Rural Health Transformation Program (RHTP) Advisory Council

Council Meeting Minutes

Date: July 1, 2026

Location: Virtual

Meeting Attendance

Name	Organization	Title	Attendance
RHTP Advisory Council Members			
Deputy Commissioner Emily Ricci	Alaska Department of Health	Chair	Present
Nils Andreassen	Alaska Municipality League	Member	Present
Senator Cathy Giessel	Alaska State Senate	Member	Present
Jared Kosin	Alaska Hospital & Healthcare Association	Member	Present
Gen Moreau, designee for Monique Martin	Alaska Native Tribal Health Consortium	Member	Present
Tari O'Connor, designee for Nancy Merriman	Alaska Primary Care Association	Member	Present
Representative Genevieve Mina	Alaska House of Representatives	Member	Present
Mary Wilson	Alaska Mental Health Trust Authority	Member	Present
State of Alaska, Office of the Commissioner Staff			
Lauren Hughes	Senior Program Coordinator, Rural Health Transformation		
Alison Miller	Project Coordinator, Rural Health Transformation		
Julie Sanbei	Publications Specialist		
Leah Van Kirk	Health Care Policy Advisor		
Betsy Wood	Director, Office of Health Savings		
Alaska Community Foundation			
Alex McKay	Alaska Community Foundation		
Desiree Jackson	Alaska Community Foundation		
Chellie Skoog	Alaska Community Foundation		
Megan Cacciola	Alaska Community Foundation		

Meeting Summary

I. Welcome and Call to Order

A. Roll call

Emily Ricci, Deputy Commissioner, Alaska Department of Health, called the meeting to order, confirmed that a quorum was present, and welcomed Council members. She reiterated the purpose of the Advisory Council as an advisory body to the Commissioner and noted that meetings would continue to follow an informal version of Robert's Rules of Order to support structured and efficient discussion.

B. Approval of Agenda

Deputy Commissioner Ricci presented the meeting agenda and invited comments or proposed revisions. Hearing no objections, the agenda was approved.

C. Approval of Minutes

Deputy Commissioner Ricci presented the minutes from the prior meeting for approval. Hearing no objections or requested revisions, she confirmed that the minutes were approved as presented.

II. Department Updates

A. Year 1 Progress, updates and timelines

Betsy Wood, Director, Office of Health Savings, Alaska Department of Health, provided an update on program progress. She highlighted key accomplishments over the past year, including statewide partner engagement, the kickoff convening, the release of the LOI and RFP processes resulting in nearly 1,800 submissions, delivery of the RHTP learning series, and initiation of regional planning meetings. She also noted recent legislative advances supporting interstate licensure compacts and pharmacist scope-of-practice. Ms. Wood stated that the Department has opened the implementation application period and is in the final review of information required to execute planning subawards.

Ms. Wood reviewed the year-one funding timeline, noting that LOI outcomes were released in late May, and full applications were submitted between June 1–22. She reported that applications are now undergoing administrative, project, and portfolio review. She added that the Department will then work with CMS on required federal review before DOH and ACF finalize and execute award agreements, with implementation awards anticipated to begin in August.

Gen Moreau, Alaska Native Tribal Health Consortium, asked whether the Department is soliciting or receiving feedback on the LOI and RFP processes. She noted the importance of identifying efficiencies for the Department, the Alaska Community Foundation, and participating organizations, including smaller entities that navigated the application process.

Betsy Wood affirmed that there would be an opportunity for feedback during this meeting and that the Department is very interested in feedback.

B. LOI Process Review and Outcomes

Betsy Wood reported that of the 403 proposals advanced into the application stage, the department ultimately received 365 full applications. She emphasized that the process began with nearly 1,800 Letters of Interest, which were narrowed down to the 365 proposals the department is now reviewing.

Ms. Wood explained that LOI advancement decisions were based on several inputs, including ACF's initial organization of submissions, department expertise, and broader considerations such as portfolio balance, available funding, and strategic priorities. Throughout the review, the department focused on whether each project would meaningfully advance rural health transformation and whether it was ready for implementation. They also considered alignment with RHTP initiatives, potential impact, readiness, funding fit, partnership and coordination needs, external dependencies, and how each project would contribute to a balanced statewide portfolio.

Deputy Commissioner Ricci added that the team observed recurring themes and similar ideas across different organizations. Some proposals were not advanced because they required greater coordination with overall system needs before moving forward, or because they may be better suited for future funding rounds or other departmental resources. She noted that reviewing all 1,800 LOIs helped identify statewide needs and potential areas for future investment. Deputy Commissioner Ricci emphasized that RHTP aims to strengthen the overall system, and decisions considered what conditions must be in place for projects to succeed and for system-wide improvements to occur.

Senator Cathy Giessel, Alaska State Senate, noted (via chat) she was aware of grant funds being allocated to a behavioral health entity that already had the service being offered, and asked if a database was consulted to determine pre-existing services and if an AI database was created and consulted to prevent this?

Deputy Commissioner Ricci explained that the state currently lacks a strong database to track existing or emerging services, which has created a significant information gap. To address this, a statewide provider and service gap analysis was built into the milestones. This work, initially focused on behavioral health, is now expanding to other service areas. The analysis will help guide future funding decisions and inform how the department supports service expansion. Deputy Commissioner Ricci noted that while the ideal sequencing of this work would have been different, the team is moving forward as quickly as possible.

Betsy Wood added that the provider gap analysis, combined with ongoing community and regional planning efforts, is revealing strong collaboration across organizations. Communities are identifying needs, coordinating efforts, and reducing overlap, which will further inform future planning.

Gen Moreau thanked the Department for the partnership matrix, noting that it would be an effective tool to understand how services will fit in with regional needs as defined by the region itself. Tribal health organizations did a deep dive into the distribution of applications that were moved forward and noticed that applicants that selected the statewide category may not have actually worked or partnered with all regions, or the regions they identified. The partnership matrix will provide useful information to assess partnerships that are actually in place.

Betsy Wood explained that while initial Letters of Interest provided useful early information about partnerships, many of the partnerships described were planned rather than established. To better assess partnership strength, the department developed a partnership matrix with support from the Alaska Community Foundation, allowing them to more clearly evaluate which relationships were active and well-developed.

She also noted the importance of accurately assessing each project's geographic reach. During the LOI process, organizations identified where they currently work and where they expect their project to have impact. The department reviewed this information to determine whether proposed statewide or regional reach was realistic and supported by existing partnerships. Additional questions in the full application were added to better understand where projects would actually be implemented.

Ms. Wood provided an overview of the portfolio that advanced from the Letter of Interest stage. She noted that 431 projects moved forward, including 403 implementation proposals and 28 planning proposals, representing 224 unique organizations. Projects

varied in size, though most anticipated requesting between $250,000 and $1 million, with refined budget details submitted in the full applications.

She explained that organizations self-identified their primary type, with healthcare providers making up about one-third of advancing projects, followed by community-based organizations and tribal organizations, alongside participation from EMS agencies, local governments, educational institutions, and others.

Ms. Wood also highlighted common themes across the advancing proposals. Collectively, they support all six RHTP initiatives through complementary investments, with many focused on expanding access to clinical care—especially behavioral health, primary care, EMS, and home and community-based services. Other major areas include strengthening the healthcare workforce, improving provider financial sustainability, modernizing health IT and data infrastructure, expanding telehealth and remote monitoring, and increasing care coordination and patient navigation. Additional proposals address maternal and early childhood health and tribal-led culturally grounded care models. She emphasized that, taken together, the portfolio advances the statewide vision for a more accessible, sustainable, and connected rural health system.

C. Implementation Application and Evaluation Process

Alison Miller, Rural Health Transformation Project Coordinator, provided an overview of the application process and the department's review approach. She explained that while the application asked for some of the same information as the Letter of Interest, this was done to give organizations more room to elaborate on their proposals and to refine several questions—particularly those related to organizational location, service areas, and target populations. The application also included new sections asking organizations to describe how they would implement their projects, identify responsible personnel, outline risks and mitigation strategies, and document partnerships. Applicants were required to submit several attachments, including a work plan with milestones, a detailed budget and narrative, partnership documentation, and standard DOH certifications.

Ms. Miller described the review process now underway. The department's subject matter experts are conducting the project-level evaluation, while ACF is completing an administrative review to ensure applications are complete and allowable. The project evaluation uses the published rubric-based framework, with applications scored across eight categories. To move forward to the portfolio analysis stage, projects must score at least a three in each category.

She noted that the portfolio-level review will examine how projects fit together statewide, ensuring balanced coverage, alignment with needs, and equitable service to populations. This stage will be completed by Deputy Commissioner Ricci and Commissioner Hedberg, with the Commissioner making final award decisions. Ms. Miller emphasized that the review process is designed to be clear and transparent for both applicants and reviewers.

Betsy Wood provided a refresher on the funding timelines for the first RHTP cycle, noting that the state's allocation periods, federal fiscal year, state fiscal year, and RHTP budget periods do not align and must be tracked together. She explained three key timeframes: the CMS cooperative agreement budget period during which the state receives and must obligate funds; the federal expenditure window, which allows an additional 11 months—through September 30, 2027—to fully spend those funds; and the performance period for subrecipients, which defines when awardees carry out project activities. The performance period ends before the federal expenditure deadline to allow time for reporting, reconciliation, closeout, and any necessary extensions. She noted that the visual provided in the slides is intended to clarify how these timelines fit together for the first funding cycle.

Gen Moreau shared technical feedback from tribal health organizations regarding the funding timeline. She noted that organizations required to follow federal procurement rules may need 60–90 days to complete a compliant RFP process, which could conflict with the compressed project timelines and create challenges for completing work on time. She asked whether any flexibilities might be available to address this concern.

She also raised a technical budgeting question. Traditional federal awards often allow 10–25% flexibility between line items, but RHTP budgets are structured by initiative and allowable cost categories. She asked how much variability will be permitted between these federal cost categories and how initiative-level restrictions will affect budget adjustments within a project. She offered to discuss these issues further in a virtual office hour.

Betsy Wood acknowledged the concerns raised and noted that other organizations have shared similar questions. She encouraged applicants to reach out directly to the DOH RHTP program team or the Alaska Community Foundation for project-specific guidance.

She noted the Department is aware of the tension between federal requirements and tight implementation timelines. She said the state is experiencing similar constraints and works closely with CMS to clarify requirements. CMS provides more useful guidance when reviewing specific project examples rather than general questions, and encouraged organizations to contact the department so it can work with CMS to determine allowable

approaches. As the department receives clarification from CMS, it aims to update resources, office hours, and written guidance to support all partners. CMS is still refining aspects of this new program and that ongoing questions from states, including Alaska, help strengthen federal guidance.

Nils Andreassen, Alaska Municipal League, noted that while Alaska often seeks unique approaches, compliance with federal requirements remains mandatory. He cautioned that repeated rounds of clarification with CMS can delay projects and emphasized the need to improve procurement processes, so they are both faster and compliant. If an organization cannot meet procurement requirements within the available timeline, this will affect the project's feasibility and may require rescoping or redesign. He acknowledged CMS's responsiveness but encouraged applicants to factor compliance and timeline constraints into their planning to avoid compounding delays.

Betsy Wood agreed that compliance requirements ultimately limit flexibility, even with CMS's responsiveness. She noted that some projects may need to be sequenced into future funding rounds to ensure feasibility within required timelines. Addressing the budget flexibility question, she clarified that organizations should select a primary RHTP initiative for reporting purposes, even if their work overlaps multiple areas. She explained that CMS allows up to a 10% shift between federal cost categories (such as personnel, travel, or contractual) without a budget amendment, and this flexibility will apply to subrecipients as well. In contrast, the programmatic "A–K" fund categories are used for reporting and do not carry the same 10% restriction, though organizations should communicate significant shifts. She noted the department will continue providing written guidance on these technical requirements.

Ms. Wood explained how the funding timelines translate to awardees' performance periods. She noted that implementation awards are expected to begin in August, with August 1 being the earliest possible start date, though final timing may vary due to CMS review and grant agreement processing. Awardees should plan to complete project activities and fully expend funds by June 30, 2027, followed by annual reporting. This schedule allows the state to meet federal deadlines for final expenditure and reporting by September 30, 2027. She added that this annual cycle will repeat in future years, with consistent 12-month performance periods planned for all RHTP funding opportunities.

D. Observations and Insights

Betsy Wood shared several lessons learned from the first program year. Interest in the program was far greater than expected, showing strong statewide demand. Readiness

grants, as originally designed, did not fit federal requirements, so the department is shifting toward expanded technical assistance and support for subrecipients. Proposals aligned well with the six RHTP initiatives, reflecting the value of the community-informed framework.

The Letter of Interest process provided a helpful statewide baseline, and the department plans to refine and simplify future rounds to reduce applicant burden. The Department is working with Guidehouse to create public dashboards showing which projects advanced, their locations, and their focus areas, giving partners and the public a way to track funding and progress.

Deputy Commissioner Ricci reiterated the department's commitment to making program information accessible through a searchable public dashboard. She noted the initial dashboard will serve as a starting point and will be refined over time as the program grows and as feedback is received. Deputy Commissioner Ricci then invited the Advisory Council to share any questions, thoughts, or feedback on the process and said she hopes to return after awards are issued for a deeper discussion of observations and lessons learned.

Representative Genevieve Mina, Alaska House of Representatives, asked who is designing the dashboard—Guidehouse or the Department—and requested insight into themes among proposals that were not advanced, noting the value of lessons learned for organizations that will not receive individualized feedback.

Deputy Commissioner Ricci explained that the dashboard is being codesigned with Guidehouse and will reflect key project details in an accessible format. The tool is intended to share information about project moving forward that supports the needs of the public and interested parties. The Department is interested in reviewing the functionality of the tool with this group and other organizations that may use it.

Betsy Wood, in response to Representative Mina's question, noted that most LOIs were not advanced because overall funding requests far exceeded available resources. Total year 1 asks were approximately $2.5 billion, much higher than the $272 million awarded. Decisions were guided by alignment with RHTP initiatives, readiness, feasibility, and the need for coordinated statewide approaches. Future funding rounds will offer clearer guidance upfront to help organizations better align proposals and my include state directed opportunities.

Deputy Commissioner Ricci added that the LOI process identified similar or aligned efforts that need additional statewide coordination and may require bringing parties

together to support and shape year 2 planning. She noted the importance of system coordination to avoid fragmentation as foundational to this work.

Representative Mina, referring back to the dashboard**,** suggested modeling the dashboard after DOT&PF's STIP tool and encouraged earlier public sharing of themes from non-advanced LOIs so organizations can begin collaborating independently.

Deputy Commissioner Ricci agreed and noted the Department will rely on partners and welcome the support to help facilitate coordination where needed.

Jared Kosin, Alaska Hospital and Healthcare Association thanked the Department and ACF for their extensive work during the first RHTP funding cycle. He noted that lessons learned will help shape future rounds and asked whether additional supports or resources could help the Department sustain its workload as the program continues to grow.

Deputy Commissioner Ricci expressed appreciation and reiterated that, while many promising concepts emerged from the LOIs, the Department does not have capacity to coordinate all efforts. She emphasized that the immediate priority is finalizing year-one awards. She encouraged organizations to independently begin aligning and collaborating where appropriate and to notify the Department, which can help connect them with partners such as the Alaska Mental Health Trust Authority, Alaska Municipal League and Alaska Hospital and Healthcare Association, and entities represented on the Advisory Council. She noted that external facilitation and early collaboration will be valuable heading into year 2.

Betsy Wood emphasized the importance of early collaboration among organizations. She noted that the LOIs and applications reveal strong building blocks for advancing the six RHTP initiatives and encouraged partners to work together on shared priorities to support cohesive, statewide progress. She explained that collaborative planning early on will help ensure broader system transformation over the five-year program.

Tari O'Connor, Alaska Primary Care Association, expressed appreciation for the Department's significant workload and stressed the importance of prioritizing timely distribution of funds, with partners stepping in to support other aspects of the process where possible. She asked how rural representation and geographic reach are being factored into funding decisions, given that many lead organizations are based in urban hubs, and how both service reach and organizational locations might be represented in the dashboards.

Betsy Wood emphasized the importance of timely fund distribution and noted that the Department of Health and the Alaska Community Foundation are working closely to streamline post-award processes so funding can move quickly once decisions are made. She invited ACF to share more about ongoing improvements.

Alex McKay, Alaska Community Foundation, explained that each step of the process revealed opportunities to better prepare applicants and strengthen technical assistance in future rounds, noting the improved partnership matrix tool as an example.

Betsy Wood added that geographic representation is a key consideration in the portfolio review process, which evaluates not only where an organization is located but where project activities will occur and whom they will reach.

Deputy Commissioner Ricci noted that proposals claiming statewide or regional impact must demonstrate genuine partnerships with relevant local entities; without clear evidence in the application or partnership matrix, it is difficult to assess feasibility or meaningful regional engagement. She emphasized that the evaluation framework is designed to address these issues.

Alex McKay added that reviewers are from various communities across the state and bring knowledge and expertise that can assess feasibility and sufficient community connections.

Mary Wilson, Alaska Mental Health Trust Authority highlighted the value of recent community convenings, which help define local priorities and clarify when state partnership is required. She noted significant system inefficiencies around medical record sharing and administrative burden, which could be reduced through automation or AI—particularly important for rural communities with limited staffing. She shared that the Trust and other foundations plan to identify gaps after awards are finalized and assist with unmet needs. She added that the Trust continues providing technical assistance to applicants and is exploring internal AI tools to free staff for more strategic work.

Deputy Commissioner Ricci welcomed this support and emphasized the need for clear communication about external resources available to applicants and subrecipients heading into future rounds.

Gen Moreau expressed concerns that the partnership matrix may not have been required for some statewide proposals, potentially missing important regional relationships. She suggested using robust data sources, such as patient zip codes, to better understand

geographic reach and regional distribution. She requested more information on the provider gap analysis once available, noting that its findings will depend on how questions are framed. She also emphasized the importance of honoring federal protections for Alaska Native and American Indian people as value-based care discussions expand, including opt-in requirements for managed care participation.

Deputy Commissioner Ricci agreed that data must be paired with community validation and noted regional planning sessions help ensure gaps reflect lived experience. She shared that value-based care discussions were postponed to prioritize completing year-one awards but will resume later, recognizing Alaska's unique needs.

Nils Andreassen suggested that Advisory Council members form a small group to review non-advanced LOIs and identify themes that could support planning for Round Two. He volunteered to participate.

Jared Kosin agreed with the idea and volunteered to work with Nils' team to help compile observations and insights for the Department and ACF.

Deputy Commissioner Ricci thanked them and said the Department would welcome assistance, noting that high-level observations can be shared to help guide the group's work.

E. Regional Planning Highlights

Alison Miller presented regional planning highlights. The Department recently completed six regional planning meetings, finishing the most recent session in Cordova. These meetings are a required milestone in year one, with a second round planned for year three. The purpose is twofold: to compare state-held data with community experiences to ensure accuracy, and to help local partners begin forming connections and identifying opportunities to collaborate. She noted that even in smaller communities, participants discovered overlapping efforts—such as parallel transportation services for elders—which prompted conversations about working together rather than duplicating efforts.
Ms. Miller shared that the Department is producing a report after each meeting summarizing community input and providing a resource for local partners to continue planning on their own. She described one example from Cordova, where an EMS leader developed an idea for a workforce exchange program that could help address staffing shortages, an idea he now sees as potentially feasible under RHTP. She stated that three more regional planning meetings are upcoming, including sessions planned for Juneau and

the North Slope, with additional possibilities next year. She concluded that early progress has been encouraging and demonstrates strong community engagement.

III. Unfinished Business

No items were raised, and the meeting moved on to new business.

IV. New Business

A. Upcoming Reports

Betsy Wood shared that the program's first annual report to CMS is due at the end of August, covering activities from December 29 through July. The non-compete continuing application is also due then, and CMS expects it to closely align with the original project plan without major changes.

B. Milestones

Betsy Wood discussed the need to adjust program milestones, noting that initial timelines were overly ambitious and front-loaded toward 2028. She explained that CMS is open to states revising milestone timing to better reflect realistic progress, budget release timing, and partner dependencies. She emphasized that changes must be justified and will not remove milestone requirements.

Gen Moreau thanked the state for engaging with tribal health organizations and requested that the milestone for launching off-grid sanitation projects be extended, noting that no water projects appear to have advanced.

Deputy Commissioner Ricci acknowledged the concern, noting the need for additional context on construction requirements and federal processes to ensure successful funding awards. She added that updated milestones will be shared with the advisory committee and highlighted CMS's broader evaluation factors, including policy commitments and overall program progress.

Deputy Commissioner Ricci also shared insights from recent national conferences, stating that Alaska appears to be in the top tier of states in RHTP implementation. She expressed appreciation for the Council's collaborative engagement.

Nils Andreassen encouraged the group to "run your own race," emphasizing that Alaska should stay focused on its own priorities rather than comparing itself too closely to other states. He suggested that it may be useful for the council to review what other states are doing as part of a future agenda, potentially in September or October, to inform planning and strategy. Nils also noted the high level of public participation, with nearly 100 people

attending online, and thanked Alaskans for their engagement and attention to the state's work under RHTP.

C. Stakeholder Committee

Deputy Commissioner Ricci provided an update on the stakeholder committee, noting that although previously discussed, limited bandwidth has delayed progress. She emphasized that the committee has not been forgotten and suggested revisiting its formation in August or September. She asked the advisory council to consider whether the original concept still makes sense.

Representative Mina thanked the group and commented that a stakeholder committee could also help address follow-up items from the initial proposal review process, aligning with earlier remarks from Mr. Andreassen and Mr. Kosin.

V. Closing Items

A. Next steps and action items

Betsy Wood shared that ACF and DOH teams are fully focused on completing the application review quickly and thoughtfully. She noted Alaska's strong community-driven approach and said application decisions and follow-up requests are expected by month's end, asking organizations to monitor email closely in July.

Deputy Commissioner Ricci recommended reconvening the council in mid-August and thanked council members, as well as ACF staff for their partnership.

Deputy Commissioner Ricci invited final comments, hearing none, adjourned the meeting, and wished attendees a happy Fourth of July.