



NEW YORK
RURAL HEALTH TRANSFORMATION



**Department
of Health**

Rural Health Transformation Overview

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AGENDA

- Introduction to Rural Health Transformation Program Cooperative Agreement
- Rural Health Transformation Plan (RHTP) Initiatives and Updates:
 - Rural Community Health Integration
 - Strengthening Rural Communities with Technology-Enhanced Primary Care (Patient-Centered Medical Home)
 - Rural Roots: Building a Sustainable Rural Healthcare Workforce
 - Investments in Technology Innovation & Cybersecurity Resiliency
- Next Steps

RURAL HEALTH TRANSFORMATION PROGRAM – FUNDING

- Five-Year \$50 billion to all approved states, \$10 billion per year
- New York State Award: \$212,058,207.80
- Budget Period
December 29, 2025 – October 30, 2026
- Budget Period 2:
October 31, 2026 – October 30, 2027
- Five-Year Period:
December 29, 2025 – October 30, 2030

PRINCIPLES OF NEW YORK'S RURAL HEALTH TRANSFORMATION PROGRAM

- Feasible
 - Measurable
 - Sustainable
 - Transformative
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- This is NOT a capital or operational grant program

COOPERATIVE AGREEMENT WITH CMS

- Working closely with CMS on all aspects of implementation.
- Participating in CMS Rural Health Peer Learning Series.
- Will require an annual non-competing continuation application to receive funding for each subsequent budget period pending CMS review and approval.
- First cycle spending is important.
- Future budget allocations contingent upon successful current cycle spend.

TARGET POPULATIONS AND GEOGRAPHIC AREAS

- Federal Office of Rural Health Policy definition includes counties with 10% or more of the population in rural census tracts or with fewer than 200,000 residents
- New York has identified 47 out of 62 counties that have been classified as rural for the purposes of this application.
- All of New York's initiatives have been carefully designed to address the needs of the rural populations within those counties.

STAKEHOLDER INPUT: COLLABORATION

- Strategy informed by input from nearly 170 stakeholder organizations and community partners
- Continuing to gather stakeholder input
- Establishing Advisory Workgroup to meet in the fall

IMPLEMENTATION TEAM

- Office of Health Care Delivery, Office of Primary Care and Health Systems Management - Center for Health Care Policy and Resource Development
- Department of Health Staff
- Project Director and Project Coordinator
- Project Support Consultant
- State Agencies

GOALS AND STRATEGIES

- **Rural Health Transformation Plan (RHTP)**

Strategies:

- Rural Community Health Integration
- Strengthening Rural Communities with Technology-Enhanced Primary Care (Patient-Centered Medical Home)
- Rural Roots: Building a Sustainable Rural Healthcare Workforce
- Investments in Technology Innovation & Cybersecurity Resiliency

RURAL COMMUNITY HEALTH INTEGRATION

Overall Goal: Establish coordinated rural health partnerships between rural facilities, providers, community-based organizations, and counties to facilitate comprehensive care coordination

- Build or grow integrated health networks to enhance healthcare delivery, coordination, and outcomes,
- Enhance patient access to a wide range of providers across the care continuum,
- Effectively address health and social needs.

RURAL COMMUNITY HEALTH INTEGRATION UPDATE

- Funding Guidance Released: June 11, 2026
- Applications Due: July 14, 2026
- 91 Applications, \$156,000,000 total request
 - 141 Individual Projects
- Reviews and Funding Recommendation In Progress
- Funding Announcements by the end of August*

* Subject to CMS Review and Approval

RURAL COMMUNITY HEALTH INTEGRATION UPDATE

- Projects must be completed by June 30, 2027 to ensure expenditure of funds by September 30, 2027
- Budget Period 2 Funding Guidance Planned for November*

* Subject to CMS Review and Approval

TECHNOLOGY-ENHANCED PRIMARY CARE

Overall Goal: Improve rural patient access to and utilization of high-quality primary care

- Expand the number of Patient Centered Medical Home-recognized providers and accelerate their adoption of enabling technology to improve access, care coordination, and outcomes. Higher utilization of this model will directly enhance the capacity of rural providers to meet community needs.
- Grants to primary care practices for minor capital improvements and staff training on best care practices for patients with accessibility issues will help to improve Americans with Disabilities Act compliance.
- Grants to accelerate primary care practices utilization of advanced analytics to improve operational efficiency, quality, and financial sustainability.

TECHNOLOGY-ENHANCED PRIMARY CARE: UPDATE

- Finalizing the Scope of Work with a contractor to conduct the work in this initiative
- Patient Centered Medical Home activities will begin upon contract execution*
- Funding Guidance for primary care grants: Fall 2026*
 - Funds will be managed by the awarded contractor acting as a third-party administrator

* Subject to CMS Review and Approval

RURAL ROOTS: BUILDING A SUSTAINABLE RURAL HEALTHCARE WORKFORCE

Overall Goal: Comprehensive strategy to address health care workforce issues

- Recruit and train more practitioners for rural areas by combining planning, targeted education, and innovative support.
- Data-driven approach to identify local specialty gaps, invest in early career exposure for students, support enhanced clinical rotations, strengthen employer-based training programs, and expand EMS education through new remote supported training technologies.
- Address both immediate staffing needs and long-term capacity-building,
- Ensure New York's rural communities have continuous access to high-quality health care services tailored to their regional circumstances.

RURAL ROOTS: BUILDING A SUSTAINABLE RURAL HEALTHCARE WORKFORCE: UPDATE

- Finalizing a Scope of Work for early career exposure for students and enhanced clinical rotations work *
- Developing a Scope of Work for workforce development activities*
- Finalizing a Memorandum of Understanding for data analysis work*
- Funding Guidance for EMS and Recruitment to Service: Fall 2026*
 - Funds will be administered by a contractor acting as a third-party administrator

* Subject to CMS Review and Approval

INVESTMENTS IN TECHNOLOGY INNOVATION AND CYBERSECURITY RESILIENCE FOR RURAL NEW YORK

Overall Goal: Strengthen cybersecurity and invest in innovative technologies

- Increase cybersecurity of rural facilities
- Expand access to care through telehealth
- Improve patient outcomes through eConsult partnerships
- Improve care coordination alerts between healthcare agencies in rural counties
- Strategic efforts to partner health care facilities and practices with the State Health Information-NY health information exchange and cybersecurity experts
- Support systems with a cloud-native, Artificial Intelligence-enabled, modular platform that generates actionable intelligence for rural health care providers.

INVESTMENTS IN TECHNOLOGY INNOVATION AND CYBERSECURITY RESILIENCE FOR RURAL NEW YORK: UPDATE

- Finalizing the Scope of Work with a contractor to conduct the cybersecurity activities*
 - Budget Period 1: Hospitals
 - Budget Periods 2 – 5: Other Providers including long-term care
- Funding Guidance for other information technology activities: Fall 2026
 - Funds will be managed by a contractor acting as a third-party administrator*

*Subject to CMS Review and Approval



CYBERSECURITY RESILIENCE INITIATIVE WEBINAR: AUGUST 17



Learn how the initiative supports rural healthcare resilience, care continuity, and future funding consideration.



The August 17 session will cover:

- How the Cybersecurity Resilience Initiative fits within RHTP
- Why cyber resilience matters to patient care and operations
- What the no-cost cybersecurity resiliency assessment involves
- What facilities can expect from the assessment platform
- How to ask questions and express interest
- Expected next steps



Date and time: August 17, 3:00 to 3:30 pm ET

Register at: <https://meetny.gov.webex.com/webex/register/re9ef8454611b4d93cda92ba91fde8729>

NEXT STEPS

- Final Contract Execution Across All Initiatives
 - Approximately 70 grant and vendor contracts before October 30, 2026
- Annual Report #1 Due: August 31, 2026
 - Year 1 Reporting Period End Date: July 31, 2026
- Non-Competing Continuation: August 31, 2026
- Quarterly Report for August 1, 2026 – October 30, 2026 due: November 29, 2026
- Budget Period 2 Planning: 2nd Round of Rural Community Health Integration funding and Evaluation, pending CMS review and approval

THANK YOU

QUESTIONS?

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