

Welcome





Advancing Rural Health Transformation: A Statewide Convening



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Poll #1

What part of the health sector do you work in (pick the most applicable)?

- Behavioral Health
- Direct patient care provider
- EMS
- Federally Qualified Health Center (FQHC)
- Hospital
- Local Government
- Social Services
- State Government
- Tribal Health Organization
- Other



Poll #2

Are you thinking about applying for RHTP funding?

- Yes
- No
- Not sure yet



Rural Health Transformation Program Basics



The RHTP is a **one-time, five-year \$50 billion federal initiative** to catalyze rural health care delivery transformation and improve access and health outcomes across the country.



Alaska submitted application for funding, November 2025.



The Centers for Medicare and Medicaid Services (CMS) awarded Alaska **\$272 million** to allocate between Jan and Oct 2026.

RHTP Vision for Alaska




- Ensure Alaskans get the **affordable care** they need to stay **healthy**.
 - Make primary and preventive care readily available close to home.
 - Make it easier to get mental health, specialty, emergency, and long-term care services.
- Reduce **barriers** so **providers** can focus on patient care
- Grow and support our **health care workforce** so communities access the care they need.
- Invest in **innovative technologies and systems** to help care teams work together and deliver high-quality, convenient care.



Transforming the System Together

Alaska's RHTP Goals and Initiatives



Goal 1: Promote Lifelong Health and Wellbeing for Rural, Remote, and Frontier Alaskans

Healthy Beginnings

Health Care Access

Healthy Communities

Goal 2: Build Sustainable Outcomes-Driven Health Systems

Pay for Value:
Fiscal Sustainability

Goal 3: Drive Workforce and Technology Innovations

Strengthen Workforce

Spark Technology & Innovation

RHTP Vignette: Mary



BEFORE RHTP

Mary, a 74-year-old elder living in a small village off the road system in a multi-generational home. After a fall, she was medevacked to Anchorage for surgery and discharged to a Skilled Nursing Facility (SNF) for rehabilitation.

Although her clinical care was appropriate, Mary returned home needing mobility support, help with bathing and medications, and follow-up therapy, but her home had steep entry steps, narrow doorways, and no grab bars. Equipment and in-home services were delayed. Additional coordination between the hospitals in Anchorage and her home region, SNF, village clinic, or family caregivers could have helped Mary's recovery. Rather, her recovery was dependent on ad hoc family support and faced an increased risk of preventable complications and readmission.



RHTP Vignette: Mary



AFTER RHTP



Mary now returns home with a clear, coordinated plan. Before discharge from the SNF, her care team worked with the regional hospital, village clinic, a care coordinator, and her family to prepare her home, line up services and support her ongoing recovery. A ramp and grab bars were installed, equipment arrived on time, and necessary services to support Mary's recovery were scheduled to begin immediately.

Mary's recovery is supported through the village clinic, telehealth visits, and help from a Community Health Aide Practitioner or community health worker familiar with her family and who provides culturally appropriate care. Her family feels supported. Mary regains strength, independence, and confidence, remaining an active and valued elder of her family and community.

Alaska's RHTP Goals and Initiatives



Goal 1: Promote Lifelong Health and Wellbeing for Rural, Remote, and Frontier Alaskans

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RHTP Vignette: Community Hospital



BEFORE RHTP

A **community hospital** serves as a critical referral hub, receiving patients across the region. **Persistent financial strain**, driven by **high operating costs**, **workforce pressures**, and **fee-for-service reimbursement**, limits the hospital's ability to invest in modern **technology tools** and improving aging facilities. **Gaps in care coordination** and discharge options contribute avoidable visits delayed transfers, further straining capacity and challenging **workforce retention**.



RHTP Vignette: Community Hospital



AFTER RHTP

The **hospital** begins **building capacity to participate in value-based payment models** through targeted investments rather than large-scale redesign. Early investments strengthen **data systems to identify high-risk patients and support care coordination**.

Building on this base, the hospital expands care management for patients with frequent hospital use and strengthens connections with regional clinics and new technology to support virtual pre-admission consultation and post-discharge follow-up. Over time, these capabilities support more effective chronic condition management and efforts to **reduce preventable readmissions**. By participating in value-based arrangements, the hospital is rewarded, rather than financially penalized, for **improvements in population health and reductions in avoidable utilization**, helping to stabilize revenue as care shifts outside the hospital walls.

Poll #3:

Which initiative(s) do you think is most needed in your community or field of work?

- #1: Healthy Beginnings
- #2: Health Care Access
- #3: Healthy Communities
- #4: Pay for Value: Fiscal Sustainability
- #5: Strengthen Workforce
- #6: Spark Technology and Infrastructure



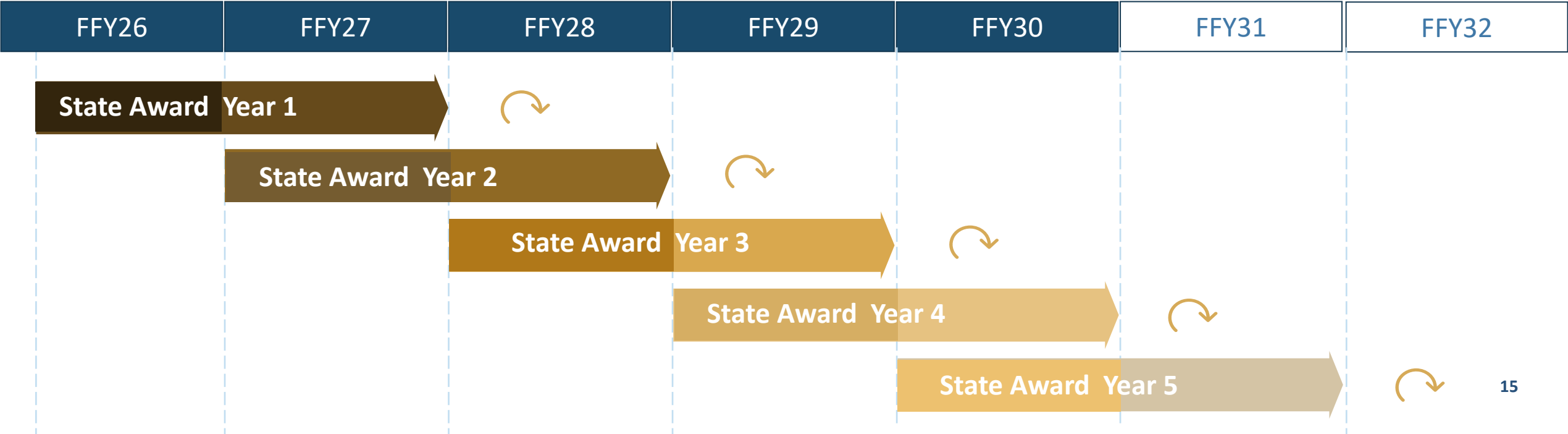
RHTP Funding Timeline



CMS will make annual awards to states.

- States have one year to incur costs (obligate funds) and an additional year to finish spending them.
- Beginning March 31, 2028, CMS will start annually redistributing unspent funds. Any final reallocated funds must be spent by the end of FFY 2032.

REMINDER: This is one-time, five-year funding. Investments must be sustainable after RHTP funding concludes.



Potential Funding Recipients



Potential funding recipients include, but are not limited to:

Health care providers

Hospitals and clinics

Tribal Health Organizations

EMS

Local governments

Community centers

Schools

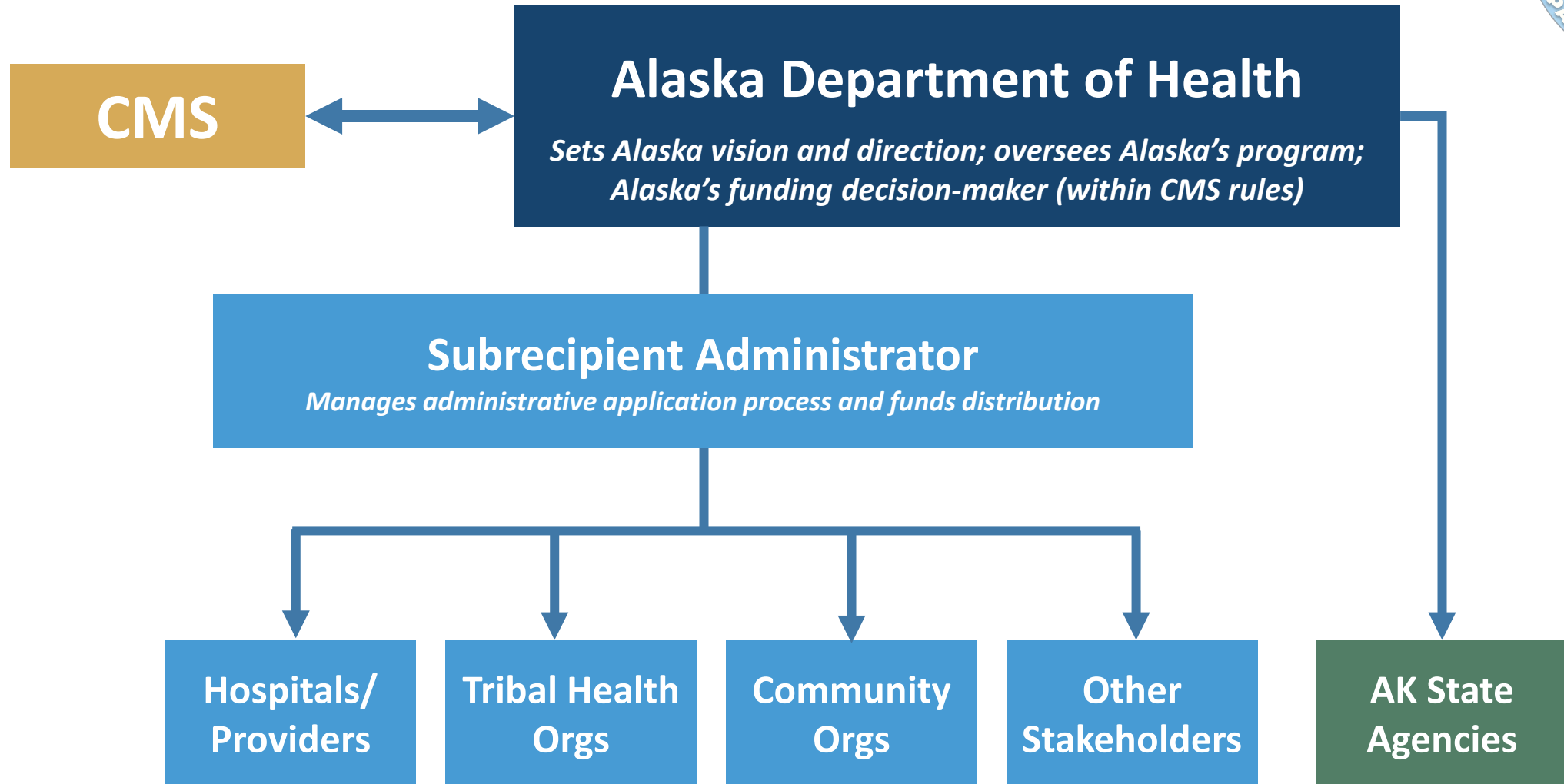
Social service organizations

State agencies

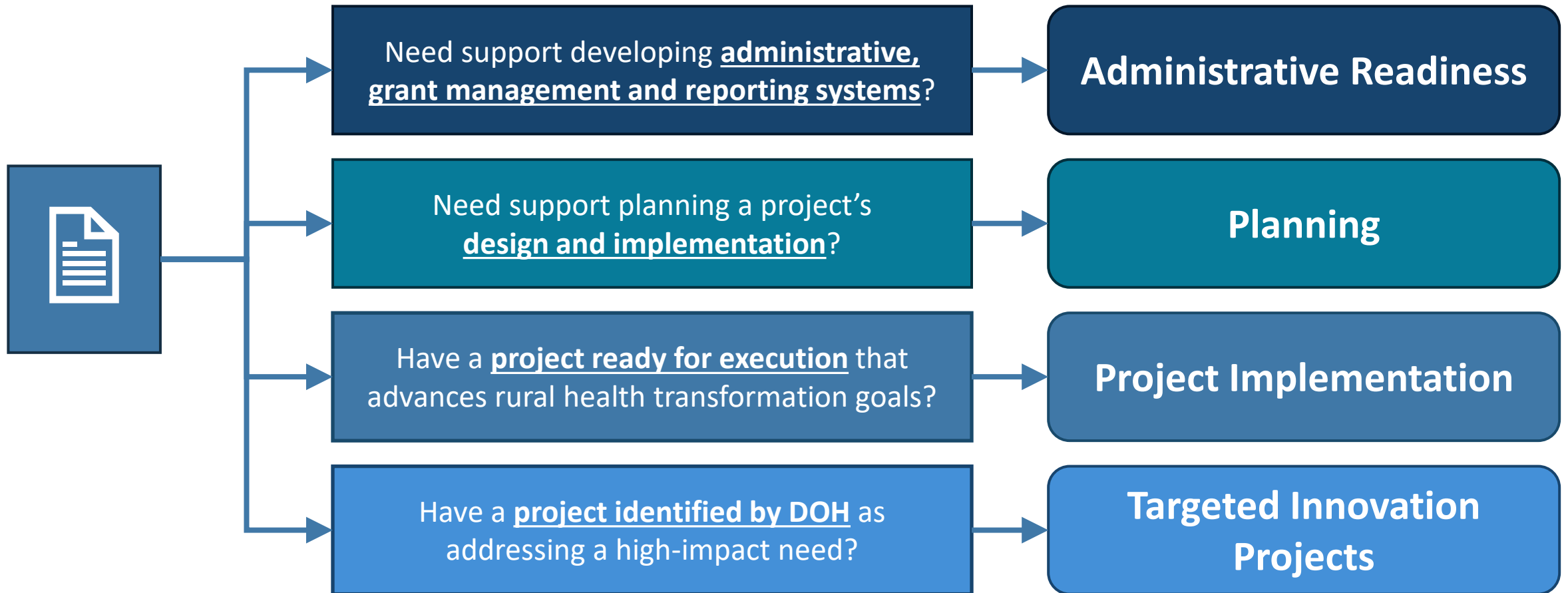


Entities across Alaska can apply for RHTP funds.

Key RHTP Partners



Funding Pathways



Application Elements



For fully developed projects, Alaskan entities will need to prepare the following types of information:



Project Narrative
Goals, outcomes,
populations, and
partners



Budget
Expected project costs
and justification



**Sustainability
Plan**
Funding and
long-term plans



Workplan
Timeline and
implementation
milestones

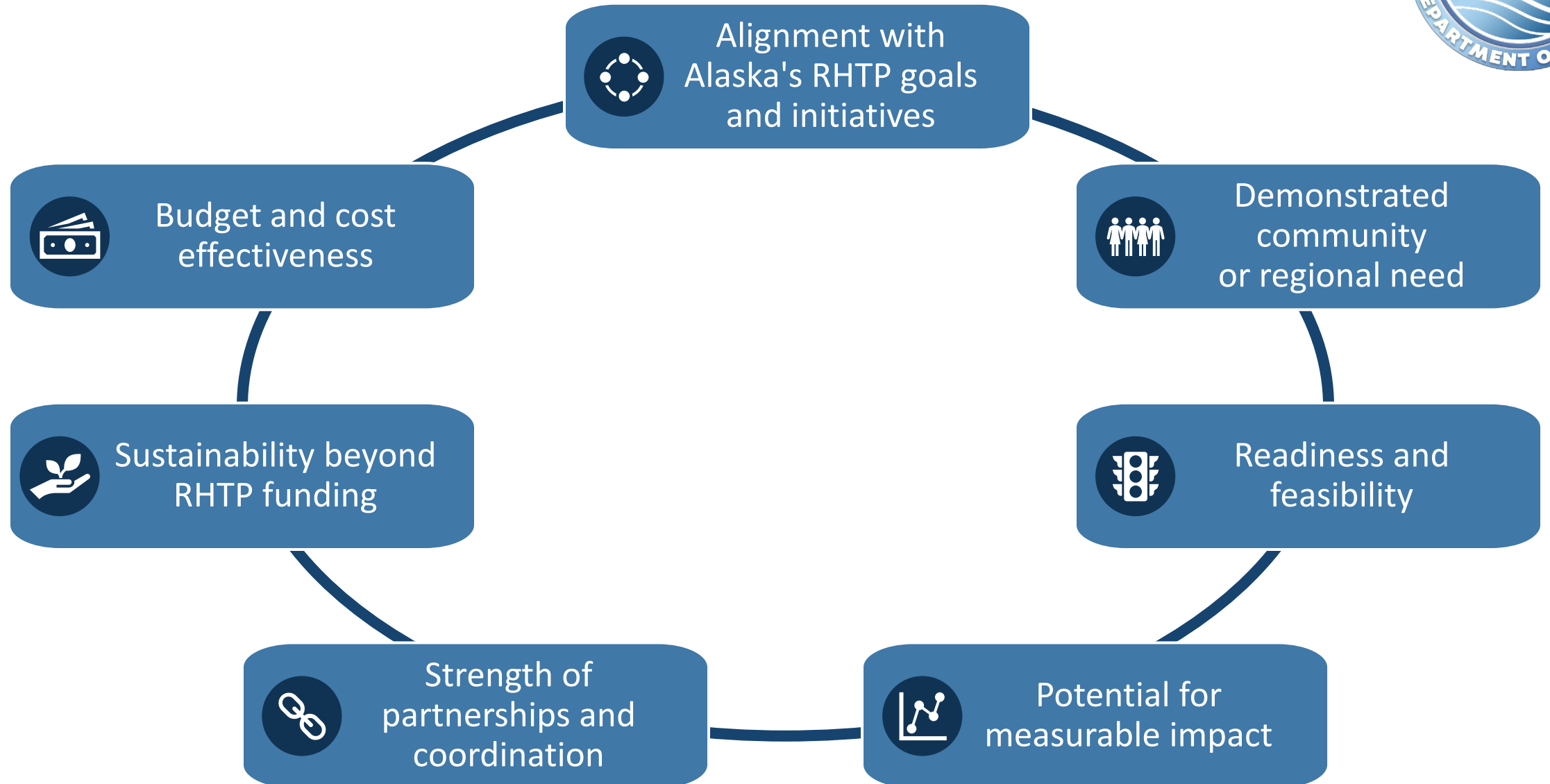


Data & Evaluation
Project monitoring
plans and outcome
measures



Compliance
Risk, readiness, and
approvals

Application Evaluation Considerations



Federal Limitations on RHTP Funding



Examples of CMS-defined **unallowable** uses of RHTP funding include:

- Construction of new facilities or building expansions
- Purchasing land and/or buildings
- Funding clinical services already covered by insurance
- Supplanting existing funding
- Broadband infrastructure, internet installation costs and certain telecommunications equipment
- Provider loan repayments
- Direct payments to individuals (e.g., cash assistance, gift cards)
- Supplanting state contribution to Medicaid match

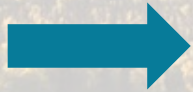


More detail on unallowable costs will be provided in funding application guidance.

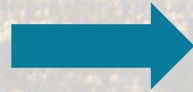
Application Review Process



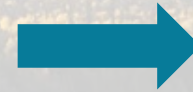
**RHTP
Registration
and Letter
of Intent**



**Application
Submission**



**Application
Review**



**Funding
Decision**



Application requirements and timelines may differ by funding pathway.

Application Next Steps & Timeline



- DOH aims to **open a portal to register and letter of intent in January.**
- **Funding awards** are expected to begin in **Spring 2026.**
- There will be **additional opportunities** for applications in each funding year.

Sign up for RHTP updates
on DOH's website:

health.alaska.gov/RHTP



Project Monitoring and Reporting



To understand RHTP impact, DOH will:

- ☐ **Track statewide performance** on key milestones and metrics
- ☐ **Submit required reports** to CMS that demonstrate progress
- ☐ **Share transparent updates** with Alaska stakeholders
- ☐ **Evaluate program success** over the five-year period

What this means for subrecipients:

- ✓ Subrecipients will regularly collect and submit data and reports to DOH.
- ✓ DOH may request additional documentation to support monitoring and evaluation requirements.
- ✓ DOH will collaborate with subrecipients to address performance challenges and identify solutions.
- ✓ Project funding and priorities may be adjusted in future years to reflect progress toward project goals.

Poll #4:

**Where might you need additional support to develop your application for funding?
(select all that apply)**

- Developing a project purpose
- Ensuring project alignment with RHTP goals
- Identifying potential partners
- Developing a work plan
- Building a budget
- Determining appropriate metrics
- Sustainability planning
- I do not need additional support



Future Engagement Opportunities



Event	Date	Description
Community-Led Regional Planning Workshops	Spring/Summer 2026	<ul style="list-style-type: none">Develop community plans to coordinate RHTP-funded projects and maximize impact of funds in each region
Virtual Webinars	Throughout the Year	<ul style="list-style-type: none">Share updates on program timelines, funding, and policiesClarify expectations and requirementsAnswer stakeholder questions
In-Person Convening	Anticipated Annually <div>January 2027 Mark your calendars!</div>	<ul style="list-style-type: none">Celebrate program successesFacilitate partnerships and collaboration across stakeholders

DOH will also be available to meet with stakeholders individually, as needed.

Stay Informed



For more information, please visit:

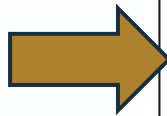
health.alaska.gov/RHTP



Email:

DOH.RHTF@alaska.gov

Sign up for program updates



[Overview](#) [RHTP Convening](#) [Applications and Proposed Initiatives](#) [Background](#) [Project Timeline](#)

Overview

The Rural Health Transformation Program (RHTP) is a \$50 billion federal opportunity to improve health care in rural areas across all fifty states.

The Alaska Department of Health (DOH) has received [notice of award](#) from Centers for Medicare & Medicaid Services (CMS) to bring this funding to Alaska.

- Alaska is one of the top recipients nationwide, reflecting the state's large rural population, geographic challenges, and long-standing health care access needs.
- Alaska will receive \$272,174,856 each year to support targeted, systemwide investments that improve access to care and strengthen the long-term stability of the state's health care system.

[Sign up for RHTP updates here](#)



Q&A

1. Click the **Q&A** button in the Zoom toolbar
2. Type your question in the **pop-up box**
3. Press **Send**



Closing Remarks



Heidi Hedberg

Commissioner,
Alaska Department of Health



Thank You!

Learn more about the
Rural Health
Transformation Program:

