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Rural Health Transformation Committee

February 26, 2026

Agenda

- Welcome and Introductions
- RHTP Proposal and Award
- Pillar Overview and Discussion/Questions
- Committee Plan and Next Steps
- Public Comment

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RHTP Support

The Maryland Rural Health Transformation Program 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 $168,180,837.61 with 100 percent funded by CMS/HHS. The contents of this meeting 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.

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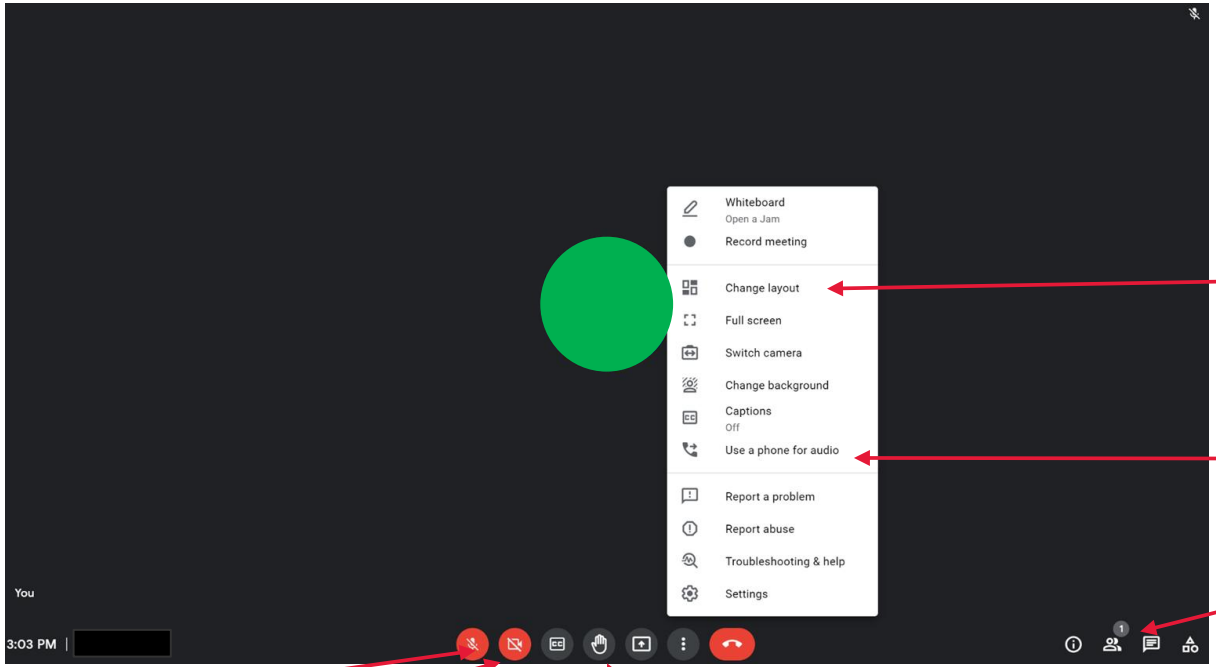
Platform Logistics - Google Meet



Change view

Call into the meeting

Chat

Mute

Camera

Raise hand (for Q&A)

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Public Comment and Questions

To be collected via Google Form:

https://docs.google.com/forms/d/13dfGClxj7dhAvDE81Xx9tzQGADzRtmoWTm4edjF6Ni4/edit#responses

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About RHT Committee

- Advisory group to support the implementation of the Maryland RHTP
- Quarterly meetings in 2026 with the frequency in subsequent years dependent upon ongoing needs
- Meetings open to the public

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RHTP Proposal and Award

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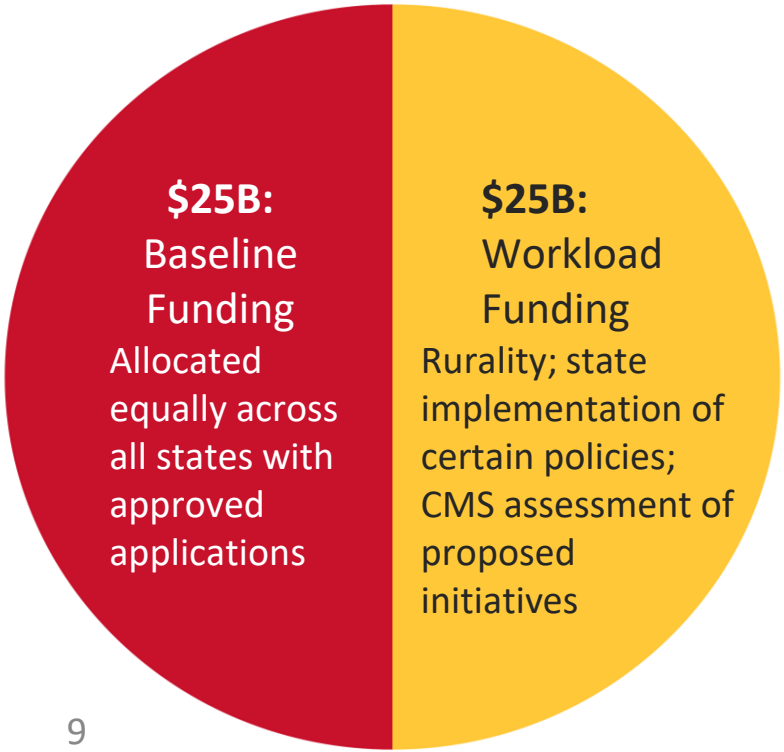
Federal HR1 - CMS RHTP Funding Opportunity



- $50B over 5 years (2026-30) to 50 states
- 6 weeks to build application
- Cooperative Agreement with CMS
- Risk of reduced funding in future project years and clawback if performance measures not met
- **Funding range per state for 5 years: $500M-$1B**

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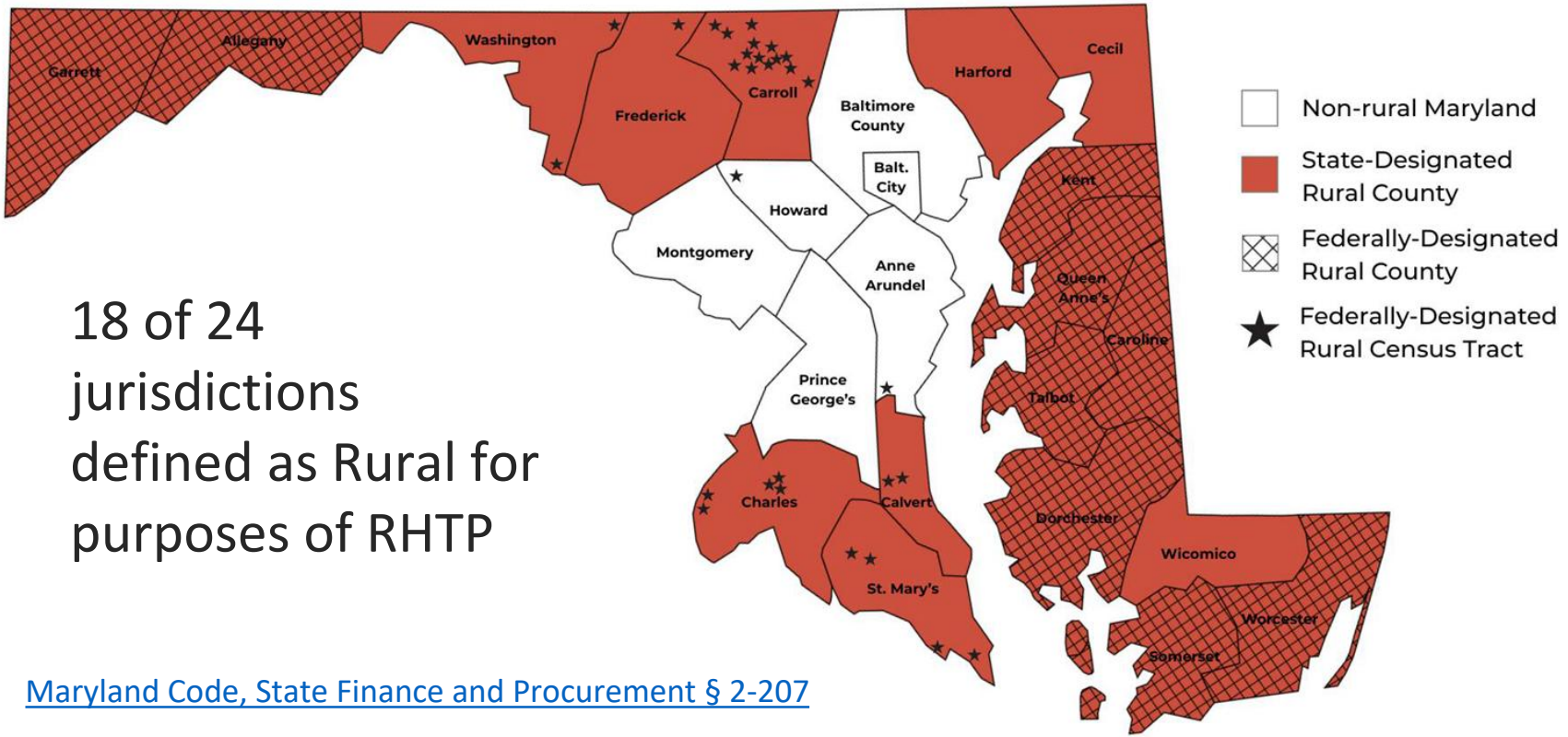
Rural MD by State and Federal Designation



18 of 24 jurisdictions defined as Rural for purposes of RHTP

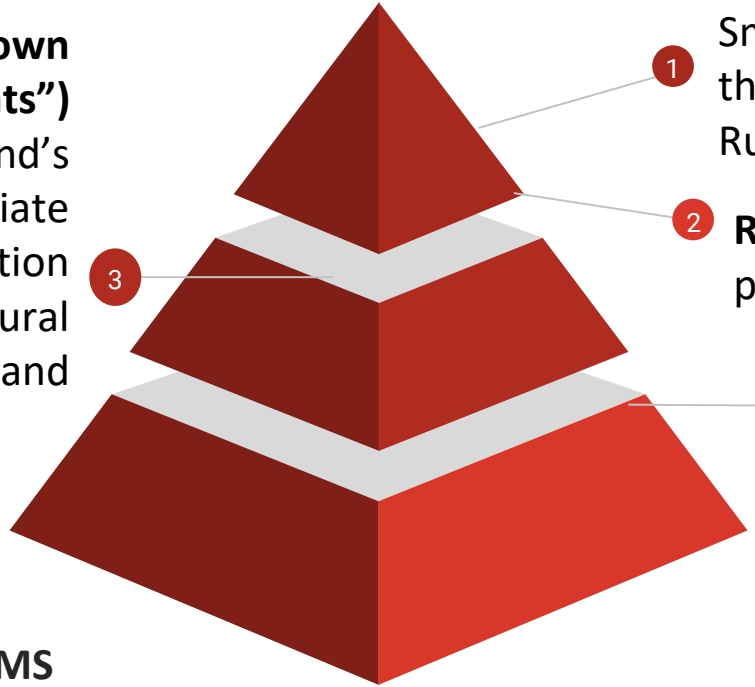
Maryland Code, State Finance and Procurement § 2-207

Community Engagement Process

- 17 Local Listening Sessions, covering all State-designated rural counties. 250+ participants.
- >325 RFI responses, received through online survey and email
- Roundtable discussions with:
  - Rural Hospitals (arranged by MHA)
  - Local DSS directors (arranged by DHS)
  - Local Health Officers
  - MD Medicaid Advisory Committee

Planned Implementation Structure

Partners ("Known Subrecipients")
Named within Maryland's proposal; to lead Immediate Impact and Transformation Fund activities within rural Maryland



RHTP Governance
Small MDH-based team lead by the Maryland State Office of Rural Health (SORH).

RHT Committee Continued purposeful stakeholder engagement

Sub-sub Recipients
Subawards executed and monitored by Known Subrecipient partners, as appropriate to activity areas

Funded by CMS
Cooperative Agreement Funding

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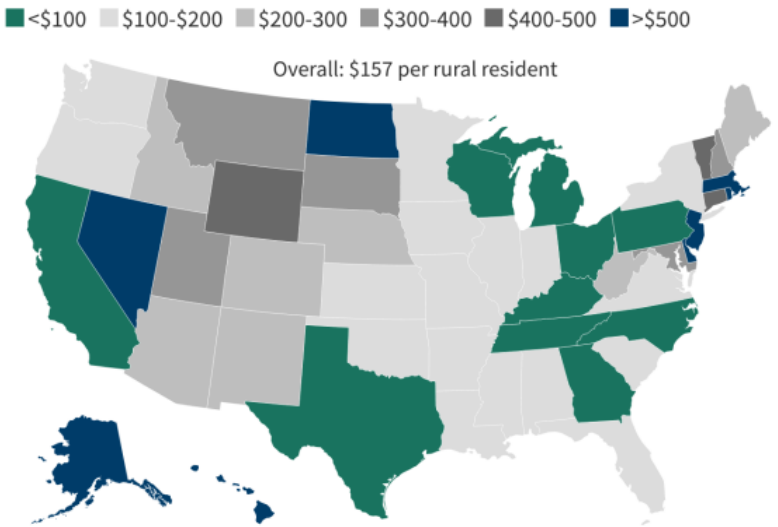
Maryland RHTP Award

- Notice of Award**:** **$168,180,837.61** for Budget Period 1
- **84% of proposed budget funded**
- MD received double the average amount per rural resident.

First-Year Rural Health Fund Awards Range From Less Than $100 Per Rural Resident in Ten States to More Than $500 in Eight States

Award per rural resident from $10 billion available through the rural health fund in the first year:



Note: Overall award per rural resident includes all 50 states. DC and the U.S. territories were ineligible for funding. The rural population for each state is defined based on the HRSA definition of "rural", which CMS uses to allocate a portion of the rural health funds. This definition includes all nonmetropolitan areas as well as some parts of metropolitan areas.

Source: KFF analysis of rural health fund awards from the HHS Tracking Accountability in Government Grants System (TAGGS) and rural population from the Sheps Center Rural Facility and Population Score Estimates by State (October 24, 2025)

KFF

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Overview & Budget Year 1

PILLAR 1

Transform the Rural Health Workforce

$26 million (15.3% of Year 1 award)

PILLAR 2

Promote Sustainable Access and Innovative Care

$126 million (74.9% of Year 1 award)

PILLAR 3

Empower Rural Marylanders to Eat for Health

$15 million (9.1% of Year 1 award)

Governance

$1 million (0.7% of Year 1 award)

PART 1 - IMMEDIATE IMPACT FUNDS

Quickly provide resources to expand "shovel-ready" activities in rural areas.

PART 2 - TRANSFORMATION FUNDS

Competitive opportunities for transformational initiatives in rural areas

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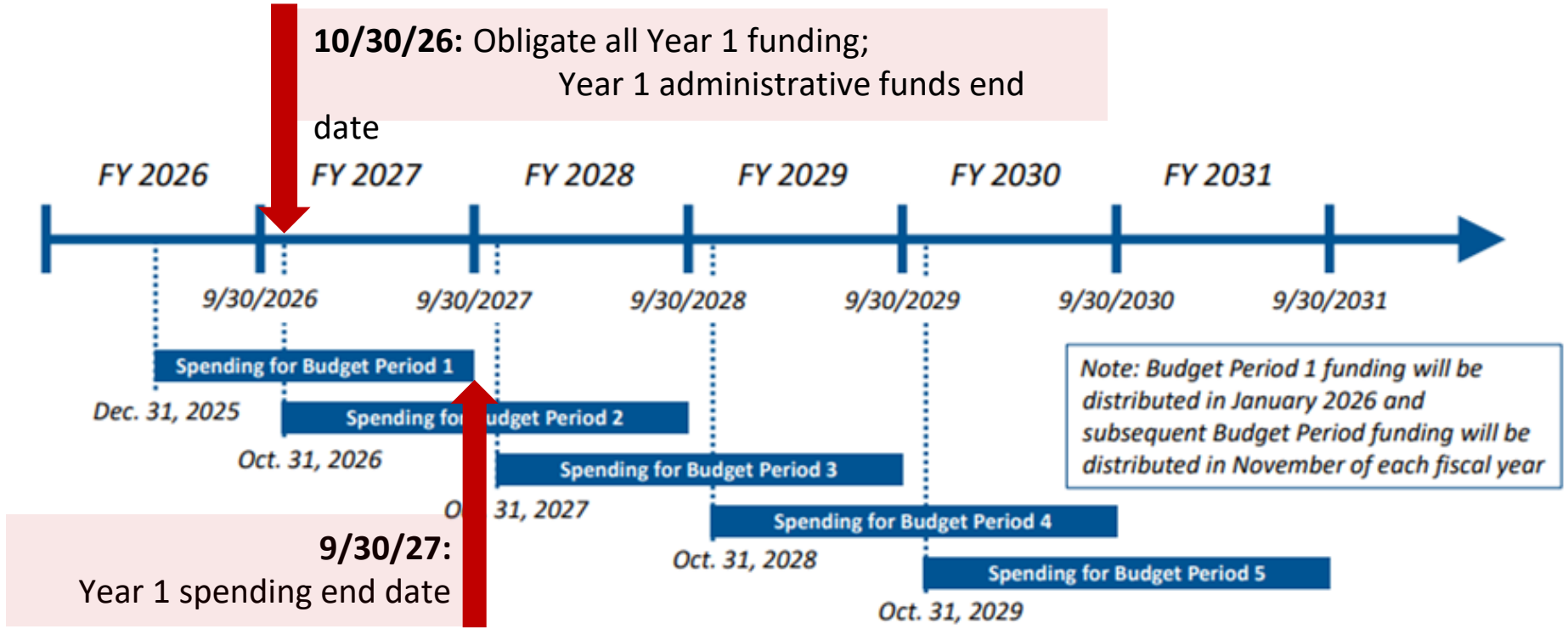
Maryland RHTP Award

Federal RHTP Timeline



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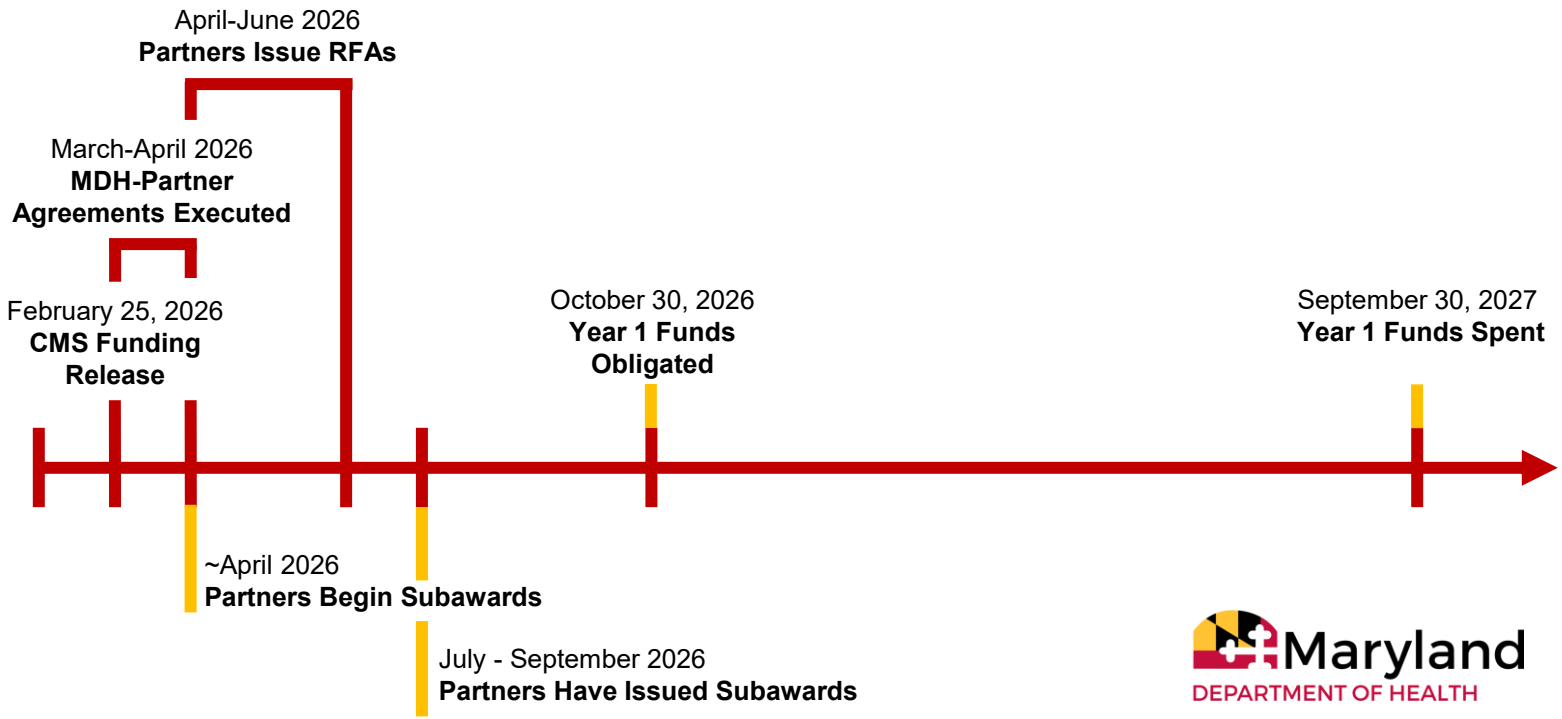
Budget Year 1 Target Implementation Dates



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Discussion/Questions

Committee member comments or questions?

Pillar Overview and Discussion/Questions

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Pillar 1: Transform the Rural Health Workforce

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Pillar 1: Transform the Rural Health Workforce

Expand existing and implement new efforts to develop, recruit and retain a strong health workforce in rural communities, addressing multiple types of health care clinicians and allied health professionals.

Immediate Impact

- **Pathways to Health Careers**: Expand existing Apprenticeship and Training Programs and expand the Rural Advancement for Maryland Peers (RAMP) allied health program. (MD Labor)
- **Area Health Education Centers (AHEC)**: Expand the capacity of existing AHEC programs and open a new AHEC in Southern Maryland. (UMD/ AHEC)
- **Health Workforce Clearinghouse:** Implement a Maryland Health Workforce Data Clearinghouse. (MDH/ OPHI)
- **Workforce Data System**: Create an online platform for healthcare workforce development applications. (MDH/ OPHI)

Transformation Funds

- **Workforce Pipeline Training Programs**: Increase recruitment and training opportunities for healthcare and public health professionals. (MD Labor)
- **Provider Training, Recruitment and Retention Strategies**: Expand training, recruitment and retention strategies for rural Maryland physicians and advanced practice professionals. (MD Labor)

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Pillar 1 Discussion

Key Partners: Department of Labor, University of Maryland/ AHEC, MDH/ Office of Population Health Improvement

Progress to Date: Primarily developmental conversations and connections/collaboration between agencies/partners. For example:

- Apprenticeships and RAMP 2.0 policies drafted
- Labor, MDH and Department of Social and Civic Innovation collaboration to build a Public Health Service Corps
- Planned expansion of activities among 3 existing regional AHECs for rural MD
- Key stakeholder discussions to build new Southern MD AHEC infrastructure
- Software specifications and procurement methods drafted for workforce data system

Potential Sub Grantees and Funding Applicants: Health care, human and social service employers, academic institutions

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Pillar 2: Promote Sustainable Access & Innovative Care for Rural Marylanders

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Pillar 2: Promote Sustainable Access and Innovative Care for Rural Marylanders

To achieve a world-class health system for rural Marylanders, we will expand existing and implement new efforts to bring health care services into rural communities.

Immediate Impact

- **Expand Access to Primary Care**: Expand new primary care sites in rural communities and provide EHR upgrades. (MDH/ OAPC)
- **Increase Efficiency of Local Agency Operations**: Strengthen rural LHD and AAA revenue capture and self sufficiency by hiring a contractor to support coding, billing and revenue cycle management TA. (Garrett County HD)
- **Strengthen Emergency Trauma Response:** Pilot Pre-hospital Blood Transfusion Program with rural EMS. (MIEMSS)
- **Expand School-Based Health Center Capacity**: Support the expansion of hours, services and services areas and the procurement of mobile units. (MDH/ PHPA)
- **Expand and Optimize HIE Connectivity**: Increase rural provider connectivity, pilot AI technology to improve clinical workflows, connect closed loop referral tools and support CBO billing. (CRISP)
- **Infrastructure to Spur Broader Telehealth Adoption**: Develop a centralized telehealth technical infrastructure. (CRISP)

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Pillar 2: Promote Sustainable Access and Innovative Care for Rural Marylanders

To achieve a world-class health system for rural Marylanders, we will expand existing and implement new efforts to bring health care services into rural communities.

Transformation Funds

- **Sustainable Access Through Service Expansion and HIT Advances**: Expand services to meet current demand and build long-term capacity to improve health outcomes and deploy technology-enabled chronic disease management. (MDH/ PHPA)
- **Mobile Health**: Support regional mobile health programs, including chronic disease management, partnerships with EMS for community paramedicine and mobile health integrated health models and community-based care teams. (MDH/ PHPA)
- **Behavioral Health Services Expansion**: Increase sustainable access to priority services across the full continuum of behavioral health care in rural areas. (MDH/ BHA)
- **Innovative Care**: Prepare rural providers to participate in innovative, value-based care models. (HSCRC)

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Pillar 2 Discussion

Key Partners: MDH/ Prevention and Health Promotion Administration and Behavioral Health Administration, Office of Advanced Primary Care, Local Health Departments, Health Services Cost Review Commission, Maryland Health Care Commission, CRISP

Progress to Date: Primarily developmental conversations and connections/collaboration between agencies/partners. For example:

- Strategic implementation planning to balance immediate impact potential and activities in need of longer planning;
- Evaluation of current activities to guide best practices for rural expansion efforts;
- Staffing plans;
- Establishment of mobile health regions

Potential Sub Grantees and Funding Applicants:
Health/ social service providers (such as hospitals, health systems, health care and behavioral health providers), local health departments, behavioral health authorities, EMS, regional collaborations (inclusive of health care providers, technology vendors, LHDs, AAA and/or CBOs), vendors to support specific activities

Pillar 3: Empower Rural Marylanders to Eat for Health

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Pillar 3: Empower Rural Marylanders to Eat for Health

Invest in infrastructure to support Marylanders' access to nutritious, locally grown and raised Maryland foods.

Immediate Impact

- **Post Harvest Infrastructure**: Locate cold storage infrastructure within rural communities to expand food aggregation and distribution capacity for small farms to supply local markets with fresh foods and enhance cold storage for food banks to enable distribution of fresh foods. (MDA)
- **NourishMD Expansion**: Provide small grocers and mobile access points with funds for equipment purchases, minor renovations, technology infrastructure and marketing to create a sustainable business. (DHCD)
- **Create Demand for Healthy Foods**: Local Health Departments will provide targeted nutritional education to improve food and physical activity behaviors among rural residents. (MDH/ LHDs)
- **Support Food Planning and Coordination**: Establish a Rural Food Coordination program with a regional approach to convening and coordinating. (MDEM)

Transformation Funds

- **Food Aggregation:** Food Aggregation and food hubs to increase the availability of affordable, local foods. (RMC)
- **Local Purchasing**: New organizational purchasing strategies to pivot to procurement of healthy local foods. (RMC)

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Pillar 3 Discussion

Key Partners: Department of Agriculture, Department of Housing and Community Development, Local Health Departments, Maryland Department of Emergency Management, Rural Maryland Council

Progress to Date: Primarily developmental conversations and connections/collaboration between agencies/partners. For example:

- Collaborative conversations across pillar partners and others with food-related stakeholders;
- Assessment of where it is appropriate to utilize current administrative and procurement structures and when alternatives are necessary to meet funding requirements;
- RFA policies/guidelines in development

Potential Sub Grantees and Funding Applicants:
Small grocers, mobile food sources, farmers/producers, aggregators, buyers and/or consortiums of buyers (e.g municipalities, academic institutions, food pantries, childcare centers, and healthcare facilities), nutrition education providers.

Discussion and Questions

Committee member comments or questions?

Plan & Next Steps for Committee

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Next Meetings and Agendas

- 2026 meetings (quarterly): June 11, September 10, and December 11
- Agendas will be developed to provide program and activity updates and request discussion and feedback from Committee membership
- Posting of meeting recording on RHTP website

Committee Communication

- Anticipate communications between meetings
- Committee members and others who expressed interest may be asked to serve on RFA review committees where no conflict of interest applies

Staying Connected

- **Dedicated public-facing email:** mdh.transformruralhealth@maryland.gov
- **RHTP listserv sign up:** https://health.maryland.gov/pophealth/Pages/Rural -Health-Transformation-Program.aspx
- **Webpage:** https://health.maryland.gov/pophealth/Pages/Rural -Health-Transformation-Program.aspx

Committee Discussion/ Questions

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Opportunity for Public Comment

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