

# Rural Health Transformation

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# Key RHT Program Details

## Key Dates:

- First annual report due to CMS: 8/30/2026
- Fund obligation deadline: 10/30/2026
- Spending deadline: 9/30/2027

- **Opportunity:** A \$50 billion Centers for Medicare and Medicaid Services (CMS) initiative (FFY 2026–2030) to help *states* modernize rural health systems — improving access, quality, and sustainability through infrastructure, workforce, and care model transformation.
  - Vermont’s first year award: **\$195,053,740**
- **Award Type:** RHT is a cooperative agreement, not a grant, which has an impact on implementation and CMS oversight (see pg 4-5 of award for full list of details)
- **Awarded but Unexpended/Unobligated Funds** will be redistributed among states in the next funding year

# Application Parameters

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**Notice of Funding Opportunity** outlined areas of focus for the application, along with funding restrictions

**RHT Is Essentially One-time Funding**, best used for activities such as launching initiatives, transitions to new models, purchasing of technology and equipment, promoting collaboration

**Notable Funding Limitations include:**

- Restrictions on "supplantation" of the state budget
- Restrictions on funding construction that increases property values
- Restrictions on funding for otherwise billable services that are already being reimbursed
- Provider payments cannot exceed 15% of the total award (just over \$29 million)

# Vermont's RHT Initiative Categories

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- 1) Regionalization and Innovative Care Strategies**
- 2) Establishing a Clinically Integrated Network of Shared Services**
- 3) Strengthening Primary Care**
- 4) Health Care Workforce Development**
- 5) Price Transparency and Insurance Competition**

# Vermont's RHT Initiative Overview

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**Build Stronger Rural Health Networks:** Strengthen primary care, support transfers, enlist the EMS in a new way, create new mobile health and dental options, build out mental health urgent care, expand access to complex care in nursing facilities, expand recovery housing, implement pharmacy “test-to-treat”

**Technology and Shared Operations:** Shared EHR for interested providers, remote patient monitoring, “closed-loop” referrals, shared HR systems, support for AI transcription

**Strengthen the Rural Health Workforce:** Training programs at clinical sites across the continuum, financial incentives for education

**Planning:** Exploring strategies to expand insurance options and a reinsurance model, consumer-facing price and quality transparency tools, data and expert support to regionalize some services

# Ongoing Stakeholder Engagement

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- AHS has an [RHT Program page](#) on the Office of Health Care Reforms website which includes:
  - A **public contact form**
  - The [project narrative](#), [summary](#) and [list of projects](#)
  - Instructions to sign up for Vermont's RHT email list for updates about notices of grant opportunities, RFIs, RFPs and other RHT news
- AHS is leveraging standing committees (Workforce, Health Care Delivery Strategic Advisory Committee, Primary Care Steering Committee, and others) and other past and present health care reform planning activities such as Regionalization/Transformation planning activities