



INDIANA
RURAL HEALTH TRANSFORMATION

RHTP Initiative Updates

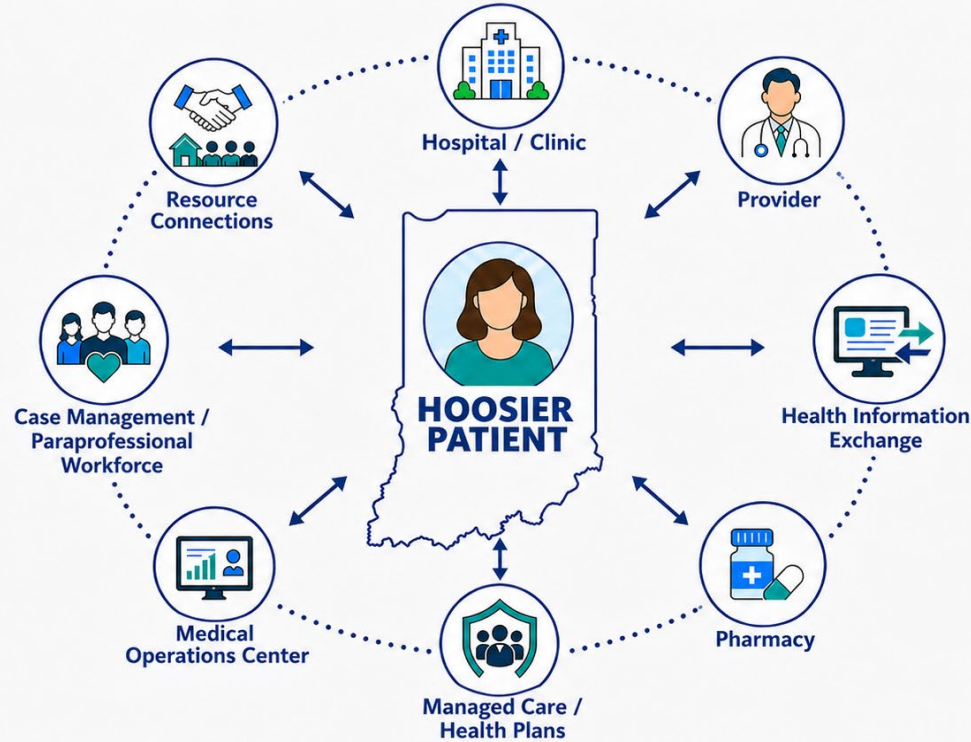
June 2026



Indiana
Department
of
Health

This **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 **\$206,927,896.80** with 100 percent funded by CMS/HHS. The contents 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.

Right Care. Right Place. Right Time.





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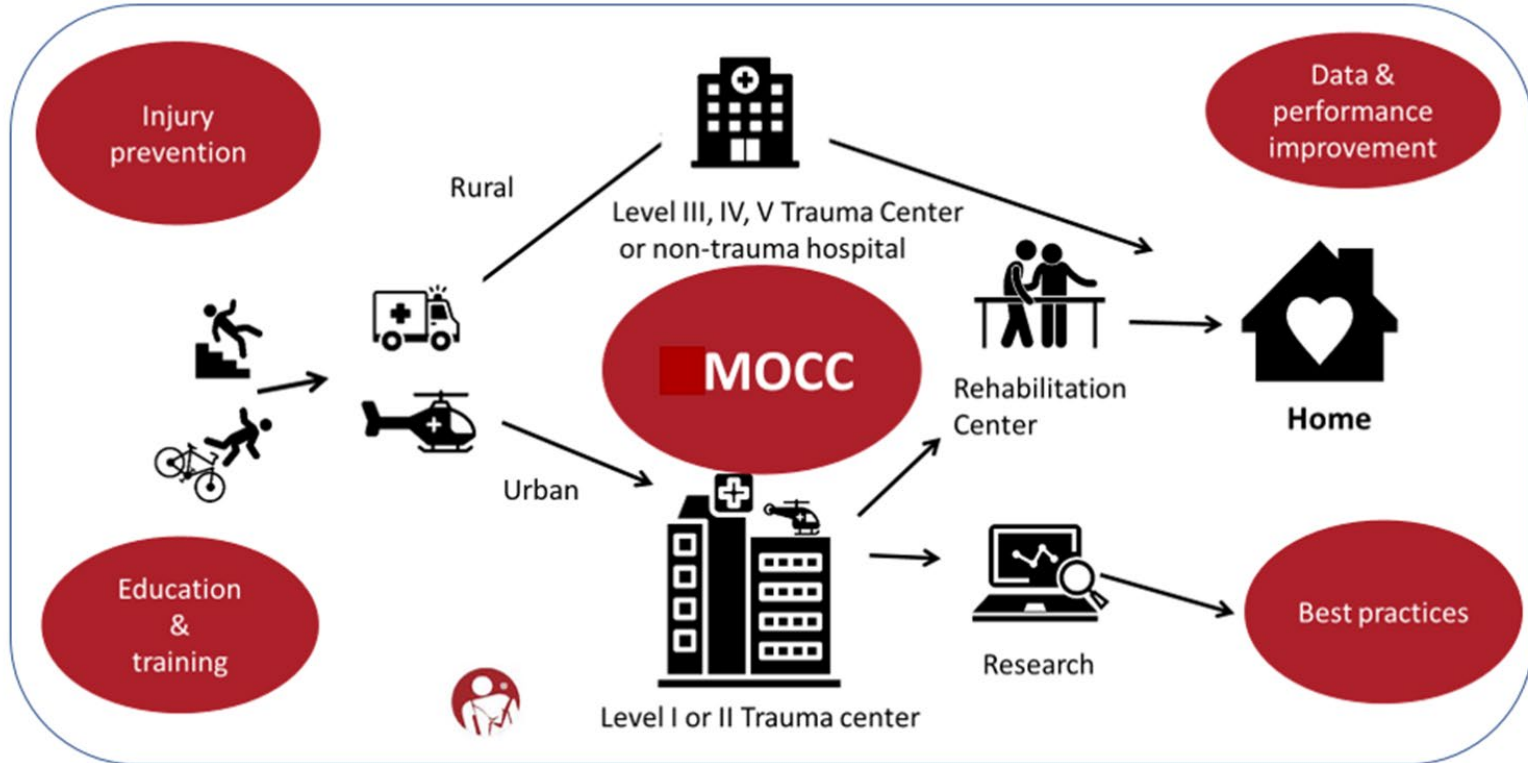
Initiative 1: Growing Care Coordination - Medical Operations Coordination Center and Alternate Payment Model Feasibility Study

Eric Yazel, IDOH Chief Medical Officer

Ashten Shetterley, Policy Manager, FSSA Office of Medicaid Policy and Planning

Objective: Ensure rural communities get timely access to trauma, stroke, psychiatric and maternal care through a 24/7 statewide hub intended to coordinate patient transfers, EMS resources, hospital capacity and preparedness.

Daily MOCC Use for Coordination of Emergency Care



Initiative 1: Growing Care Coordination

Year 1 Activities

- I. Establish healthcare emergency systems platform, including capacity and patient movement monitoring
- II. Establish MOCC, including communications and operational policy and procedures
- III. Conduct Rural APM Feasibility Study

- MOCC Request for Proposals (RFP) - services and systems
 - Key Dates:
 - Posted: 5/13/26
 - Bids due: 6/15/26
 - Award recommendation: 7/2/26
- Executive Steering Committee
 - Ongoing communication and sharing of national (TX, OR, AL, AZ) lessons learned with hospital and EMS leaders
- Established and kicked off APM meeting group in late February – **Complete**
- APM Feasibility Study Scope drafting – **Complete**
- Posting APM Feasibility Study RFP – **Upcoming**



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Initiative 2: Growing Community Connections through Indiana 211

Kevin Evans, Deputy Director
Indiana 211

Objective: To leverage Indiana 211 as the statewide infrastructure for health and human services resource data, enabling providers to identify needs, initiate referrals and track outcomes with a closed-loop system of care.

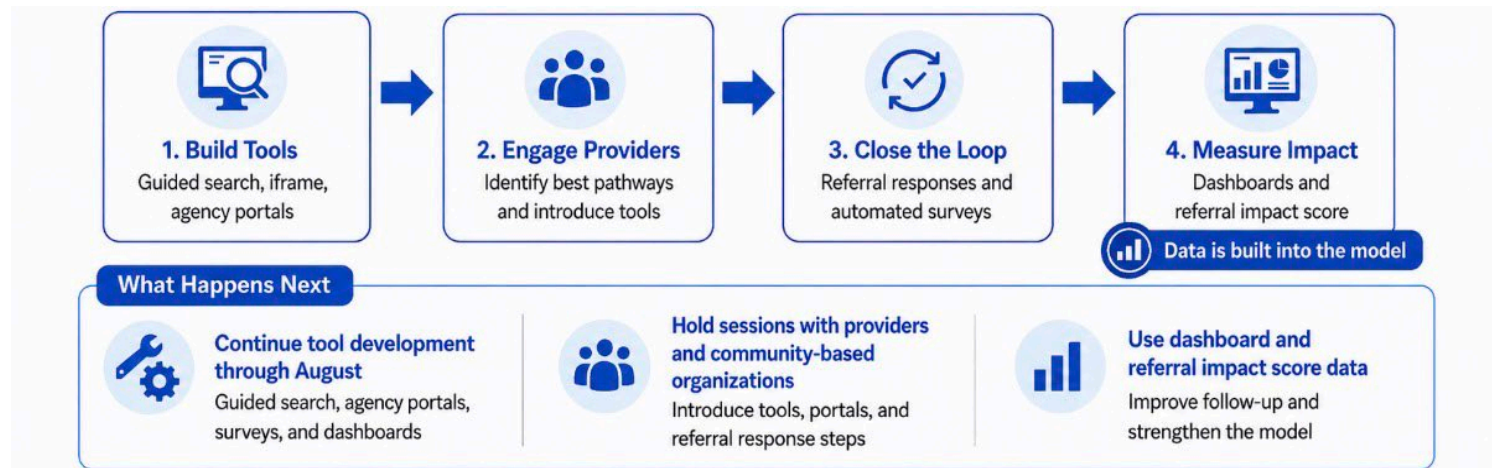
Initiative 2: Growing Community Connections through Indiana 211



Initiative 2: Growing Community Connections through Indiana 211

Key Year 1 Activities

- I. Establish contractual agreements with necessary systems integration and community resource partners - **COMPLETE**
- II. Establish EMR and non-EMR integration solutions – **IN PROGRESS**
- III. Conduct provider network engagement and assessment to inform integration solutions and community resources – **IN PROGRESS**





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Initiative 3: Improving Patient Outcomes through Enhanced Interoperability and Tech

Bob Davis, IDOH Chief Public Health Intelligence and Transformation Officer

Objective: To connect over 450 facilities/organizations to the Indiana Health Information Exchange (IHIE) enabling the **secured** sharing/access of patient health information. To advance Mobile Integrated Health (MIH) by integrating EMS into the HIE and care coordination systems.

Right Care

HEALTH INFORMATION EXCHANGE



Right Place

Right Time

Initiative 3: Growing Improved Patient Outcomes through Enhanced Interoperability and Technology

Key Year 1 Activities

- I. Organization Readiness Assessment for HIE Connectivity ==> understanding of current capabilities; insights into barriers/constraints; inform practical, phased implementation strategies
 - II. Engage with associations and TA providers
 - III. Connect long-term care facilities, initially focused on SNFs/NFs; other prioritized provider cohorts
 - IV. Assess patient consent management with respect to data that is protected under 42 CFR Part 2 (FQHCs, CMHCs, CCBHCs)
- Health Information Exchange (HIE) Provider Readiness Assessment (survey style) **In progress**
 - Care setting and workflow
 - Resource availability and scale capacity
 - Technology environment and interoperability maturity
 - Regulatory/data sharing constraints
 - HIE Statements of Work – leveraging State's Managed Service Provider (MSP) process **In progress**
 - ~200 facilities to connect/integrate within year 1+
 - Long Term Care: Skilled Nursing Facilities
 - Federally Qualified Health Centers
 - Community Mental Health Centers, Certified Community Behavioral Health Clinics
 - Critical Access Hospitals
 - Implement infrastructure to comply with 42 CFR Part 2 (patient consent)
 - Year 2+: EMS, rural health clinics, other (TBD)
 - Mobile Integrated Health (MIH): Driven by Indiana Department of Homeland Security EMS Division - **Happening**
 - **Staffing and Regional Support:** to strengthen direct engagement with MIH programs
 - **Program Outreach and Assessment:** providing valuable insight into the current MIH landscape while helping establish stronger connections between state resources and local programs
 - **Data Standardization and Future Platform Preparation:** alignment of local programs with standardized data elements will reduce implementation barriers, improve data quality, and provide a more comprehensive understanding of MIH activities and outcomes



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Initiative 4: Pediatric and Obstetric Readiness in Rural Emergency Departments

Angelo Soto, Director
IDOH Director of Emergency Preparedness

Objective: Establish key partnerships with stakeholders to conduct needs assessments, provide technical assistance, training and growth of programmatic infrastructure to help rural EDs and pre-hospital entities attain pediatric/obstetric readiness status.



Major Elements of the Initiative

Establishing partnerships with all qualifying rural EDs and pre-hospital entities

Build Partnerships



OB/PEDs collaboration

Assess Readiness



EDs and EMS

Train & Equip



ED and pre-hospital teams

Setting up infrastructure and connecting resources to rural EDs and pre-hospital partners

Taking an assessment that is comprehensive and provides a plan to OB/PEDs readiness.

Initiative 4: Growing Pediatric & Obstetric Readiness in Rural Emergency Departments

Key Year 1 Activities

- I. Issue grants and contracts with key stakeholders to begin the grant disbursement process. **COMPLETED**
- II. Initiate standards of readiness and begin assessments for qualifying rural health entities. **IN PROGRESS**
- III. Develop infrastructure for training, equipment, and data management. **IN PROGRESS**

- Key outcomes this year: Qualified EDs and pre-hospital entities are supported to work on PEDs/OB readiness to better care for Hoosiers in an ever-growing care gap within our rural areas of Indiana.



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RURAL HEALTH TRANSFORMATION

Initiative 5: Cardiometabolic Standards of Care in Rural Indiana

Naima Gardner, Assistant Commissioner
IDOH Women, Children, and Families Commission

Objective: In rural Indiana, health starts at home — Initiative 5 strengthens that foundation by expanding access to chronic disease prevention through local Cardiometabolic Centers of Excellence, practical nutrition and physical activity education, workforce training in Lifestyle Medicine and community-driven Food is Medicine opportunities.



Initiative 5 Lifestyle Support Activities

- SNAP participants in rural counties will have increased access to fruits and vegetables through expansion of Double Up Indiana into retail
- Purdue Extension and the Indiana Alliance of YMCAs will deliver direct education and multi-level health behavior supports in rural counties

FOOD IS MEDICINE



- To increase access to healthy food as a component of care in rural communities, IDOH is reviewing proposals for a comprehensive Food is Medicine feasibility study

Cardiovascular-Kidney-Metabolic Centers of Excellence

- RHTP will support the implementation of seven new CKM Centers of Excellence
- With support from Major Hospital in Shelbyville and the American Heart Association (AHA), IDOH will facilitate the creation of 7 new rural access points for Hoosiers to receive comprehensive cardiometabolic treatment.
- IDOH received 24 letters of interest from rural hospitals around the state.
- In collaboration with AHA, IDOH is reviewing these submissions and will announce the implementation sites in July.

Initiative 5: Growing Cardiometabolic Health Standards of Care in Rural Indiana

- ✓ ● Rural hospital feasibility assessment for CKM model released
- ✓ ● 5-2-1-0 marketing plan finalized
- ✓ ● American College of Lifestyle Medicine onboarded to provide up to 700 certifications and up to 500 trainings in Year 1
- **In process:** reviewing proposals for Food is Medicine Feasibility Study
- **In process:** reviewing proposals for Double Up retail expansion study
- **In process:** finalizing grant agreements with Purdue Extension and Indiana Alliance of YMCAs



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Initiative 6: Access to Hospital Post-Discharge Medications

Lauren Savitskas, Meds-to-Beds Project Manager
IDOH Division of Chronic Disease, Primary Care and Rural Health

Objective: Ensure hospital patients in rural communities receive their prescription medications before discharge, at outpatient prices, and that clinical staff work with each patient to review their medications, answer questions and support transition of care.

Hospital Meds-to-Beds Program



A pharmacy service providing medications to hospital inpatients and Emergency Department patients prior to discharge

Initiative 6: Growing Access to Hospital Post-Discharge Medications

- ✓ ● Informational webinars for hospitals – April 6-10
- ✓ ● Hospital assessment administered through April 17
 - 43 sites will be awarded \$20,000 for planning grants
- **NOW OPEN:** Follow-up survey open through June 19
 - Additional funding for hospitals prepared to provide medications at discharge by July 2027
- Year 1 grant agreements executed July 1-31
- Statewide Meds-to-Bed Steering Committee (Launch July 2026)
- Resource development and technical assistance for hospitals-ongoing through Year 1

Initiative 6: Growing Access to Hospital Post-Discharge Medications

Year 1 Funding Pathways

\$20,000 Implementation Planning Grants

- Baseline data report due 10/31/2026
- Hospital-specific implementation plan due 12/31/2026

Additional funds to implement elements of Meds-to-Beds

- Baseline data report due 10/31/2026
- Hospital-specific implementation plan due 12/31/2026
- Meds-to-Beds deliverables specific to the facility
- Provide medications to patients at discharge by 7/31/2027



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RURAL HEALTH TRANSFORMATION

Initiatives 7 & 8: Expanding Teleconsultation and Telehealth Access and Infrastructure

Peter Krombach

IDOH Deputy Chief Data Officer

Objective: Improve access to care in rural communities by expanding telehealth and teleconsultation capabilities, strengthening infrastructure, and enabling timely, coordinated, technology-supported care for high-impact conditions.





**ACCESS TO
CARE EXPANSION**
(Synchronous)



**DEFERRED
CARE**
(Asynchronous /
eConsult)



**CONTINUOUS
CARE**
Remote Patient
Monitoring &
Mobile Health



**VIRTUAL
CARE HUBS**



**ACCESS TO
CARE EXPANSION**



**CARE DELIVERY
TRANSFORMATION**



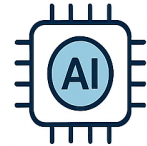
**CHRONIC DISEASE
MANAGEMENT**



**PREVENTION &
POPULATION
HEALTH**



**WORKFORCE &
PROVIDER SUPPORT**



**TECHNOLOGY
INNOVATION & AI**

Initiatives 7 & 8: Growing Teleconsult & Telehealth Access and Infrastructure

Key Year 1 Activities

- I. Conduct landscape assessment
- II. Identify and evaluate opportunities for extending current partnerships or implementing pilot programs through grants

- Teleconsultation and Telehealth Health Landscape Assessment
 - **NEW:** Assessment vendor identified – anticipated start upon contract execution
 - Identify gaps in access, infrastructure, and specialty care availability, with emphasis on rural and potentially underserved populations
 - Develop a data-driven prioritization framework for high-impact investment areas
 - Inform policy recommendations, reimbursement and sustainability planning
- Telemedicine Steering Committee – **In planning**
- Request for Funding Opportunity – Telehealth Pilots
 - 10-month grant award to enhance existing telehealth infrastructure and programs
 - Application period will open on July 6, 2026



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Initiative 9: Growing our Rural Health Paraprofessional Workforce

Shelbi Cummings, Rural Health Director
IDOH Division of Nutrition and Physical Activity

Objective: Strengthen and retain the healthcare, behavioral health and oral health paraprofessional workforce by building career pathways, providing employer technical assistance and integrating community health workers into clinical and community care.

We are investing in Growing our Healthcare Paraprofessional Workforce



**Strengthening
the CHW
Ecosystem**



**Rural
Healthcare
Academies**



**Rural Healthcare
Paraprofessional
Recruitment and Retention**



**Expand
Access**



**Improve
Clinical
Outcomes**



**Reduce
Cost
of Care**



**Strengthen
Care Coordination**

Initiative 9: Growing our Rural Health Paraprofessional Workforce

Key Year 1 Activities

- I. Convene cross-sector partners to develop a statewide CHW strategic plan
- II. Develop rural employer TA playbook for integrating healthcare, behavioral and oral health paraprofessional roles in clinical and community care pathways
- III. Implement rural healthcare academies to engage rural high school students in healthcare, behavioral and oral health career pathways
- IV. Fund workforce recruitment and retention innovation strategies

- Expand stakeholder representation on Paraprofessional Workforce Workgroup - **Complete**
- Onboard Paraprofessional Workforce Coordinator, Delanie Marks – **Complete**
- Awarded three organizations to implement the Community Health Worker Sustainability and Integration Activities – **Complete**
- Final Review of Rural Healthcare Academies proposals – **In progress**
- Finalize recruiting and retention innovation strategy – **In progress**



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Initiative 10: Clinical Training and Readiness

Brooke Mullen, Director
IDOH Office of Performance Excellence

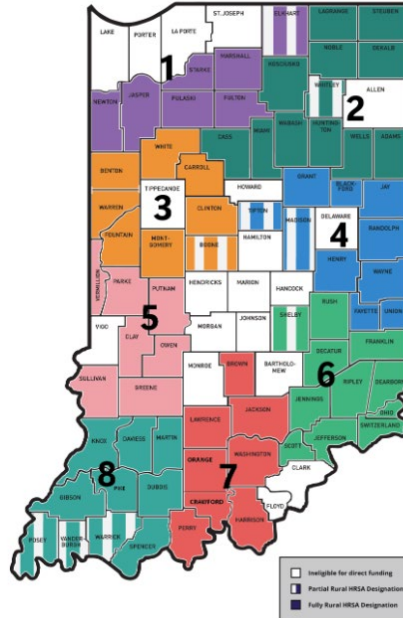
Objective: Advance rural healthcare access and clinical workforce strength through expanded physician training pathways, increasing clinical rotation capacity and targeted investments in maternal health.

Initiative 10: Growing Clinical Training and Readiness

Key Year 1 Activities

- I. GME enhancement – Rural Graduate Medical Education Strategic Plan
- II. Physician incentives

- \$5 million for existing rural GME programs – **In process**
 - Funds to be awarded in July
- Rural GME strategic plan – **In process**
 - Vendor Selected
 - Project kick-off scheduled for June 17



- Physician Incentives – **In process**
 - Up to \$300,000 for a 5-year, full time commitment
 - Applications accepted beginning June 17 and will close on July 20
 - <https://www.in.gov/grow-rural-health/initiatives/initiative-10/>

Initiative 10: Growing Clinical Training and Readiness

Key Year 1 Activities

- III. Rural preceptor incentives
- IV. Development of Rural Health Preceptor Registry

IDOA Indiana Department of Administration			
			Preceptor Registry for the State of Indiana. This is Initiative 10 of the Rural Health Transformation Program (RHTP).
RHTP Initiative 10 Preceptor Registry	Indiana Dept of Health	00400000087556	On Dec. 29, 2026, Indiana was awarded a grant of nearly \$207 million for the first year of the five-year Rural Health Transformation Program (RHTP) to address health outcomes in the state's rural communities.
Bid Documents			The Indiana Department of Health seeks a respondent to: 1. Manage the Rural Physician Stipends and Rural Preceptorship Stipends associated with the Clinical Training and Readiness initiative of GROW: Cultivating Hoosier Health. The program will ensure accurate, compliant, and timely management of stipend payments in accordance with program development. This includes eligibility verification, payment processing, compliance oversight, and reporting. 2. Design, develop, implement, and maintain a centralized rural preceptor registry to support the identification, recruitment, management, and utilization of preceptors for rural clinical experience, education, or training programs.

- Request for proposals being accepted through IDOA until June 15 at 3 p.m. EST – **Expiring soon**

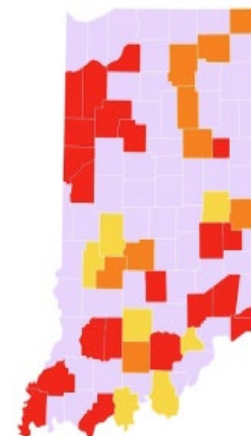
- Preceptor Incentives of up to \$10,000 per year to launch in 2027– **In process**
- Rural Preceptor Registry to launch in 2027 – **In process**

Initiative 10: Growing Clinical Training and Readiness

Key Year 1 Activities

V. Investing in maternal health to empower rural communities

- OB Fellowship for Family Med Physicians – **OPEN**
- Certified Nurse Midwife Training – **OPEN**
- Request for funding applications are available until July 6
 - <https://www.in.gov/grow-rural-health/initiatives/initiative-10/>





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Initiative 11: Growing our Rural Behavioral Health Workforce

Katrina Norris, Deputy Director
FSSA Indiana State Psychiatric Hospital Network (ISPHN)

Objective: Grow and retain the **rural behavioral health workforce** through career pathways, employer support and expanded training.



Initiative 11: Growing our Rural Behavioral Health Workforce

Indiana ranks **44th** nationally for Mental Health Workforce availability with a **500 to 1** ratio compared to the national ratio of **320 to 1**.



Initiative 11: Growing our Rural Behavioral Health Workforce

Key Year 1 Activities

- I. Establish Healthcare Academies partner in collaboration with Initiative 9
- II. Establish grants for peer certification training and ongoing education
- III. Establish grant for BH threat assessment and management training workshops
- IV. Issue Clinical SWK and R&R Requests for Funding (RFFs) and issue awards

- ✓ • Identified initiative workgroup members
- ✓ • Released clinical social worker and recruitment and retention RFFs
 - Reviewing proposals
 - 9/1/2026 target grant start date
- Collaboration with Initiative 9 to establish Healthcare Academies partner – **Ongoing**
- Grant agreements drafting for peer support and BH threat assessment training workshops – **In process**
 - BH Threat Assessment: Target grant start date 7/1/2026
 - Peer Support Training: Target grant start date 8/1/2026
 - Peer CEU Training: Target grant start date 9/1/2026



INDIANA

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Initiative 12: Growing Rural Opportunities for Well-being (GROW) Regional Grants

Naima Gardner, Assistant Commissioner
IDOH Women, Children, and Families Commission

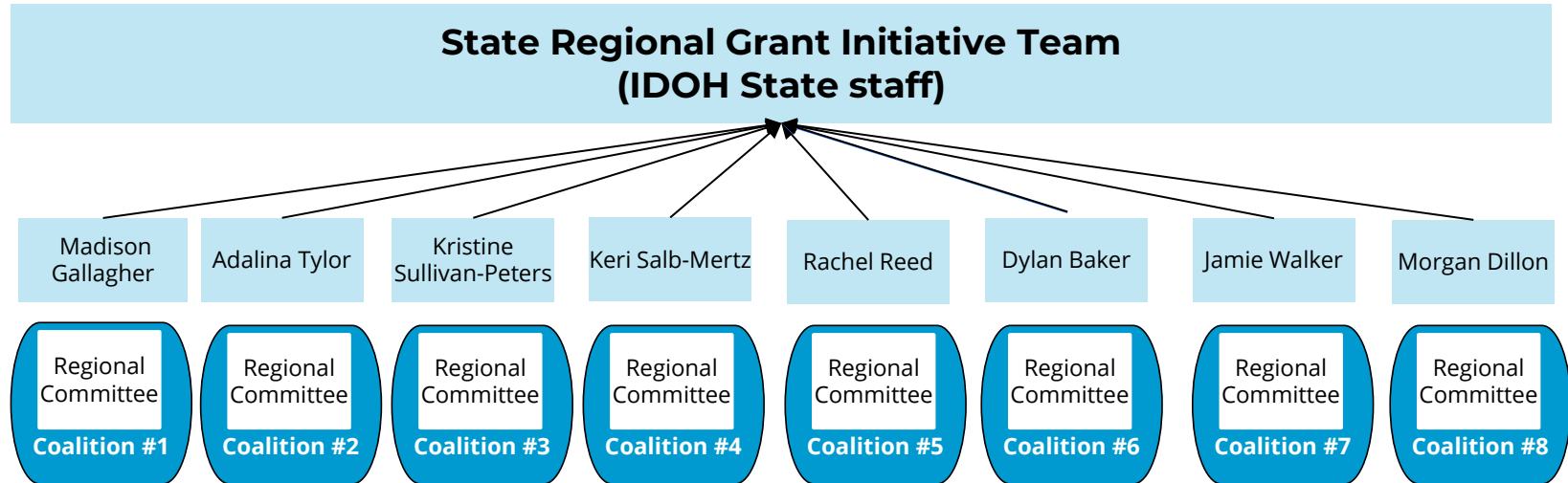
Objective: In rural Indiana, strong regions help ensure people can access the care and support they need close to home, and this initiative advances that vision by investing in regional grants that build durable cross-sector partnerships, strengthen local capacity, and support coordinated community-driven strategies that improve health and long-term well-being.



GROW Regional Grants

- The GROW Regional Grants are designed to complement the 11 statewide initiatives by serving as the local implementation engine for Indiana's RHTP priorities.
- Each Region must submit a unified application that supports the statewide RHTP objectives, with three required focus areas:
 1. Pre- and postnatal care
 2. Chronic disease prevention and management
 3. Access to care and unmet social needs
- Collaboratively designed and implemented with unique, community-driven governance structure.

RHTP State Steering Committee



Technical Assistance Providers

Needs Assessments, Regional Conveners, Grant Application Development Support

Rural Health Transformation Technical Assistance Network (RHT-TAN)

Regions 1, 2, 3

Andy VanZee

Indiana Hospital Association
(IHA)

avanzee@ihaconnect.org

Regions 4, 6

Ben Harvey

Indiana Primary Health Care
Association (IPHCA)

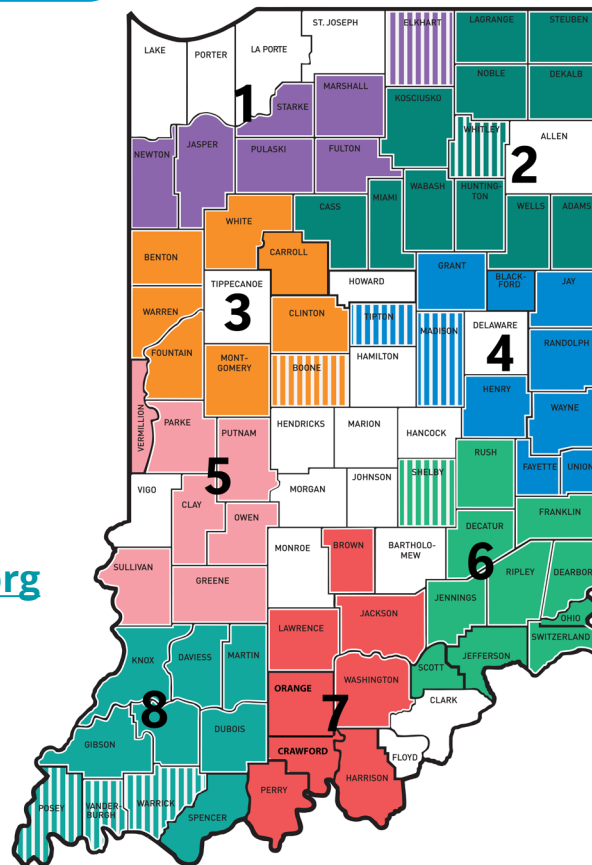
bharvey@indianapca.org

Regions 5, 7, 8

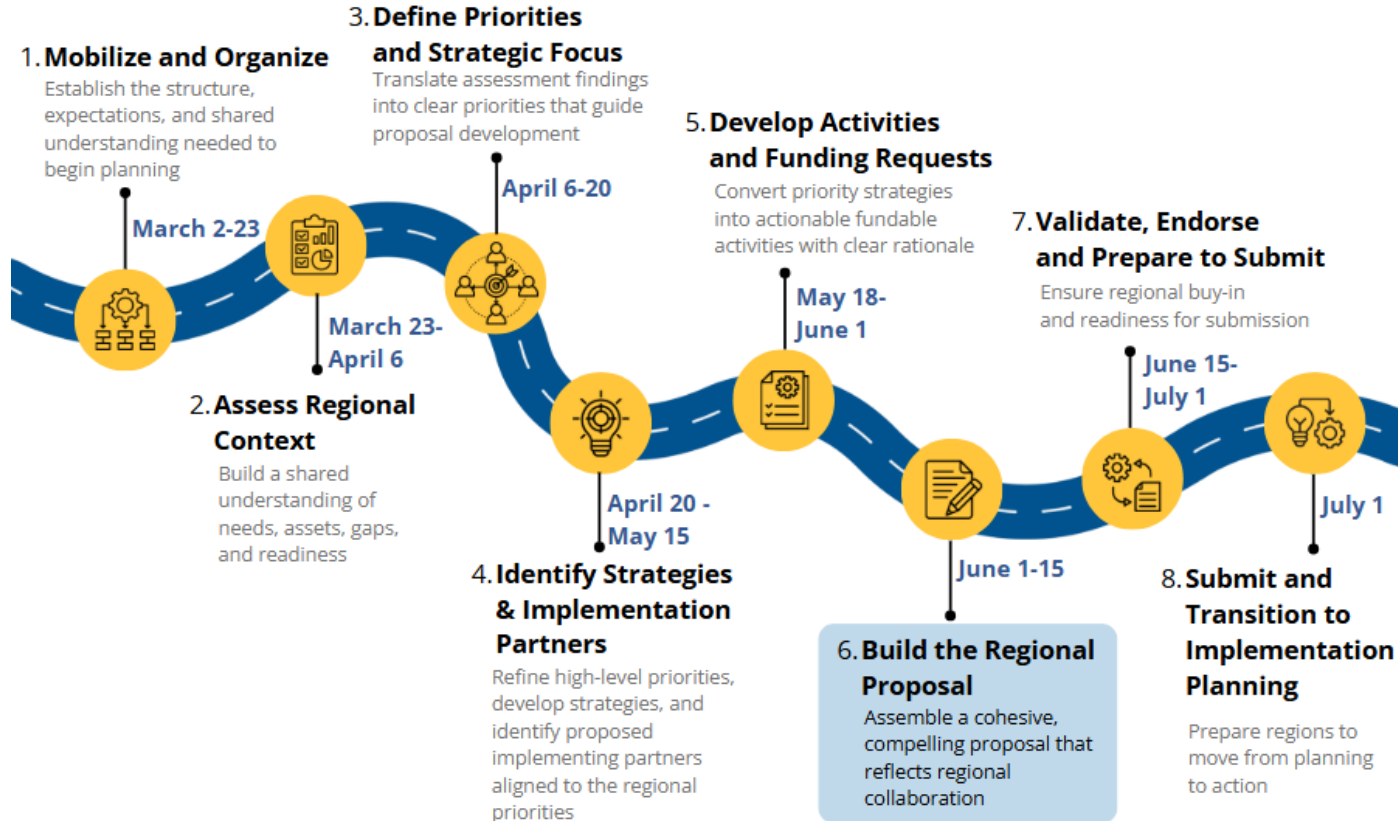
Dr. Cara Veale

Indiana Rural Health
Association
(IRHA)

cveale@indianarha.org



2026 Roadmap Application Development and Submission Process



Right Care

Region 6: Enhancing Access through Partnerships, Outreach, Innovation, Navigation, and Technology (AccessPOINT)

- **Activity 1:** Strengthen Workforce Supply through Career Pathways, Recruitment and Retention strategies
- **Activity 2:** Building a Connected Digital Health Ecosystem for Rural Health Transformation
- **Activity 3:** Increase Access to Mental Health Services through Outreach and Awareness
- **Activity 4:** Increasing Access through Expansion of Services

Partners:

- Inspire Success
- East Indiana Area Health Education Center (EI-AHEC)
- Rush Memorial Hospital
- Decatur County Memorial Hospital
- St. Elizabeth Healthcare – Dearborn
- Incompass Healthcare
- LifeSpring Health Systems
- Centerstone
- Aspire Indiana Health
- Lifetime Resources
- Lifespan Resources
- Thrive Alliance
- LifeStream
- Scott County Partnership
- River Valley Resources

Right Place

Region 5: Community Resources and Support Initiative

Activities:

- **Establish a regional transportation coordination model** that integrates healthcare, EMS, behavioral health and community transportation resources through centralized scheduling, dispatch and care coordination processes.
- **Expand transportation capacity** and service availability throughout Region 5 through additional routes, expanded service hours, cross-county coordination, vehicle deployment and optimization of existing transportation resources.
- Develop and implement **regional transportation agreements, referral pathways, and transportation protocols** among hospitals, primary care providers, behavioral health organizations, long-term care facilities, EMS and transportation providers.

Partners:

- Area 10 Agency on Aging of Monroe and Owen Co.
- Thrive West Central
- Sullivan County Ambulance Service
- Sullivan County Community Hospital
- Putnam County Hospital
- Ascension St. Vincent Clay Hospital
- Greene County General Hospital
- Hamilton Center

Right Time

Region 3: Mobile Integrated Health

Activities:

- Chronic disease monitoring visits
- Medication reconciliation and adherence support
- Post-discharge follow-up within 24-72 hours
- Behavioral health crisis follow-up and navigation
- Prenatal home visits for high-risk rural patients
- Telehealth facilitation and remote monitoring
- Transportation coordination and Indiana 211 referrals
- Regional MIH Community of Practice
- Shared documentation and referral pathway development

Partners:

- Regional and Critical Access Hospitals
- FQHCs and Rural Health Clinics
- Community Mental Centers and CCBHCs
- Regional EMS Agencies
- Local Health Departments
- Community Paramedicine Programs

Initiative 12: GROW (Growing Rural Opportunities for Well-being) Regional Grants

Key Year 1 Activities

- I. Issue GROW Regional Grants Requests for Fundings (RFFs) in March
- II. Award GROW Regional Grants in September
- III. Begin funding and distribution in October

- Formalize Technical Assistance Partnership (RHT-TAN) – **Complete**
- Develop RFF Application – **Complete**
- Release RFF opportunity on 3/2/2026 – **Complete**
- Establish GROW Regional Committees – **Complete**
- Regional submissions of Letters of Intent – **Complete**
- Bi-weekly Regional Committee meetings – **Ongoing**
- Eight Regional Grant Coordinators hired - **Complete**
- RHT-TAN continuing to meet with Regional Coalitions to support the RFF Application due July 1 – **In process**

Website: GrowRuralHealth.in.gov

Rural Health Transformation Program website should be consulted for updates including:

- Frequently Asked Questions
- Initiative Descriptions
- Regional grant application
- Opportunities to get involved



Email questions to GrowRuralHealth@health.in.gov



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Questions & Answers

Please submit your question in the Q&A

 growruralhealth@health.in.gov

 www.growruralhealth.in.gov



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