

MPR News | Minnesota Now Minnesota Now - New southern Minnesota clinic aims to close rural health care gaps 01M4V5C38F8RNBFMCMC2QVJBQJ

NINA MOINI: Well, as rural health care shrinks across the state, one health system is hoping to reverse that trend. Fairmont Clinics has opened its doors in southern Minnesota. It's located about one hour south of Mankato, near the Iowa border. To start, it'll offer general surgery, OB/GYN, and urology care. Down the line, patients will also be able to receive primary and urgent care, as well as higher level surgeries. Windom Area Health is behind the new clinic. And Windom's chief growth and strategy officer Dan Blue joins us now for more. Thanks for your time this afternoon, Dan.

DAN BLUE: Thank you for having me.

NINA MOINI: It's nice to hear about some growth in care. And the Fairmont Clinics opened, I understand, October 1. Can you talk a little bit more about what kind of health care is available right away and how it's been since you opened up?

DAN BLUE: So, yes, we're just opening. And we are taking a phased approach with our getting started. It's a new startup and an expansion for Windom Area Health, which Windom is a community located around 40 minutes away from Fairmont. But we see this community as really part of our geographic region. We're beginning to open with our specialists.

We have general surgery, urology, OB gynecology to start. A lot of these are services that had been present historically in Fairmont, but have been removed or shut down over the last several years. And so there's really a demand and pentup need.

NINA MOINI: That's so interesting. I almost would think about the strategy there, I wonder, phasing it in makes a lot of sense. And focusing in on those specialties is interesting, too, versus primary and urgent care coming later. Can you talk about is there more of a need for specialty care?

DAN BLUE: Well, in our rural health care, there are so many challenges and pressures that's affecting it. And we're seeing a number of the specialty offerings diminish, especially things that I consider bread and butter, core kind of services to a community and a region. General surgery is so important. Especially when we're having emergency rooms and that, you want to be able to have the skill and capability to handle trauma cases and those types of things.

Also, we're dealing with a demographic that is a little bit older. And as a result, the transportation and the expectation that these individuals need to go 100 miles, potentially, 60 to 100 miles one way is burdensome, to the point that actually people say, I'm not going to go have that colon screen, or I'm not going to get that procedure.

So in Windom, we've had the good fortune over the last four years to say, you know what? We're going to take our destiny in our own hands and chart a different course. And it really is different than what we see in a lot of rural communities. We have been blessed to have really good staff, great nursing, and resources that enable us to grab on to some of these specialists and keep them in our region.

And I think the thing that is so unique about this deal with Fairmont, by us going and opening a clinic there and restoring and bringing these services back to that community, it's not only good for Fairmont, it is good for Windom because one of the toughest things in rural health care is recruitment and retention of talent. And this gives us a footprint that we can actually recruit multiple specialists to a group practice that they can have good work-life balance and high quality of life. And so that's really the strategy.

NINA MOINI: Can you talk a little bit more about the independent clinic networks in areas and how it differs? What do you feel makes this service special or more individualized?

DAN BLUE: Well, again, I think independent rural health care, hospitals and clinics, again, they've had limited choices over the past many years. They either had to contract their services, or they had to sell out in many places. Historically, a lot of big organizations have buoyed or helped some of these rural communities. But we're seeing now that there's really this push to consolidate and contract services and have people go to the bigger cities to receive that care. And we just believe there needs to be a better model than that.

NINA MOINI: What role do you think state or federal funding can play in supporting rural health care?

DAN BLUE: Well, right now is an interesting time in that there are a lot of dollars that are at the federal level to help push or seek solutions for transformation of rural health care. You've heard a lot about rural health transformation funds as part of the Big Beautiful Bill. And that's a five-year commitment by the federal government to invest into rural health care. It is governed by the states.

And each state has a little bit of a different take on it. But these dollars are really important in helping to get some basic things, whether it's technology or services, in place that can be sustainable into the future.

NINA MOINI: What do you hear from folks in Windom or Fairmont, just in the area, about what it's like for them? I mean, for a lot of people, it is hard to imagine going 60 minutes or 60 miles away for the doctor.

DAN BLUE: Yeah, because it isn't just to go a one time thing. Many times, whether it's OB, there can be multiple trips.

NINA MOINI: Right.

DAN BLUE: And again, with elderly, there can be pre-procedure or preoperative kind of trips and diagnostics. Then there can be a procedure, and then there are trips afterward.

NINA MOINI: And transportation, right, is a huge barrier sometimes for folks who maybe can't drive themselves.

DAN BLUE: And I think if we're really going to get our hands on total cost of care and trying to have high quality, lower cost, we need to step up the game locally. And historically, it doesn't make sense to have a hospital every 15 miles. We all get that. But there has to be some of these institutions in the rural setting that have a broader scope of services that they can offer and really be able to deliver those services more local.

NINA MOINI: Just lastly, tell me a little bit about what your hope is for the future. I mean, with that in mind, is there more room for growth, I'm assuming, in that area? What else is there a need for?

DAN BLUE: So my hope is that we want to build this so that it is sustainable and that we have stability for health care in the region. We know that we can't do everything, that we still need the tertiary centers and relationships for some of the big procedures and that. But there is a lot of health care that can be delivered locally. And through expansion of these services, expansion of the geographic footprint locally here in our region in southern Minnesota, we'll be able to recruit and retain those kind of services long term.

NINA MOINI: Thank you so much.

DAN BLUE: Yeah, we're going to listen to the community. We're going to start slow. And as we sense the needs, we're going to step up and try to fulfill those needs.

NINA MOINI: Thanks so much, Dan. We really appreciate it. Wishing you well with all of this.

DAN BLUE: Thank you for having me.

NINA MOINI: That's Windom Area Health Chief Growth and Strategy Officer Dan Blue.