pathroot™ health

The Key to Success in the Rural Health Transformation Program

A $50B Grant for States to "Make America Healthy Again"

Carolyn Bradfield

Pathroot Health

Bruce Ahern

Pathroot Health

RURAL HEALTH TRANSFORMATION

- Define the program
- Understand the priorities
- The application process
- The rules
- How to advocate

Healthcare in Rural America

- **60M** live in rural America
- Rural Americans are more likely to die from **chronic disease**
- **75%** of rural Americans live in areas with **shortages** of dentist, primary care & mental health providers
- **Rural residents** are older, have higher rates of smoking, hypertension, obesity, poverty, and are less likely to have insurance

$25B

Baseline: Split evenly among the states

$25B

Workload: Awarded on metrics and application

Understand their Communities

Design solutions to fit local needs

Accountable for Results

Tie funding to achievement of goals and outcomes.

Collapse Time to Value

States can pull funds together, launch programs quickly, and scale what works statewide.

An Expedited Timeline

July 25
Big Beautiful Bill

September 9 & 15
Information webinars for states

November 5
Applications Due

December 31
Notification of funding

January 2026
1st funding period begins

Federal Priorities

Make Rural America Healthy Again

Prevention
Chronic Disease
Behavioral Health
Prenatal Care

Sustained Access

Efficiency
Sustainability
Reduced Cost
Improved Care

Workforce Development

Attract & retain
Develop
Train
Broaden Roles

Innovative Care

New Care Models
Flexible Care Payment
Incentivize ACOs

Technology Innovation

Care Delivery
Security
Digital health
Share data
New Technologies

Use of Funds

Prevention & Chronic Disease

Provider Payments

Consumer Tech Solutions

Training & Technical Assistance

Workforce

IT Advances

Select a Minimum of 3 Categories

Appropriate Care Availability

Behavioral Health

Innovative Care

Capital Expenditures Infrastructure

Fostering Collaboration

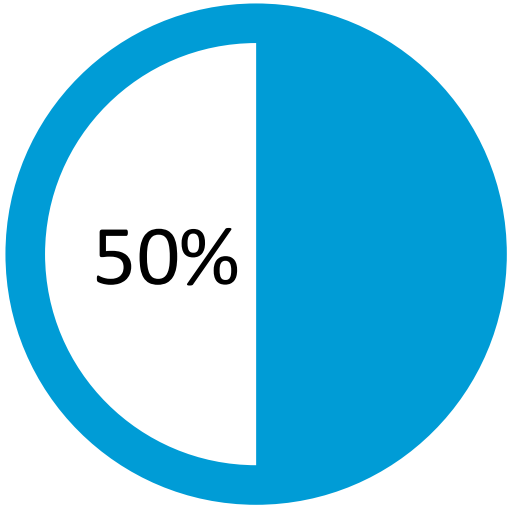
Common Themes

Prevent & Manage Chronic Disease

Attract, Retain & Educate the Workforce

Innovative Ideas & Technology

Workload Scoring

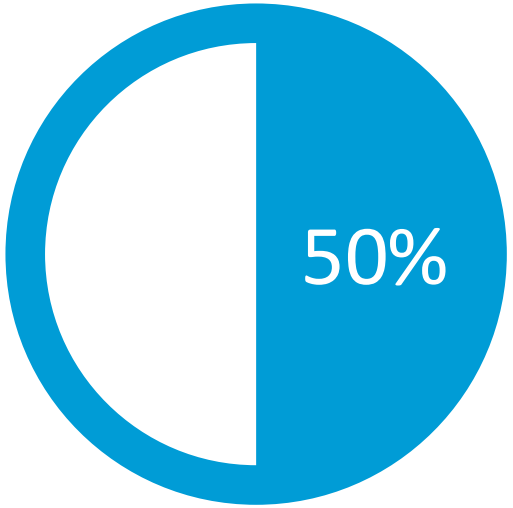


Data Driven Metrics

Total State Population
Proportion of Rural Health Facilities
Uncompensated Care
% of Population in Rural Areas
How “frontier” is the State
Total Square Miles
% of Hospitals that receive Medicaid DSH

Set in year 1 and do not change

Workload Scoring



Technical Score

Initiative Based

Propose credible programs and a plan to carry them out.

State Policy Actions

Policies you already have or will adopt with this award

Data Driven

Measurable metrics compared with other states.

Workload Scoring

I = Initiatives
S = State Policy
D = Data

I	Population Health Clinical Infrastructure	Capacity for team-based, preventive, community health care
I, S	Health & Lifestyle	Programs/policies addressing tobacco, obesity, activity, etc.
S	Snap Waivers	Use of nutrition supports/flexibilities to improve health
I	Nutrition CME	CME requirements/offers on nutrition
I	Provider Strategic Partnerships	Formal collaborations across hospitals, FQHCs, EMS, behavioral health, etc.
I	EMS	Strength of emergency medical services and integration with care
S	Certificate of Need	How CON rules affect access/competition
I	Talent Recruitment	Programs to recruit/retain clinicians, especially rural.

Workload Scoring

I = Initiatives
S = State Policy
D = Data

S	Licensure Compacts	Participation in interstate compacts (e.g., nursing, medical, counseling
S	Scope of Practice	Enabling advanced practice providers/pharmacists, etc., to work at top of license.
I	Medicaid Provider Payment Incentives	Value-based, rural add-ons, or other incentives.
I,D	Medicaid/Medicare Eligibility	Policies/programs that improve outcomes for duals
S	Short-Term Limited Insurance	State stance/controls due to access/continuity impacts.
I	Remote Care Services	Telehealth/RPM/virtual care access and reimbursement
I	Data Infrastructure	HIEs, analytics, registries, and reporting capacity.
I	Consumer-Facing Tech	Tools for patients/families (portals, apps, navigation, education)

Key to Success

Focus on Initiatives
Carry the most point value

Address the 5 Criteria
Strategy, Workplan & Monitoring, Outcomes, Projected Impact, Sustainability

Policies
Change state policies to align with RHTP goals

Add more in-home visits for people with chronic disease

Deploy medical supply vending machines

Provide transportation support

Distribute unopened medicine via repositories

Enable workforce with AI tech to increase efficiency

Virtual communities to support family caregivers for chronic disease

Remote patient monitoring, wearables to collect & transmit data

Connect regional providers in a data exchange system

Things to Know

Evaluation
CMS will evaluate annually and may adjust workload funding

Redistribution
Money not spent in the funding year, or a lower score will cause funds to be redistributed.

Priorities & Initiatives
Cannot be changed throughout the 5-year period.

Application
Only the state can apply through a “lead agency”

External Providers
States can contract with consultants, tech providers etc. to deliver the initiatives

Data Driven
You must be able to measure the results and report to CMS

Time to Act

Get in touch with your state's workgroup

Focus on Innovative Ideas and Initiatives

Provide vendor-agnostic drop in language for the application

Pathroot Health

Access to who to contact in each state

Example of a 1-page idea overview

Sample application language

pathroot™ health

The Key to Success in the Rural Health Transformation Program

carolyn@pathroot.com
bruce@pathroot.com