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Rural Health Transformation Program

Rural Health Coordinating Council (RHCC)

September 18, 2026



Other formats and languages

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Disclaimer

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Agenda

- Significant Progress & Milestones
- NCC and Annual Report Submissions
- Partner Successes
- Looking Ahead





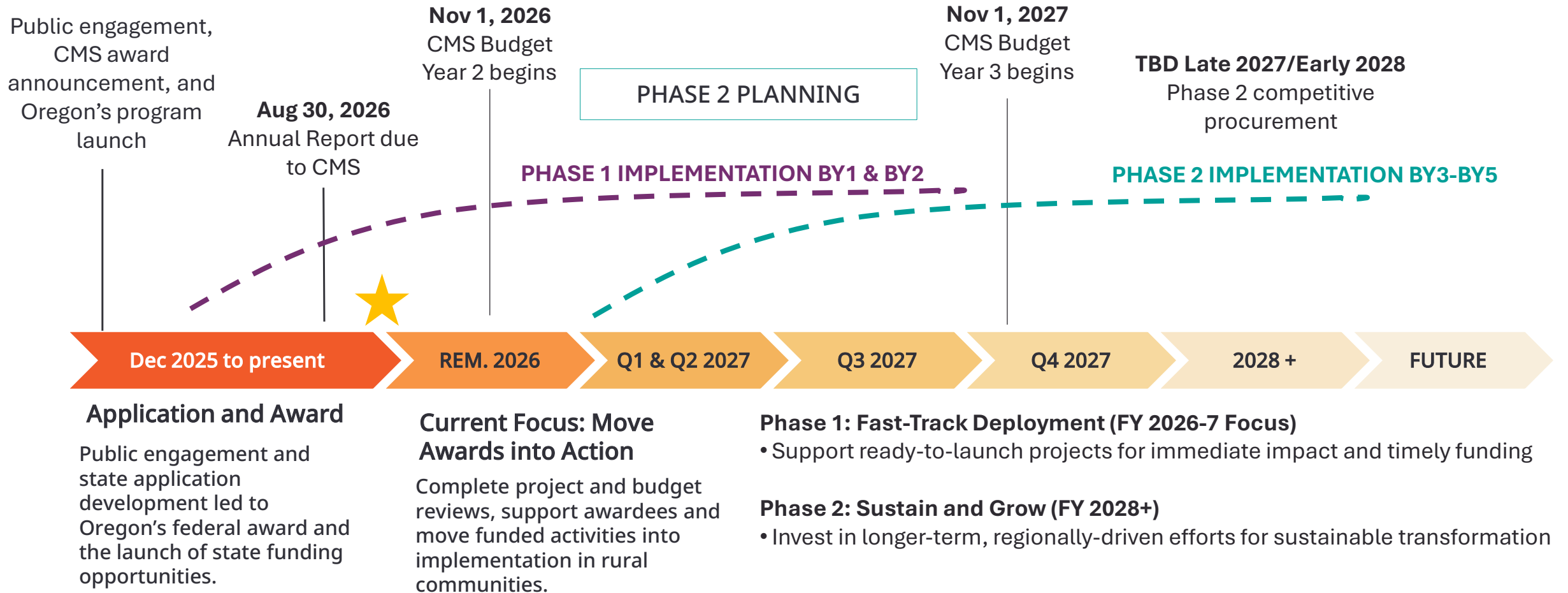
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Significant Progress & Milestones

Oregon's Timeline and Phases



*Milestone dates will be added when confirmed and remain subject to federal requirements.

Oregon's Identified Goals & Outcomes

Regional Partnerships & Systems Transformation

1. Reduce operating costs for rural health organizations through shared infrastructure according to regional/local needs
2. Increase access to high need or at-risk service lines, such as maternity care
3. Increase regional planning efforts focused on shared governance models, including CINs and consortiums
4. Increase participation in value-based care models

Healthy Communities and Prevention

1. Universal access to home visiting services
2. Increase availability of mental health and substance use disorder treatment
3. Increase patient engagement with new preventative health and/or self-management programs
4. Increase rural populations served by new health care and social health services (i.e. health services)
5. Expanded access to services, including chronic disease management, through increased availability of telehealth

Workforce Capacity and Resilience

1. Increase number of rural providers/partner organizations participating in workforce training programs.
2. Increase number of providers recruited to deliver health care in rural areas through local partnerships and relocation and retention incentives
3. Increase health care career pathway programs in rural K-12 schools
4. Increased hiring, training, and use of non-physician, non-hospital, and allied health professionals

Technology & Data Modernization

1. Robust engagement in IT technical assistance
2. Increase health IT adoption and interoperability
3. Reduce administrative burden on providers
4. Improve organizational cybersecurity practices
5. Increased use of remote care services and remote patient monitoring to prevent and manage chronic disease and reduce hospital visits

Tribal Initiative

1. Increase in members of rural and remote patient population participating in chronic disease programs
2. Increase in patients in rural and remote patient populations with access to substance use disorder/opioid use disorder treatment
3. Increase in number of EHR systems that meet the needs of Tribal clinics
4. Increase in healthcare providers hired and retained at Tribal clinics or access points serving rural and remote service delivery areas
5. Increase in number of primary care visits at rural and remote Tribal clinics/access points

Types of funding pathways

1. Transformation Fund Awards

- Rural Health Clinics
- Rural hospitals
- Local Public Health Authorities
- Federally-Qualified Health Centers

2. Catalyst Awards (RFGP)

3. Immediate Impact direct awards

4. Regional Planning

5. Tribal Initiative Awards



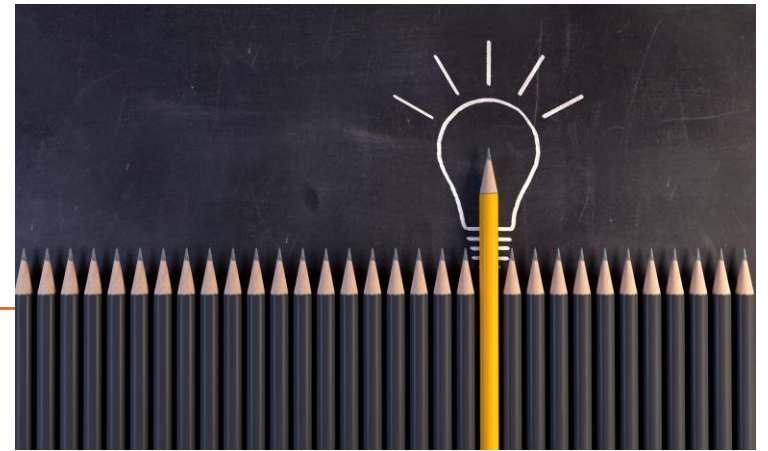
Transformation Funds

Transformation Funds are direct awards intended to support rural providers in maintaining and expanding access to care, strengthening workforce capacity, and addressing community-specific health needs.

- \$34,998,000 was offered to 35 rural hospitals
- \$9,900,000 was offered to 99 Rural Health Clinics (RHCs).
- All LPHAs and FQHCs have also been awarded funds.



Catalyst Awards Milestones



- Highly competitive application process
 - 583 project proposals submitted by 353 organizations
 - Ultimately selected 103 projects from 85 organizations to cover both Budget Period 1 and 2
- Awardees announced in July, **projects serve all counties in Oregon**
- Award amounts:
 - \$80.3M in Budget Period 1 (2026)
 - \$76.1M in Budget Period 2 (2027) pending CMS Award Announcement

RHTP Catalyst Awards

Award distribution

[Click to view project details](#)

Total projects funded

103

Statewide Year 1

Healthy Communities & Prevention	54
Regional Partnerships	8
Technology & Data Modernization	21
Workforce Capacity & Resilience	20

Total funds distributed

\$80.1M

Year 1

Healthy Communities & Prevention	\$39.2M
Regional Partnerships	\$6.4M
Technology & Data Modernization	\$19.1M
Workforce Capacity & Resilience	\$15.4M

View by county or region

County

Select initiative

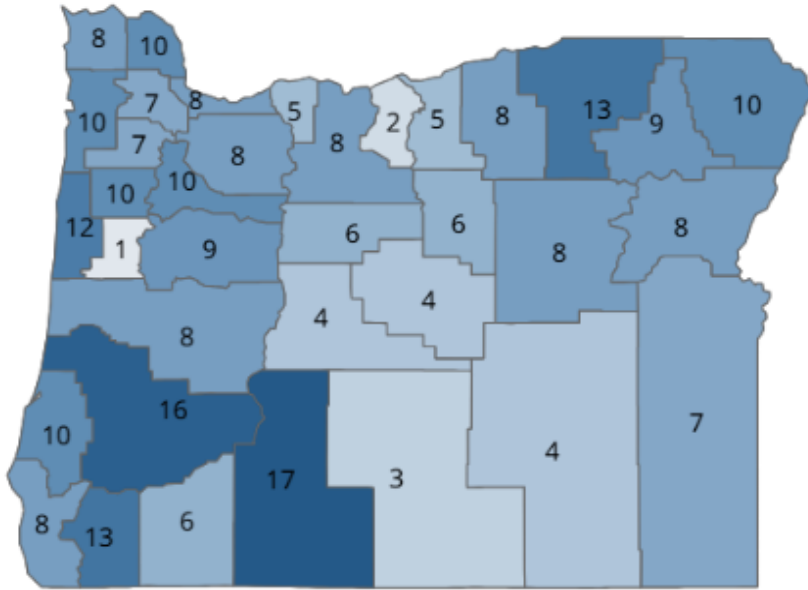
(All)

Select organization type

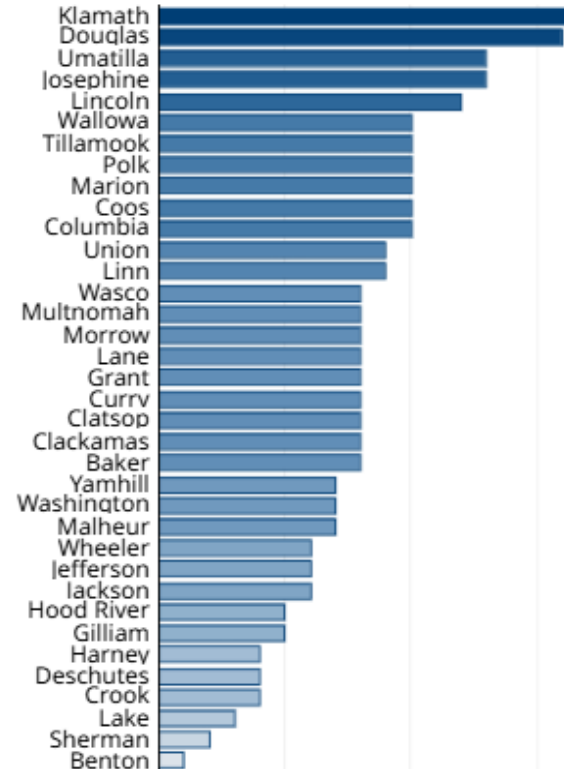
(All)

Number of projects serving each county.

An additional **16** projects serve all counties statewide (not shown in counts below).



Some projects serve multiple counties. The sum of the projects across counties may be greater than the total number of projects in the state. See the 'Project Details' tab for more information.



See interactive map on
RHTP Awards page

<https://www.oregon.gov/oha/HPA/HP/Pages/rhtp-awards.aspx>

Catalyst Awards by Initiative

RHTP initiative	Approx. Budget Year 1 funding	Projects
Healthy Communities & Prevention	\$39.4 million	54
Technology & Data Modernization	\$19.1 million	21
Workforce Capacity & Resilience	\$15.4 million	20
Regional Partnerships & System Transformation	\$6.4 million	8
Total	\$80.3 million	103

Immediate Impact Awards

- Direct awards that are responsive to community feedback and support ready-to-launch projects described in Oregon's initial RHTP Application to CMS
- Projects often meet specific gaps in rural access (e.g., dementia care) or serve a broad portion of the state and workforce
- Examples include:
 - Home visiting for older adults
 - Rural family medicine residency program expansion
 - Mobile obstetrics simulation unit for rural providers
 - 24/7 Obstetric Addiction Advice Line
 - Healthcare preceptor incentives
- Full list on website: <https://www.oregon.gov/oha/HPA/HP/Pages/rhttp-awards.aspx>

Tribal Initiative Milestones

- 11% of Oregon's total award is set aside for the Nine Federally Recognized Tribes in Oregon, across all five years of RHTP
- Plans and budgets reviewed and approved by OHA
- Tribal Grant Agreements executed and initial disbursements sent
- Projects include but are not limited to chronic disease and behavioral health programming, recruiting and hiring workforce, establishing mobile units to reach communities, and infrastructure like exam rooms and equipment

Elevating Rural Priorities Through Partnership with the Office of Rural Health (ORH)

Regional convenings:

- Five convenings completed in **Klamath Falls, Coos Bay, The Dalles, Burns and La Grande**
- Three additional convenings planned in **Cottage Grove, Tillamook and Madras**
- Oregon Rural Health Conference: **Oct. 7–9 in Bend**
- Rural input informing ongoing RHTP implementation
- Technical assistance offered to communities for planning, strategic transformation, and quality improvement activities



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NCC and Annual Report to CMS

What OHA Submitted: Annual Report and NCC

Reporting period: December 31, 2025 – July 31, 2026

Annual Report

Provides CMS with a complete update on program implementation

Includes narrative updates, metrics and checkpoint evidence

Reports budget information, including obligations and use of funds

Includes additional information requested by CMS

Non-Competing Continuation Application

Required annually to receive funding for the next budget period

Allows states to update budgets and make minor program changes

Supports continued implementation in subsequent budget periods

When OHA Submitted Annual Report and NCC

Reporting period: December 31, 2025–July 31, 2026

Key Dates

- **August 21:** Oregon submitted NCC application (CMS anticipates issuing awards Oct 15)
- **August 27:** CMS Project Officers reviewed the Annual Report checkpoint materials.
- **August 31:** Oregon submitted the full Annual Report.
 - The report included all programmatic and budget information requested by CMS
- **September 9:** CMS approved the Annual Report.

Funding progress during the reporting period

- **\$102.7 million obligated**
- **More than \$24 million disbursed** directly to partners and communities
- *Obligations exclude OHA administrative funds and more than \$45 million in OHSU agreements signed shortly after the reporting period*

What the Reporting Means for Oregon's RHTP

Oregon's reporting to CMS does more than fulfill a federal requirement. It shows how RHTP funds are reaching communities, supports continued funding for Budget Period 2 and provides a clear view of where implementation is progressing or may need additional support.

Demonstrate accountability

Show CMS how Oregon is obligating and using RHTP funding in accordance with program requirements.

Support continued investment

Provide the information CMS needs to review Oregon's request for Budget Period 2 funding.

Improve implementation

Use current progress and spending data to identify where budgets, technical assistance or project plans may need to be adjusted.

Note: submission of the NCC does not guarantee Oregon's Year 2 award. CMS still needs to review and approve the submission.

Remaining 2026 Reporting and Funding Milestones

October 15: CMS anticipates issuing Year 2 award decisions

October 19: OHA anticipates distributing customized expenditure-reporting templates and offering technical assistance to awardees

October 30: Current budget period ends. States may submit a budget amendment, if needed

November 6: Quarterly expenditure reports due to OHA

Later in 2026: OHA may request additional information as needed to meet CMS reporting requirements





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Partner Successes

Success Stories: Early Impact Across Oregon

What we're hearing so far:

- Oregon was among first in nation to get dollars out the door
- Early wins are emerging across multiple funding streams
- Partners are adapting quickly to meet local needs
- Awardee experiences are helping shape what comes next
- Awardees are eager to get through budget and project review

The following stories highlight a few examples of that work.

What We're Hearing From Awardees

- Qualitative feedback gathered across four award types
- Direct awardee input captured through multiple channels, including surveys, regional convenings and July CMS site visits
- Themes are helping OHA identify what's working, where barriers remain, and where implementation can improve

Early investments are strengthening rural access to care

Four projects show how RHTP funding can bring services closer to home and strengthen local response capacity.

TRUSTED COMMUNITY REACH

Klamath Rural Mobile Health Consortium

By embedding the mobile clinic at established community events, the consortium is reaching residents in familiar, trusted settings instead of asking them to navigate care alone.

Potential impact: fewer access barriers and broader rural reach

PREVENTIVE DENTAL ACCESS

Community Health Center of Lane County

Preventive screenings, sealants, fluoride, education and referrals can move forward as the health center recruits a Dental Director and builds lasting dental capacity.

Potential impact: earlier care and fewer preventable dental needs

EMERGENCY RESPONSE CAPACITY

Seaside Fire & Rescue

Following final budget revisions, a new ambulance and additional emergency equipment could strengthen the community's ability to respond quickly and safely when every minute matters.

Potential impact: more reliable, better-equipped emergency response

RURAL EMERGENCY PARTNERSHIP

Cornerstone Whole Healthcare Organization

EMS can now access local stabilization, imaging and LifeFlight staging, creating a physician-level bridge when long transport times or weather-related closures delay hospital care.

Impact: critical support closer to home during emergencies



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Looking Ahead

Oregon's Approach:

Two phases of transformation

Phase 1 (FFY 26-27) focuses on **Activation, Stabilization, Planning**

- Our aim is to support partners throughout the implementation phase

Phase 2 (FFY 28-30) focuses on **Scaling and Sustainability**

- Continuation of some non-competitive funding is planned to sustain and expand current successful projects
- At least one future large competitive funding opportunity (similar to Phase 1) that focuses on collaboration, partnership and sustainable transformation

Key Takeaways

- OHA completed its first Annual Report and NCC submission
- Oregon reported **\$102.7 million** obligated and more than **\$24 million** disbursed during the first reporting period
- CMS review and the Budget Period 2 award decision will shape the next phase of implementation
- Additional awardee expenditure reporting will occur this fall
- Early feedback and project examples show progress while also identifying areas where implementation support is still needed



Picture from Leslie Gulch in Malheur County by Gary Halvorson.

Engaging with the RHCC

- OHA will provide **regular updates** to the RHCC about RHTP development
- Hold **iterative discussions** with RHCC about how members will advise RHTP
- RHCC provide feedback on the OHA developed **priorities** for determining Phase 2 investments
- RHCC could ensure RHTP-funded projects are **coordinated among and across communities**
- If requested, a RHCC member present to the **Oregon Health Policy Board (OHPB)**

Preliminary Phase 2 Planning

- OHA RHTP Team convened to plan Phase 2 following NCC submission, anticipating BP2 funding announcement in mid-October
- Long-term goals:
 - Establish a financially sustainable rural healthcare system in Oregon
 - Ensure the healthcare system can adapt to changes in federal funding and the state's managed care system
 - Improve access to necessary, quality care for individuals in rural and remote communities

Phase 2 Planning Roles & Responsibilities

- OHA, in partnership with ORH, develops the statewide RHTP priorities informed by learnings from regional convenings
- Priorities are shared with relevant state advisory boards and committees (e.g., OHPB, Workforce Committee)
- Priorities receive feedback and endorsement from RHCC

Timeline:

- Aggregate learnings from regional convenings by end of 2026
- Develop priorities in Spring 2027
- Seek feedback Spring 2027 into Summer 2027
- Finalize principles by Summer 2027

Discussion and Questions

- What are your reactions to the Phase 2 Planning process?
- Any feedback on the proposed roles and responsibilities?
- Any initial priorities you would like OHA to consider in the design process?



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Communications

Home page and newsletter

Visit our home page:

<https://www.oregon.gov/oha/hpa/hp/pages/rural-health-transformation.aspx>



- This QR code will take you to the RHTP home page

Sign up for bimonthly newsletter:

https://public.govdelivery.com/accounts/ORHA/subscriber/new?topic_id=ORHA_209



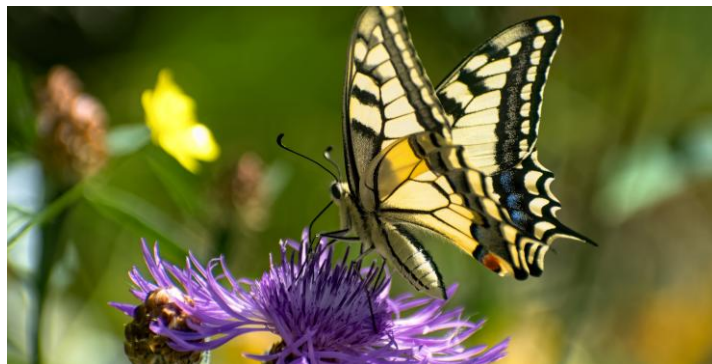
- This QR code will take you to the sign-up sheet for the RHTP newsletter



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Thank you