Recap: RHTP Impacts: Spark Technology and Innovation Kickoff Session, March 31, 2026

## Overview

The Alaska Department of Health (DOH) hosted an RHTP Impact Series session focused on Spark Technology and Innovation, highlighting how digital tools, data systems, and emerging technologies can transform healthcare delivery across Alaska's rural, remote, and frontier communities.

Facilitated by Dr. Anne Zink and Dr. Lisa Rabinowitz, the session emphasized practical innovation, collaboration, and Alaska-driven solutions to improve access, coordination, and quality of care.

## Purpose of the Impact Series

- Build a statewide community of practice
- Encourage cross-sector collaboration (providers, tech vendors, community organizations)
- Explore "big sky" ideas for system transformation
- Aligning initiatives with RHTP funding priorities and long-term impact

Reminder: These sessions are designed for connection and idea generation, not project promotion or funding decisions.

## RHTP Context

- 5-year federal rural health transformation initiative
- Alaska received ~$272 million in Year 1 funding
- Designed as an iterative, learning-based model:
    - Year-by-year refinement

    - Emphasis on scalable, sustainable solutions
    - Encourages testing, failure, and recalibration

## Technology & Innovation: Core Focus

Leveraging technology to create a more connected, proactive, and patient-centered health system that works across Alaska's unique geographic and infrastructure challenges.

### Key Objectives

- Expand telehealth and remote care
- Improve data sharing and interoperability
- Strengthen care coordination across systems
- Support providers and workforce through technology
- Empower patients through digital tools and access

## Key Technology Areas Discussed

- Telehealth and Virtual Care
- Remote Patient Monitoring (RPM)
- Wearables and Consumer Health Devices
- AI-Powered Clinical Tools (e.g., ambient documentation, diagnostics)
- Health Information Exchange (HIE)
- Cybersecurity and Data Protection
- Interoperability Across Systems
- Emerging Tech (e.g., drones, kiosks, simulation labs)

## Poll Results: Participant Priorities

Top priorities identified:

1. Technology to support providers
2. Telehealth access and expansion
3. Data quality, access, and analytics

Key insight: No single solution dominates, success requires integrated, system-wide innovation.

## Current Strengths in Alaska

- Strong telehealth adoption (including tribal health systems)
- Established Health Information Exchange (HIE)
- National leadership in remote diagnostics and care models
- Existing programs like Fresh Start leveraging remote monitoring and community support

## Key Challenges Identified

### Connectivity & Infrastructure

- Limited broadband and satellite capacity
- Difficulty transmitting large medical files (e.g., imaging)
- Inconsistent access in remote settings

### Interoperability Gaps

- Fragmented systems across:
    - Tribal health
    - VA
    - Private hospitals
    - State programs
- Limited ability to share data seamlessly
- Statutory barriers to sharing certain data (e.g., public health, behavioral health)

### Care Coordination Complexity

- Patients are often served by multiple systems simultaneously
- Lack of integrated care coordination tools
- Risk of duplication and fragmentation

### Workforce & Usability

- Technology can either:
  - Enhance care, or
  - Add burden
- Need for better workflow design and provider support

### Digital Literacy

- Gaps for both:
  - Patients (access and understanding)
  - Providers (adoption and integration)

## Case Study: “Tom” (Rural Patient Scenario)

The following scenario is a composite, hypothetical example designed to reflect common challenges experienced across rural health systems. It is not intended to represent any specific Tribal health organization or community. These examples also exist alongside significant strengths, innovation, and resilience within Tribal health systems.

A 62-year-old man in a remote community with chronic conditions highlighted system gaps:

- Irregular care access
- Delayed interventions
- Frequent emergency transport

### Technology-Enabled Future State

- Remote monitoring tracks health in real time
- Telehealth enables timely interventions
- Care teams proactively manage conditions
- Medical records follow the patient across systems
- Emergency transport is reduced

# Key Themes from Discussion

## Remote Monitoring & Early Intervention

- Continuous tracking of chronic conditions
- Alerts trigger early care adjustments
- Proven to reduce severe outcomes (e.g., heart attacks)

## Telehealth as a Foundation

- Expands access to:
  - Specialists
  - Chronic care management
- Must be reliable, scalable, and equitable

## Interoperability is Critical

- Systems must “talk to each other”
- Includes:
  - Clinics
  - Hospitals
  - Pharmacies
  - Remote devices

## Coordination Across Systems

- Patients may interact with:
  - Tribal health
  - Veterans Affairs (VA)
  - Medicaid/Medicare
  - Private providers

Need: Unified, patient-centered coordination—not siloed independent systems

## Patient-Centered Technology

- Tools must empower patients—not just providers
- Opportunities include:

    - Personalized health tools
    - AI-driven support systems
    - Improved access to records and care plans

## Workforce & Technology Integration

- Technology should:
    - Reduce administrative burden
    - Enhance clinical decision-making
- Opportunities:
    - Simulation labs for training
    - AI-assisted workflows

## Emerging & Innovative Solutions

- Drone delivery for medications
- AI-assisted care coordination
- Remote diagnostics and imaging sharing
- Satellite-enabled connectivity (e.g., Starlink)

## Data & Human Experience

- Data alone is insufficient

**Key insight:**

- Combine:
    - Clinical data
    - Cultural context
    - Patient stories

## Social Determinants & Community Context

- Technology must also support:
    - Food access
    - Cultural relevance
    - Community-based care

## Vision: A Transformed System

Participants described a future where:

- Care is continuous, not episodic
- Patients are monitored and supported at home
- Systems are fully connected and interoperable
- Technology enhances, not replaces, human relationships
- Care is patient-centered, culturally responsive, and locally accessible

## Critical Partnerships Identified

- Healthcare providers and systems
- Tribal health organizations
- Veterans Affairs (VA)
- Technology vendors
- Community-based organizations
- State agencies and policymakers
- Patients and caregivers

## Key Takeaways

- Technology is a critical enabler, but not the solution alone
- Interoperability and coordination are foundational
- Innovation must be Alaska-specific and community-driven
- Patient empowerment and digital literacy are essential
- Success depends on integrating:
    - Technology
    - Workforce
    - Policy
    - Community context

## What's Next

- Future sessions will:
    - Dive deeper into specific technology aspects

    - Explore implementation strategies and partnerships
- Poll results and discussion insights will guide:
    - Priority topics
    - Breakout discussions
    - Regional planning

## Action Items for Participants

- Identify opportunities to:
    - Expand telehealth and remote monitoring
    - Improve data sharing and interoperability
- Build partnerships across:
    - Systems
    - Regions
    - Sectors
- Consider how technology can:
    - Support providers
    - Empower patients
    - Improve coordination
- Participate in upcoming sessions and planning meetings
- Leverage DOH resources and technical assistance

RHTP represents a long-term opportunity to strengthen healthcare access, sustainability, workforce capacity, and system performance across rural, remote, and frontier Alaska.

*This project is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $272,174,855.72, pending approval of revised budget, with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.*

More information and updates can be found at: health.alaska.gov/RHTP