



March 2021

Rob Fairweather Acting Director,  
Office of Management and Budget  
Executive Office of the President  
725 17th Street,  
NW Washington, D.C. 20503

RE: Recommendations from the Metropolitan and Micropolitan Statistical Area Standards Review Committee to the Office of Management and Budget: Changes to the 2010 Standards for Delineating Metropolitan and Micropolitan Statistical Areas Dear Acting Director Fairweather,

On behalf of the New York State Association for Rural Health (NYSARH), we appreciate the opportunity to provide formal comments on the recommendations from the Metropolitan and Micropolitan Statistical Area Standards Review Committee to the Office of Management and Budget (OMB). NYSARH understands that population-related definitions need to be re-evaluated and modernized overtime. However, we are deeply concerned that this change in the definition of Metropolitan and Micropolitan Statistical Areas (MSAs and MiSAs, respectively) will result in a large shift in definition in a short time without fully understanding its impact.

The proposed change has the potential to significantly affect the way researchers, policy makers, and federal funding agencies address rural needs. By implementing the desired change OMB has put forward, increasing the minimum urban area population to qualify an area as an MSA from 50,000 to 100,000, 144 MSAs will be reclassified as MiSAs. Currently, there are 392 MSAs listed for the United States. Removing 144 will result in a 37% reduction in identified MSAs. Alternatively, it would bring the total of MiSAs from 547 to 691, an increase of more than 25%. This proposal recategorizes 251 counties and 18 million people as nonmetropolitan by labeling several micropolitan urban counties as rural.

Of the 144 MSAs that will ultimately be converted to MiSAs under this proposal, many are large by comparison, and not something the average person would consider non-Metro.

NYSARH believes that there is also an element of social justice related to this issue. Typically, the suburban areas captured by this restructuring are wealthier and better connected than the rural communities currently considered Micropolitan. This may create unfair competition for federal resources.

## Recommendations and Questions:

1) NYSARH believes a more gradual approach to addressing the MSA and MiSA designation would be favorable to rural health care providers and the communities they serve. NYSARH does not see the evidence-base to change the population threshold for an MSA from 50,000 to 100,000, and frankly, we believe it is too large of a leap. NYSARH believes OMB would be better served to change the definition of an MiSA 75,000, or lower. Gradually changing the definition from 50,000 to 75,000 will allow for less dramatic shifts in accompanying resources and policies.

2) NYSARH recommends OMB provide additional justification for the proposed policy change. While updating population, urban, and rural metrics is important, such a significant shift in policy could have unanticipated consequences. The benefit to rural or urban America created by shifting so many MSAs to MiSAs is unclear. While the population of the U.S. has doubled since the metropolitan definition was established, the blunt approach of therefore doubling the threshold for determining metropolitan areas does not show the kind of nuance needed for complex policy development. NYSARH recommends that OMB provide additional analysis on how the change in definitions may affect federal research and/or federal programs.

NYSARH is a not-for-profit, non-partisan, grassroots organization working to preserve and improve the health of the citizens in rural New York State. The organization is affiliated with the National Rural Health Association. NYSARH collaborates on issues affecting the health and well-being of New York's rural residents. As a statewide organization advocating for the health of rural New Yorkers, NYSARH functions as the "voice for rural health."

Thank you for the chance to offer comments on the recommendations OMB has received from the Metropolitan and Micropolitan Statistical Area Standards Review Committee for changes to those area standards. We look forward to continuing our work together to ensure our mutual goal of improving quality and access to care, especially in rural America. If you would like additional information, please contact me at [sara@nysarh.org](mailto:sara@nysarh.org).

Sincerely,  
*Sara Wall Bollinger*  
NYSARH