
- Over two-thirds of school districts and 21 colleges and universities located in rural areas
- 1400 local governments
- Michigan's 12 federally recognized tribes
- 50,000 farms and 155,000 firms

## *Unresolved Vulnerability*

- **Life expectancy by county in Michigan varies by as much as 8 years;** Michiganders in Leelanau County can expect to live more than 82 years, while those in Clare County have a life expectancy of 74 years.
- **Geographic provider supply disparities exist.** Parts of Northern Lower and much of the UP have little to no supply to meet important health care needs such as primary care, maternity and prenatal care, and behavioral health care
- **Demographic trends for rural populations** pose health challenges (older adults, worsening health among working-age groups, chronic conditions, lower income, uninsured, barriers to access)
- **Rural-specific barriers to “affordable access”** of quality services for healthcare, education, childcare and high-speed internet, housing, and transportation.



# Connecting and Supporting Communities: Capacity Building, Research, Resources



## Suicide Prevention Toolkit for Health Providers

Preventing Suicide in Michigan Men (PRiSMM) statewide MDHHS/CDC funded initiative. Toolkit and online course for providers

## Improving Rural Access to Mental Health Services via Telehealth Resources

Technology and IT to support and expand tele-mental health services in Central and Northern Michigan working with health providers, FQHCs, clinics, and schools. (HRSA funded projects)

## Supporting Broadband Expansion and Digital Equity

Helping local communities engage with data to accelerate broadband adoption, increase access to care and resources, build capacity to increase high-speed internet accessibility

## Collaborative Research Partner with Communities to Advance Data, Tools, and Innovative Solutions

Grand Traverse region pilot project to use drones, or unmanned aircraft systems, to test and scale the delivery of medical supplies and other critical healthcare services in a bid to improve rural health outcomes.

Iosco County, Community-led Research on Non-Emergency Medical Transportation Needs for Older Adults

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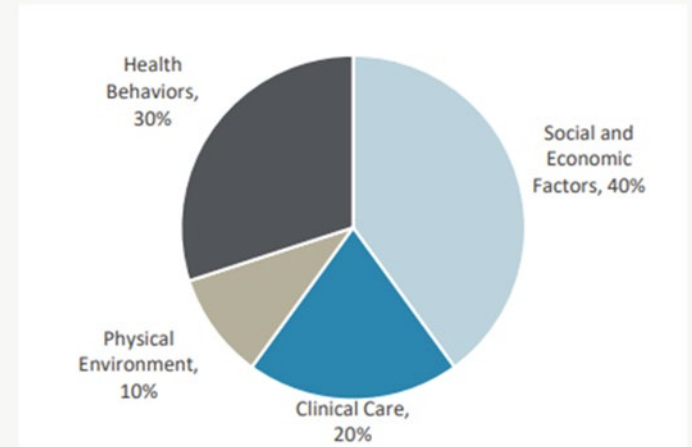
# Vital Conditions for Health and Well-being

|  |  |   |
|--|--|---|
|     | <b>THRIVING NATURAL WORLD</b>          | <b>Sustainable resources, contact with nature, freedom from hazards</b><br>Clean air, water, soil; healthy ecosystems able to sustainably provide necessary resources; accessible natural spaces; freedom from the extreme heat, flooding, wind, radiation, earthquakes, pathogens  |
|    | <b>BASIC NEEDS FOR HEALTH + SAFETY</b> | <b>Basic requirements for health and safety</b><br>Nutritious food, safe drinking water; fresh air; sufficient sleep; routine physical activity; safe, satisfying sexuality and reproduction; freedom from trauma, violence, addiction and crime; routine care for physical and behavioral health   |
|    | <b>HUMANE HOUSING</b>                  | <b>Humane, consistent housing</b><br>Adequate space per person; safe structures; affordable costs; diverse neighborhoods (without gentrification, segregation, concentrated poverty); close to work, school, food, recreation, and nature   |
|    | <b>MEANINGFUL WORK + WEALTH</b>        | <b>Rewarding work, careers, and standards of living</b><br>Job training/retraining; good-paying and fulfilling jobs; family and community wealth; savings and limited debt  |
|    | <b>LIFELONG LEARNING</b>               | <b>Continuous learning, education, and literacy</b><br>Continuous development of cognitive, social, emotional abilities; early childhood experiences; elementary, high school, and higher education; career and adult education   |
|  | <b>RELIABLE TRANSPORTATION</b>         | <b>Reliable, safe, and accessible transportation</b><br>Close to work, school, food, leisure; safe transport; active transport; efficient energy use; few environmental hazards   |
|  | <b>BELONGING + CIVIC MUSCLE</b>        | <b>Sense of belonging and power to shape a common world</b><br>Social support; civic association; freedom from stigma, discrimination, oppression; support for civil rights, human rights; civic agency; collective efficacy; vibrant arts, culture, and spiritual life; equitable access to information; many opportunities for civic engagement (voting, volunteering, public work) |



Rippel's ReThink Health

Figure 14: The Drivers of Health Outcomes



Source: "The Relative Contribution of Multiple Determinants to Health" Health Affairs Health Policy Brief, 2014.



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# Vital Conditions for Health and Well-being

## SAMHSA: Digital Access - A Super Determinant of Health

Published: March 22, 2023

Internet access is increasingly recognized as a “super determinant” of health. It plays a role in health care outcomes and influences more traditionally recognized social determinants of health, such as education, employment, and healthcare access. The Federal Communications Commission (FCC) estimates that 19 million people in the United States lack access to reliable broadband service, also known as reliable high-speed internet. This phenomenon is known as the digital divide and has focused on rural areas and “pockets of segregated urban areas [that] are also disconnected”.



CONTRIBUTING CENTER(S):  
MHTTC Network Wide



Figure 2: Social Determinants of Health



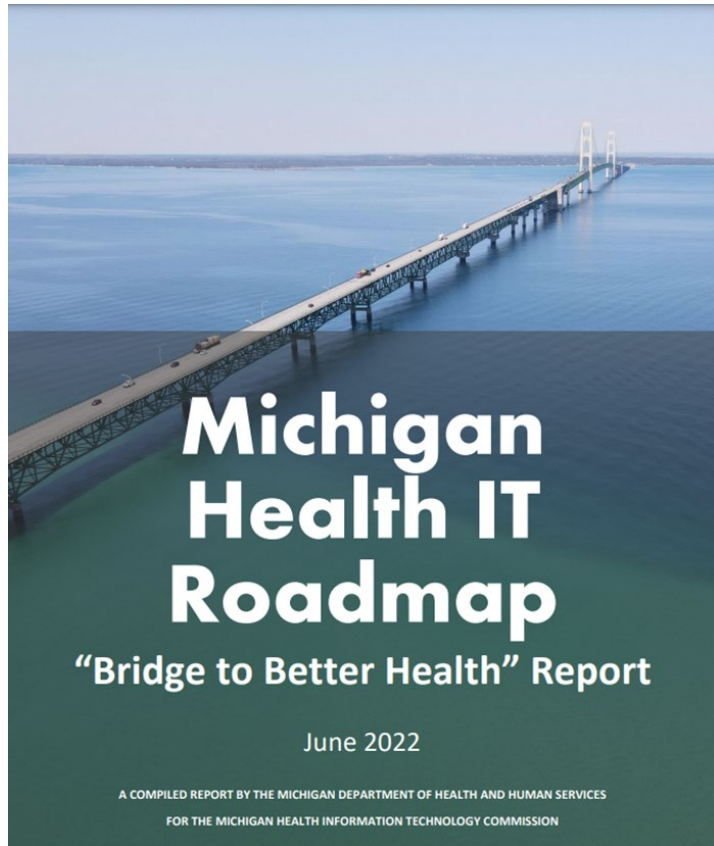
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# Expand Thinking

- Expanding *Health Span* across the life span
  - Prenatal, perinatal, pediatric, child/adolescent,
  - Drivers of Health (social, environmental, structural)
  - Healthy, Active Aging at every stage of life



# Health in All Policies (HiAP) Collaborative Strategic Approach: Address Complex and Multifaceted Cross-sector Challenges Lead Changes that Improve Population Health in the Long-term



## HIT Roadmap Initiatives

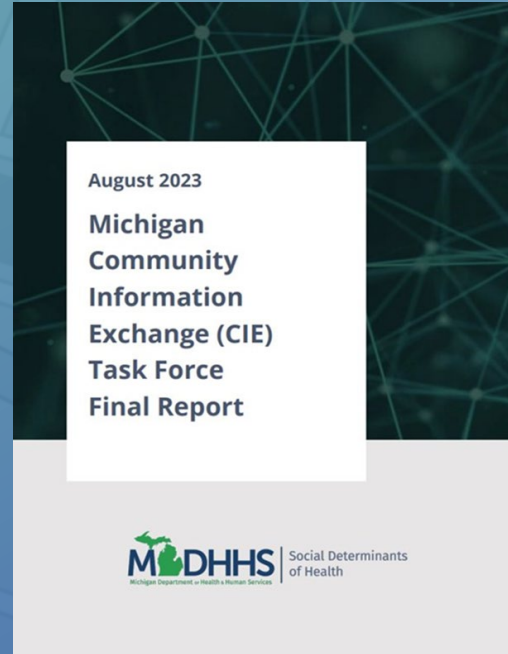




# Community Information Exchange Update



September 2024



# What is CIE?



A CIE is a community-led ecosystem comprised of multidisciplinary network partners who use a shared language, resource database, and integrated technology platforms to deliver enhanced community care planning.



CIE enables communities to shift from a reactive approach to addressing social needs to an approach that is more proactive, holistic and person-centered.



At the very core of a CIE is the community it serves, and with the community as its compass, a CIE seeks to support antiracism and health equity.

## CIE Intended Result

CIE promotes health and social equity and improves the well-being of all Michigan residents by enabling information about people's needs—and the resources available to help them—to flow to the right people at the right time in the right context.

By developing and promoting the **human, organizational, and technological capacities** to implement CIE initiatives, we will enhance the potential for organizations in different sectors, using different technologies, to coordinate care for their patients and clients.

## CIE Advisory Committee Sprint Workgroups



### 01 Social Care Data Governance

Develop a social care data governance policy based on existing legal frameworks and our Bill of Rights



### 02 Business Cases for CBOs

Assess and/or develop business cases for CBO engagement with CIE based on current and potential incentives

## CIE Advisory Committee Additional Initiatives



### 03 Coordinating Entity Workgroup

Identify and define coordinating entities in Michigan, core capacities, and opportunities for alignment



### 04 CIE Learning Community

Collaborative space for professionals working on CIE initiatives to foster statewide learning and promote innovative solutions

## New Initiatives in FY25: Community Engagement

- Moving to action
  - Shared messaging
  - Community dialogues
  - In-person events



## New Initiatives in FY25: Michigan Technical Assistance for Health Information Exchange (Planning APD)

### Overview

- MDHHS received approval from CMS for a one-year planning period to develop statewide structured technical assistance and training for health and social care providers to better serve Medicaid beneficiaries.
- All project activities will: 1) strengthen data collection and conformance standards, including race and ethnicity data collection practices that align with [new federal standards](#); and 2) expand IT infrastructure and data exchange capacities.

### Proposed Solutions

- Create and adopt standards to guide the exchange of social care data, including legal and use case framework; statewide guidance for all data sectors; and standardized social care data fields
- Develop and deploy Regional Extension Centers to assist SNFs, FQHCs, RHCs, local government, community-based organizations, and others by providing technical assistance and training in the standards and exchange of health-related social needs (HRSN) data

## Stay Connected and Learn More

### **If you have 2 minutes, sign up for the Social Determinants of Health (SDOH) Newsletter.**

This [monthly newsletter](#) will keep you updated on SDOH initiatives, including CIE, community health workers efforts, and health in all policies initiatives.

### **If you have 20 minutes, explore a CIE micro-toolkit module.**

[Check out a video and resource in one of the CIE micro-toolkit modules](#)—and share what your ideas for future topics.

### **If you have 60 minutes, attend a CIE Professional Learning Community session.**










[Join community members working](#) across Michigan to implement CIE initiatives. These informal spaces provide opportunities to share experiences and learn from each other.

# Mission

Create a more  
digitally  
equitable  
Michigan where  
everyone can  
leverage  
technology to  
improve their  
quality of life.



# MI - State Digital Equity Plan

| Covered Population   | Description  |
|--|--|
|  Covered households                 | Households with income no more than 150 percent of the federal poverty threshold.  |
|  Aging Individuals                  | Individuals 60 years and older.  |
|  Incarcerated individuals           | All persons in State prisons, local jails and other municipal confinement facilities, correctional residential facilities, and correctional facilities intended for juveniles. This does not include individuals who are incarcerated in a federal correctional facility.  |
|  Veterans                           | All persons aged 18 years and older who served in the armed forces in the past but are no longer on active duty.   |
|  Individuals with disabilities      | A person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment <sup>17</sup> .              |
|  Individuals with language barriers | This includes: <ul style="list-style-type: none"> <li>a) English learners: Individuals who speak a language other than English at home and speak English less than “very well.”</li> <li>b) Have low levels of literacy: Individuals below literacy proficiency</li> </ul> |
|  Racial or ethnic minorities      | Individuals who identify as a race other than White alone or as Hispanic or Latino of any race.  |
|  Rural community                  | Individuals living outside of cities and towns with more than 20,000 residents or living outside larger cities and towns with more than 50,000 residents and their surrounding urban areas.  |
|  At-risk youth                    | An individual who is less than 18 years of age who faces extreme threats to a successful transition into adulthood.  |

## MIHI's Digital Equity Goals

- 1 Ensure all Michiganders have access to an affordable, reliable high-speed internet connection at their homes
- 2 Attract workers and employers to Michigan
- 3 Improve educational attainment including removing barriers for credentialed workers and in postsecondary achievement
- 4 Improve overall health outcomes, particularly with improvement in rural areas and in underrepresented populations
- 5 Educate Michiganders about the online services available to them as a citizen of the state

# MI - State Digital Equity Plan

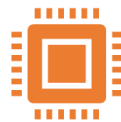
NEW: 2024 Michigan Inclusive Technology & Training Network (MITTEN) Initiative

## MIHI's Areas of Focus



### Two Main Goals

100% Availability  
95% Adoption



### Administer three major programs

**ROBIN** - Realizing Opportunities with Broadband Infrastructure Networks (\$238M)

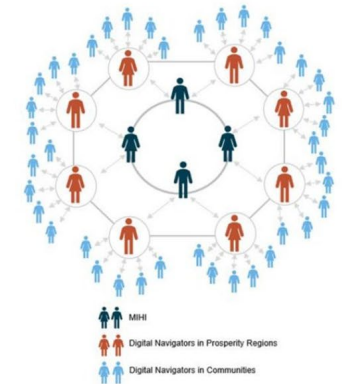
**BEAD** - Broadband Equity, Access, and Deployment (\$1.5B)

**DEA** - State Digital Equity Planning and DE Capacity Grant (~\$28M)

## DE Plan: Implementation Strategy

### Statewide Digital Navigator Network

- MIHI
- Regional Digital Coordinators
  - Regions
  - Large Municipalities
- MDOC
- Community Digital Navigators



Contacts: Michigan High Speed Internet Office:

Allie Herkenroder, Digital Equity Director

[herkenrodera@michigan.gov](mailto:herkenrodera@michigan.gov)

Jessica Robinson Digital Inclusion Manager

[RobinsonJ54@michigan.gov](mailto:RobinsonJ54@michigan.gov)



MICHIGAN DEPARTMENT OF  
**LABOR & ECONOMIC  
OPPORTUNITY**