

Rural Health Transformation Program

- Rebecca de Camara, Medicaid and Health Services
Executive Director



DEPARTMENT OF
PUBLIC HEALTH &
HUMAN SERVICES

Rural Health Transformation Program (RHTP) Overview

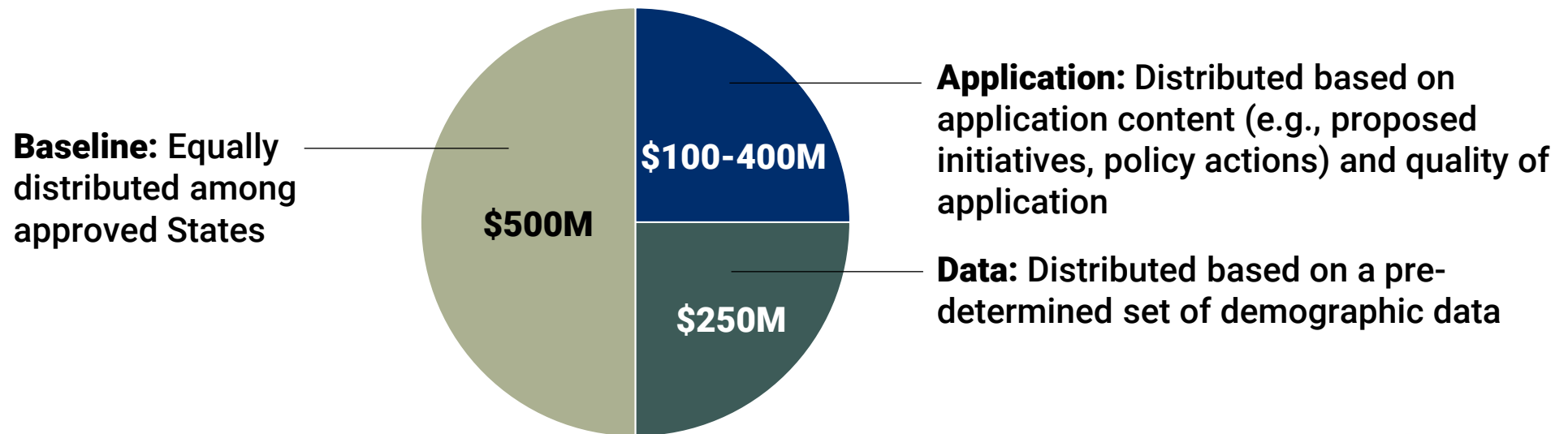
- RHTP could provide Montana with approximately \$1B in additional funding over the next five years, pending application evaluation
- DPHHS has hosted a statewide webinar, formal tribal consultation, and directly engaged 20+ external stakeholders, including MHA, MSU Office of Rural Health, Rocky Mountain Tribal Leaders Council, and the tribal nations and Urban Indian Organizations; issued and summarized responses to the RFI; worked closely with DLI and other government agencies
- Current RHTP draft includes the following five components in accordance with CMS priorities:
 1. **Developing the health care workforce**
 2. **Ensuring rural facility financial sustainability**
 3. **Launching innovative care models**
 4. **Investing in community health and prevention**
 5. **Deploying needed technologies**



RHTP: \$50B Total Funding Opportunity

- RHTP will provide a \$50B total opportunity across states, with each state receiving funding based on a set of criteria

Potential Montana funding over the 5-year RHTP period (~\$1B)



Stakeholder Engagement

DPHHS has engaged provider groups, health care professional associations, health care alliances and systems, education systems, tribal communities, and community advocacy organizations, including:

- Releasing a **Request for Information (RFI)** that received > 300 responses
- **Hosting public webinar** with over 900 registrants
- **One-on-one consultations** with more than 20 Montana health stakeholders
- **Engaging Montana's tribal populations** through a pre-tribal consultation information meeting, a tribal engagement survey, and an official tribal consultation with Montana's eight tribal nations and five Urban Indian Health Organizations
- **Collecting a letter of support** from 70 stakeholder organizations for DPHHS's outlined rural health transformation strategy
- **Working closely with internal DPHHS programs, the Department of Labor and Industry, the Governor's Office,** and other government stakeholders



Initiative 1: Develop workforce through recruitment, training, and retention

To attract more health care providers to rural and frontier areas in Montana, DPHHS plans to invest RHTP funds in:

- **Recruiting health care providers**
 - Increased apprenticeships
 - Reimbursing related instruction costs
- **Increasing ability to train health care providers in rural and frontier areas**
 - More physician residency slots
 - Supervisor and apprenticeship incentives
 - Additional training and career options (e.g., upskilling)
- **Encouraging providers to stay in rural Montana and have ongoing training for the skills they need to treat the rural population (e.g., primary care/behavioral health integration)**

This initiative builds on the State's 406 JOBS Initiative and will be implemented alongside DLI.



Initiative 2: Ensure rural facility financial sustainability and access through partnerships and restructuring

Rural hospitals face economic challenges due to low utilization, which threatens their viability. To support these facilities, DPHHS plans to use RHTP funds for the following:

- **Advising on profitability**
 - The State will assist rural hospitals in improving operations and profitability by providing technical assistance and financial incentives to adjust services and staffing based on community needs
- **Connecting to specialists and fostering provider partnerships**
 - Enhanced partnerships and telehealth services will link rural hospitals with specialists statewide, including virtual care for stroke and mental health, along with improved transportation coordination
- **Building partnerships**
 - Fostering collaboration among rural facilities will enhance their negotiating power to reduce costs for administrative services, medical supplies, and medications



Initiative 3: Launch innovative care delivery and payment models

Montana residents frequently face challenges accessing health care services beyond hospital settings. To enhance the delivery of care in rural areas, DPHHS plans to use RHTP funds for:

- **Incentivizing value-based care**
 - Transitioning more rural health care providers to value-based care models, which focus on reimbursing for the quality of services rendered
- **Authorizing “Treat in Place”**
 - Empowering EMS to deliver on-site care when feasible to reduce emergency room admissions, along with upgrading ambulances and EMS equipment
- **Expanding rural pharmacy services**
 - Permitting and equipping pharmacists to prescribe medications and offer basic primary care, as well as manage chronic diseases



Initiative 4: Invest in community health and preventative infrastructure

Rural Montanans frequently lack access to preventative health care and infrastructure to promote healthy lifestyles, which leads to a high level of chronic disease. To address this, DPHHS plans to invest RHTP funds in:

- **Increasing care in community-based settings**
 - Facilitating more primary care and behavioral health in schools through partnerships with FQHCs and other providers
 - Purchasing/retrofitting mobile care vans for providers and payers to bring services to rural communities
- **Repairing outdated rural health care infrastructure**
 - Providing funding for minor renovations and repairs
 - Ensuring future Community Behavioral Health Clinics (CCBHCs) can provide crisis “safe spaces”
- **Investing in community spaces that promote healthy lifestyles**
 - One-time funding for community gardens and similar projects to improve rural population health and nutrition



Initiative 5: Upgrade health care technology to coordinate and improve care

- **Enhance data usability and health interventions**
 - **Create tools for actionable insights** using Montana's health data (hospital and behavioral health bed registry)
 - **Implement monitoring and evaluation programs** leveraging data warehouse
 - Preventable emergency department visits
 - Chronic disease episodes leading to hospitalizations
 - High-value specialty care for quality and cost
- **Modernize Electronic Health Record (EHR) systems for rural providers**
 - **Update EHR systems** for providers on outdated (non-HITECH certified) platforms
 - **Fund consumer-facing EHR modules** to enable nutrition and chronic disease management and remote patient monitoring

