



# valley news & views

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Your weather



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Hi, hello and welcome  
to our subscriber  
of the week:

Jean Boulduc  
Drayton, ND

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features for this year's  
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## It's harvest time in the Valley

This photo was taken by Christine Jensen while helping her brother, Gary with the wheat harvest on the Oakdale Farm.



## ATLAS telehealth program for Pembina County veterans

By Nick Vorlage

The VA Fargo Health Care System, alongside the Pembina County Veterans Service Office, has announced a new ATLAS site will be opening in Cavalier in just a few weeks.

ATLAS, which stands for Accessing Telehealth through Local Area Stations, is part of the VA Anywhere to Anywhere telehealth initiative. Through ATLAS, veterans from Pembina County and the surrounding region will be able to connect to VA providers without having to worry about barriers such as having to plan a trip to Fargo or having to try and schedule around harsh weather conditions.

The ATLAS site is to be set up at the Pembina County Veteran Service Office in Cavalier and will provide a private space for veterans to utilize a secure VA video connect application. An attendant will be on hand to assist with check-ins and handle any technical issues but will not be employed through the VA and will not take part in any video conferences.



Paige Gunderson, \$1000 scholarship recipient. Submitted photo



Ellie Haltom, \$500 scholarship recipient. Submitted photo



Aleah Pokrzywinski, \$1000 scholarship recipient. Submitted photo

## 2025 Ruth Hollis Healthcare Scholarship awardees

Heartfelt congratulations to the 2025 Ruth Hollis Healthcare Scholarship Awardees. This scholarship was established to honor Ruth Hollis, a long-time administrator of Pembina County Memorial Hospital and Wedgewood Manor. Ruth recognized the importance of rural healthcare and what it meant to have access to quality care.

This award recognizes student's dedication, compassion, and commitment to pursuing a career in healthcare - a field that changes lives and strengthens our communities. We look forward to following their journeys and celebrating their future successes.

### Congrats to these awardees

**Cora Carignan** was awarded \$500. Currently a student in Walhalla, she'll be attending University of Jamestown for Nursing

**Paige Gunderson** was awarded \$1,000. Gunderson is from Cavalier and will be studying at Northland Community & Technical College to become an Occupational Therapy Assistant

**Ellie Haltom**, a \$500 awardee is from Drayton. She will be attending Northland Community & Technical College for Nursing

**Kaylee Kemp** was awarded \$2,000 Kemp is a student in Cavalier who will be attending the University of Mary for Registered Nursing with Addiction Counseling

**Aleah Pokrzywinski** was awarded \$1,000. Pokrzywinski is a Drayton student who plans on attending the University of North Dakota for Psychology

Best of luck as you begin a new school year.

## North Dakota rural health issues

Submitted by Brad Gibbens, North Dakota Rural Health Association, Board Member and Policy Committee Co-Chair

The North Dakota Rural Health Association (NDRHA) represents and advocates for rural North Dakotans on a range of health issues. Federal health policy does not always work well in rural areas. Nationally, only 20 percent of Americans are classified as rural; nevertheless, rural populations are more reliant on federal health and social service programming. A higher percentage of rural residents receive Medicaid than urban. In North Dakota, 54 percent of the people using Medicaid are rural.

In rural North Dakota, people have pride in their communities. They care about their neighbors. The people they meet at the clinic are the same people they sit next to at the basketball game, or at church, or visit with in the grocery store. Rural communities tend to be collaborative, creative, and resilient. People band together for the good of the town. At the same time rural areas have barriers to deal with that impact both health and health care.

One barrier is access to care, which includes physical remoteness and isolation, the distance between services and resources; financial insecurity such as higher rates of unemployment, poverty, and less health insurance; lower and less reliable payment to health care providers and facilities; and health workforce shortages and maldistribution.

A second barrier is "mortar and brick" or the physical infrastructure of a community and a health system. The third barrier is technology, including broadband which is essential for modern health systems. And a fourth barrier is economics, including maintaining a viable local economy providing good paying jobs and growth opportunities.

What happens in Washington DC has an impact on us in our daily lives affecting family and friends. The recently passed One Big Beautiful Bill Act (OBBBA) is a massive federal policy change that

impacts our health care system and even our personal health.

The OBBBA ushered in many health-related changes that can have a negative impact on rural North Dakota. This includes reducing access to care and contributing to poorer health outcomes. Over a ten-year period, OBBBA will cut Medicaid by \$1 trillion nationally. This includes a projected \$1.4 billion cut to North Dakota (source: North Dakota Legislative Council). The cause of reductions is related to a stronger work requirement. The new work requirement stipulation is not necessarily a bad idea; however, nationally, 67 percent of adult Medicaid recipients already work (72 percent in ND). Another 20-25 percent are either disabled/ have medical issues preventing work or are family care givers and not required to seek employment.

Nationally, the federal government estimates that 12-17 million would lose Medicaid coverage, primarily those in Medicaid Expansion. Out of the 105,000 ND Medicaid recipients, upwards of 18 percent or 19,000 would lose access in the state (Legislative Council). The reason for the reduction in the number of Medicaid participants is directly related to implementing the work, and especially the reporting requirement, the administrative function is needlessly burdensome - applying twice a year, reporting work data, online, monthly to prove they are working, dealing with cumbersome online systems and technology, making re-application mistakes and/or administration burdens, having to wait to reapply, and added service costs/out-of-pocket expenses for those on Medicaid Expansion (\$35 service fee). Nationally, about 40 percent receiving Medicaid Expansion are expected to lose access. With rural North Dakota's high utilization of Medicaid this will have a profound impact in rural areas for patients and health providers. Future policy needs to ensure that work requirements help as oppose to

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