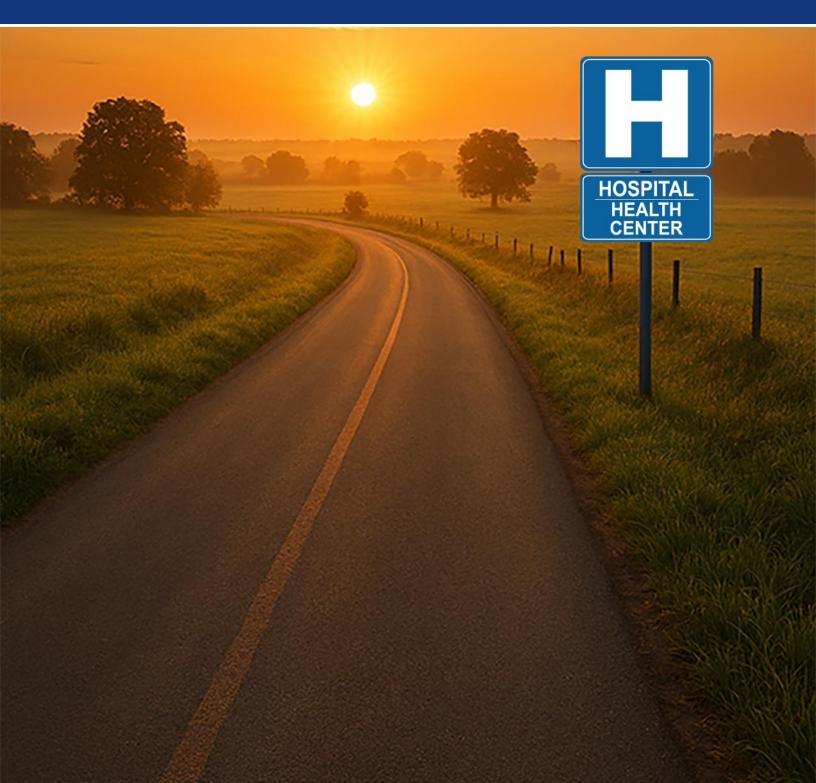# RURAL HEALTH TRANSFORMATION (RHT) COLLABORATIVE

AUGMENTING RURAL HEALTH CAPACITY & CAPABILITIES AND EMPOWERING THROUGH INNOVATION AND COLLABORATION

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Executive Summary

The Rural Health Transformation (RHT) Collaborative is a multi-sector partnership whose purpose is to enhance the capacity and capabilities of existing rural healthcare systems and settings to empower rural communities through coordinated innovation and collaboration. The collaborative brings together leading organizations across technology, healthcare providers, payer ecosystems, and non-profit / community sectors to partner with rural healthcare stakeholders and communities to catalyze improved access, experiences, quality, and outcomes for rural and remote healthcare stakeholders and communities.

Collaborative Impact for States and Localities

The RHT Collaborative will support states and local communities to advance these five (5) key pillars of healthcare capacity building, which are in alignment with the Centers for Medicare and Medicaid Services (CMS) Rural Health Transformation Program:

- **"Implementation-Ready" Solutions:** The collaborative offers coordinated, ready-to-deploy solutions for states applying to CMS's RHT program, streamlining the process, enabling efficient scale, and increasing the likelihood of successful implementation and adoption.
- **Compliance with Industry Standards:** Collaborative technologies meet industry standards (HIPAA, FHIR), ensuring regulatory compliance, protection of patient data, and data interoperability.
- **Consumer-oriented health technology:** Retail health partners and technology enterprises provide scalable, consumer-oriented solutions that expand access to care and improve efficiency in rural settings.
- **Primary Care Optimization:** Extend innovative solutions and funding to primary care settings, as well as increase the number of primary care providers and staff to enable access to care for rural populations.
- **Collaborative Innovation:** By uniting diverse stakeholders, the collaborative fosters innovation, shares best practices, and adapts solutions to the unique needs of each state and locality.

Call to Action: Rural Health Transformation Collaborative

Together, we can help rural communities and states with cutting-edge technology, innovative care models, and sustainable partnerships. By uniting technology enterprises, system integrators, healthcare providers, payers, and non-profits who will work in partnership with existing rural providers, we will deliver secure, interoperable solutions that meet industry standards, expand access to efficient primary care and retail health, and ensure every rural resident receives the care they deserve when, where, and how they need it.

ⓘ **More info? Contact RHT Collaborative Co-Chairs:** David Rhew (david.rhew@microsoft.com), Jim Mault (jmault@bioIntellisense.com), Brittany Sachdeva (Brittany.Sachdeva@cibolohealth.com), and Kyu Rhee (krhee@nachc.org)

👁 Vision Statement

The RHT Collaborative is designed to create a future where every rural community has optimal access to high-quality, cost-effective, technology-enabled healthcare. By uniting leading technology providers, system integrators, healthcare organizations, payers, and non-profits, we are positioned to deliver coordinated, evidence-based solutions that address the unique challenges of rural health.

🎯 Objective of the Rural Health Transformation Collaborative

The **primary objective** of the Rural Health Transformation (RHT) Collaborative is to **enhance** rural healthcare capacity and capabilities and **empower** states and rural communities to achieve the goals of the CMS Rural Health Transformation Initiative. Through coordinated collaboration among technology innovators, healthcare providers, payers, and non-profits, the RHT Collaborative will expand access to comprehensive, high-quality primary care—ensuring it serves as the cornerstone for healthier rural communities and sustainable transformation.

Key elements of the objective include:

- **Supporting States and Localities:** The collaborative informs and assists states on how to apply for, utilize, implement, monitor, and sustain CMS's $50 billion+ Rural Health Transformation Program funding, providing guidance, templates, and proven, scalable solutions.

- **Coordinated Multi-Stakeholder Collaboration:** RHT Collaborative brings together technology platforms (HIPAA & FHIR compliant, cyber-secured), AI, remote patient monitoring, robotics, telehealth, system integrators, workforce learning solutions, community health centers, retail health, rural clinics and hospitals, lab testing centers, payers, and non-profits to address the unique challenges of rural health.

- **Delivering "Implementation-Ready", Industry-Standard Solutions:** The collaborative provides ready-to-deploy, compliant, and secure technology and care models that meet CMS requirements, ensuring states can rapidly implement innovative, sustainable rural health programs that drive towards outcomes.

- **Expanding Access and Improving Outcomes:** By leveraging advanced platforms, AI, remote monitoring, and telehealth, the collaborative expands rural health access points, enhances preventive care, and fosters sustainable partnerships—ensuring rural community health centers, including Federally Qualified Health Centers (FQHCs), clinics and hospitals thrive and every patient receives the care they deserve.

- **Driving Innovation and Financial Sustainability:** The Collaborative helps states optimize rural healthcare delivery by reducing waste and eliminating redundancy across fragmented systems. Through the development of new care and shared services models, workforce strategies, and infrastructure modernization, the Collaborative ensures resources are deployed where they create the greatest value—strengthening access while advancing long-term financial sustainability for rural providers.

Overview of Coalition Membership

The Rural Health Transformation (RHT) Collaborative unites leading organizations across technology, healthcare innovation, healthcare delivery, payer ecosystems, government and non-profit sectors to drive improved access, quality, experience, and outcomes for rural health. By aligning expertise and resources, the coalition advances proven and sustainable solutions and care models that directly support CMS's Rural Health Transformation Initiative.

Technology Enterprises

Technology partners in the RHT Collaborative deliver the backbone for innovation in rural health by providing **secure, interoperable, and scalable digital infrastructure and solutions**:

- **Technology Platforms:** HIPAA & FHIR compliant and cyber-secured (Microsoft, Onyx).
- **Advanced Capabilities:** AI (multiple partners), **consumer-facing technologies** (Higi, Humetrix, Topcon), **remote patient monitoring** (BioIntelliSense), **robotics** (Topcon), and **telehealth** (Avel eCare, Cibolo Health, CVS Health, Teladoc, Walgreens).
- **Digital Advisory and System Integration:** Digital advisors and/or global system integrators (Accenture, AVIA, KPMG, PwC) that:
  - Ensure thoughtful planning, including analysis, realistic roadmaps, achievable outcomes,
  - Enable seamless deployment, interoperability, value-based program management and tracking, and workforce adoption across rural health environments.
  - Deliver the complex program management and economic evaluation / tracking
  - All have proven track records in working effectively and successfully with the RHT Collaborative members.

These enablers give rural communities access to proven, industry-standard technologies that are financially sustainable. For example, Microsoft's cybersecurity program has enabled over **700 rural hospitals** to leverage Azure's advanced security, achieving a **largescale reduction in ransomware vulnerability** while ensuring full compliance with HIPAA and CMS security standards.

State Governments

State governments will be central in garnering federal funds, convening stakeholders and ensuring that KPIs and metrics are met to keep the funds flowing. The Collaborative brings experience in:

- **Federal grant management:** leveraging and configuring state systems to effectively track funds, ensuring compliance, timely reporting and sub-recipient monitoring.
- **Real time reporting:** providing dashboards that offer program administrators real time updates of progress towards metrics and measurable impact, using key performance indicators and robust data analytics.

- **Stakeholder alignment and outreach:** convening stakeholders across the ecosystem to drive public private partnership and collaboration.
- **Workforce development:** drive a coordinated workforce strategy to target training and learning opportunities, both for workforce upskilling and community-based learning.
- **Accountability and Sustainable Governance:** State-based independent rural provider high-value networks serve as a formal vehicle to plan and execute transformation projects, creating a governance and accountability structure that ensures transparency, sustainability, and alignment with state and federal goals.

Healthcare Providers

Providers are at the heart of expanding rural health access and innovating care delivery through **regionally connected networks, telehealth, and community-based services**.

The collaborative includes a diverse set of healthcare delivery organizations:

- **Independent Rural Hospitals:** independent rural hospital high value networks supported by Cibolo Health
- **Individual & Community Providers:** National Association of Community Health Centers (NACHC)
- **Large Health Systems:** Leading health system affiliates that operate in rural settings including federally qualified health centers (FQHCs) and partnering with national cancer centers.
- **Retail Health:** CVS Health, Walgreens, Walmart
- **Telehealth Provider**: Avel eCare, CVS Health, Teladoc, Walgreens, and multiple health systems

Together, these providers improve access points, enhance preventive and primary care, and collaborate on addressing the unique health and socioeconomic challenges faced by rural populations.

Healthcare Payers

Payers play a pivotal role in ensuring **financial sustainability and alignment with value-based care models**. By working closely with technology and provider partners, they design payment mechanisms and incentives that reward **quality, efficiency, and health equity**.

These organizations are instrumental in scaling innovative care models by enabling reimbursement structures that align with CMS's shift toward **value-based, accountable care**.

Non-Profit Organizations

Non-profit organizations serve as vital coalition partners, focusing on community engagement, workforce development, policy advocacy, and equity in rural health.

Key contributors include:

- American Heart Association (AHA)
- American Stroke Association (ASA)
- National Association of Community Health Centers (NACHC)
- Huntsman Cancer Institute and partnering national cancer centers.
- Additional local and national non-profits dedicated to rural health improvement.

These organizations bring credibility, community trust, and mission-driven advocacy to ensure transformation efforts deliver **equitable and lasting impact**.

Impact & Strategic Alignment

Through this collaborative framework, the RHT Collaborative is uniquely positioned to:

- **Expand access** to high-quality care in rural communities.
- **Accelerate adoption** of compliant, "implementation-ready" and proven technology solutions.
- **Promote sustainability** through rural provider rightsizing and cost and productivity improvements as well as payer-aligned financial models.
- **Improve consumer and patient experience** through consumer-friendly technologies, streamlined data exchange, and increased access points for care delivery.
- **Ensure state's plans are actionable and outcome-driven** through robust data-driven analysis and planning and the use of models and tools that facilitate grants management and achievement of target outcomes.
- **Workforce and health literacy development** through the application of digital and innovative solutions to augment, accelerate, and scale workforce support, community health workers and resident health education as new models of care are deployed.

Unique RHT Collaborative Contributions to the Eleven (11) CMS RHT Priorities

1. **Prevention and effective treatment of chronic disease: Promoting evidence-based, measurable interventions to improve prevention and chronic disease management.**

   - Novel consumer-friendly tools to efficiently triage and screen (Higi, Humetrix, Topcon) and monitor (BioIntelliSense, CVS Health, Teladoc, Walgreens) for a wide range of chronic diseases.

     - *Population Health screening*: Consumers receive screening for chronic disease using consumer-friendly tools (Higi, Humetrix, Topcon) in retail stores (Walmart), community health centers, and health fairs.

       Population health analytics, digital front door strategies, and effective use of care management platforms to help rural systems proactively identify at-risk patients (Humetrix), close care gaps (Pangaea Data), and deliver evidence-based

personalized notifications and/or interventions (Accenture, community health centers, CVS Health, Humetrix, Walgreens). Integration of capabilities like Microsoft's secure cloud and AI capabilities with clinical workflows to enable measurable improvements in chronic disease prevention and management (Accenture, PwC, Walgreens).

– *Monitoring of high-risk individuals*: Patients receive physiologic monitoring (BioIntelliSense) and virtual consultations (Avel eCare, CVS Health, Teladoc, Walgreens) in lower acuity settings (community health centers, LTPAC, home)

- Novel consumer-friendly tools to help with healthcare navigation (CMS app developed by Microsoft), multi-language and voice-enabled patient intake and triage, and consumer-enabled health information exchange (Humetrix).

- Integrated patient engagement tools to streamline patient-provider communication (Humetrix) and engage patients in healthcare prevention and wellness strategies (PwC).

- New convenient access points to augment rural healthcare resources (community health mobile sites, CVS Health, Walgreens, Walmart).

- Safe and secure platform to connect consumers, providers, payers (Microsoft, providers, payers), that meet and exceed the highest standards.

- Provider networks available in every zip code in the country (community health centers, CVS Health, Teladoc, Walgreens), to augment local networks and provide access to much needed preventative care and chronic disease management.

- Expanded scope of pharmacist practice to enable prevention and treatment of chronic disease at locations embedded in rural communities (CVS Health, Walgreens, Walmart).

- Innovative, evidence-based solutions for chronic disease prevention through low-cost electronic health record and patient-based interventions, with a proven track record in rural partnership, implementation and impact (Huntsman Cancer Institute).

- Leverages 50+ FDA-cleared AI algorithms to detect latent chronic conditions such as abnormal heart rhythms or aneurysms at risk of rupture, and coordinates care with the appropriate specialist (Viz.ai).

2. **Providing payments to health care providers for the provision of health care items or services, as specified by the CMS Administrator.**

- Empowering the secure and efficient exchange of claims data, through a secure health information exchange with leading technical infrastructure, to ensure accurate and timely billing.

- Robust solutions enabled by advanced and redundant AI oversight to ensure fair and transparent payments, supported by verifiable data references.

- Agile cloud-based systems that are custom built to be compliant and constantly updated to meet the standards of CMS and ONC.

- Deep expertise in claims modernization and payment integrity, leveraging AI, advanced analytics, and cloud-based platforms, to reduce errors, ensure compliance, and accelerate provider reimbursement. Our solutions improve transparency and trust between payers and providers while reducing administrative burdens on clinicians (Accenture).

- Streamlined clinician workflows and payment to reduce clinician burnout
    - Deployment of ambient clinical AI solutions in rural community health centers and clinics to reduce clinician burnout (Microsoft).
    - Deploy AI to perform real-time prior authorization and quality assessment gap analyses during clinician encounters to reduce clinician burnout and improve quality of care (Onyx, Pangaea Data).

- Facilitate prior authorization payments with software (Onyx).

- FHIR-based claims and prior authorization workflows that streamline provider payments, ensure compliance with CMS interoperability standards, and accelerate reimbursement cycles for rural healthcare organizations (Onyx).

3. **Promoting consumer-facing, technology-driven solutions for the prevention and management of chronic diseases.**

- Novel consumer-friendly tools to efficiently triage and screen (Higi, Humetrix, Topcon) and monitor (Avel eCare, BioIntelliSense, CVS Health, Teladoc, Walgreens) for a wide range of chronic diseases.

- *Population Health screening*: Consumers receive screening for chronic disease using consumer-friendly tools (Higi, Humetrix, Topcon) on their phones with personalized multi-language questionnaires (Humetrix) and in retail stores (Walmart), community health centers, and health fairs.

    Population health analytics, digital front door strategies, and effective use of care management platforms to help rural systems proactively identify at-risk patients, close care gaps (Cibolo Health, Humetrix, Pangaea Data, Community CareLink), and deliver evidence-based interventions (Accenture, community health centers, CVS Health, Walgreens). Integration of capabilities like Microsoft's secure cloud and AI capabilities with clinical workflows to enable measurable improvements in chronic disease prevention and management (Accenture, Walgreens).

- *Monitoring of high-risk individuals*: Patients receive periodic and individual language specific questionnaires on their mobiles (Humetrix) and receive physiologic monitoring (BioIntelliSense) and virtual consultations (Avel eCare, CVS Health, Teladoc, Walgreens) in lower acuity settings (community health centers, LTPAC, home).
    - Leverage advisory/SI partners to accelerate health system procurement and implementation decision-making in key areas: They will condense complex market analyses into capability-based overviews, enabling health systems to accelerate their decision-making cycle for technology adoption

- User interfaces integrated into the CMS app, that are built on human centered design
- Patient engagement applications, incorporated into the patient user interface for frictionless interactions that facilitate point of care (including during telehealth visits) multi-language patient-provider communication for effective health information exchange and healthy behaviors.
- Opt-in tools that know a patient's healthcare challenges and are personalized to deliver the right-meaningful guidance customized for them.
- Consumer-facing applications for Medicaid beneficiaries to access their health data and receive personalized notifications to manage their chronic care conditions. (Humetrix)
- Tools to help patients and providers easily manage privacy and information sharing consents across provider, payers, and community-based organizations

- Options for deeper engagement such as gamification, to facilitate deeper understanding and motivations that lead to better outcomes.
- Human-centered digital health experiences designed to integrate with platforms to empower consumers with personalized insights, behavioral nudges, and frictionless engagement. (Accenture, Humetrix)
- Technology-enabled solutions that marry traditional clinical care management programs and predictive AI to enable a continuous cycle of prevention and wellness with providers and patients. (Accenture, Cibolo Health)

- Proven track record of creating and implementing technology-driven population health management solutions in collaboration with community partners to improve outcomes in chronic disease prevention and early detection (Huntsman Cancer Institute)

4. **Providing training and technical assistance for the development and adoption of technology-enabled solutions that improve care delivery in rural hospitals, including remote monitoring, robotics, artificial intelligence, and other advanced technologies.**

- Streamlined clinician workflows and payment to reduce clinician burnout:
  - Deployment of ambient clinical AI solutions in rural clinics to reduce clinician burnout (Microsoft)
  - Deployment of AI-enabled multi-language patient intake and triage solutions to streamline the ED, outpatient and telehealth intake and screening processes (Humetrix)
  - Deploy AI to perform real-time prior authorization and quality assessment gap analyses during clinician encounters to reduce clinician burnout and improve quality of care (Onyx, Pangaea Data)
  - Facilitate prior authorization payments with software

- Stroke identification algorithm already deployed in 400+ rural hospitals, enabling rapid detection and transfer of stroke patients to definitive treatment centers. (Viz.ai)
- Promoting digital health wellness and education resources that are available on an easily accessible phone app (such as the CMS app developed in collaboration with Microsoft or the Humetrix iBlueButton and Whatmeds apps) or website.
  - The education and guidance materials may also be configured to assess a patient's medical record to identify their clinical risks or known diagnosis. This will allow automated prompts to provide customized guidance that is based on their specific conditions (Humetrix, Pangaea Data).
  - Written educational materials can be translated to any educational level and any level of detail with advanced LLM and generative AI.
  - Materials can also be presented via audio and avatar that the patient can interact with to ask clarifying or follow up questions.
- Digital health and awareness and navigation programs to drive adoption of new technologies by rural providers (community health centers, clinics, and hospitals) and the communities they serve. (Accenture)
- Onyx provides training and technical assistance to help rural hospitals implement and adopt FHIR-based interoperability, AI-driven data exchange, and automation platforms, empowering providers to integrate advanced technologies seamlessly into care delivery and compliance workflow. (Onyx)

5. **Recruiting and retaining clinical workforce talent to rural areas, with commitments to serve rural communities for a minimum of 5 years.**

- As part of creating the healthcare system of the future, we offer multilevel opportunities for clinicians to learn about the latest technologies and how to incorporate them into their practice. (Walgreens)
- This strategy also contributes to career development and empowers providers to have more agency, engagement, and therefore attract and retain more clinicians who are excited to focus on patient care rather than administrative workloads.

  For example, by providing ambient listening technology we can attract providers to practices that use them as they have been proven to improve provider and patient satisfaction and reduce burnout. Therefore, these types of empowering solutions will not only help us to retain providers but also recruit them.
- Streamlined clinician workflows and payment to reduce clinician burnout.
  - Deployment of ambient clinical AI solutions in rural clinics to reduce clinician burnout (Microsoft).
  - Deployment of AI-enabled multi-language patient intake and triage solutions to streamline the ED, outpatient and telehealth intake processes (Humetrix).
  - Deploy AI to perform real-time prior authorization and quality assessment gap analyses during clinician encounters to reduce clinician burnout and improve quality of care (Onyx, Pangaea Data).

- Facilitate prior authorization payments with software (Onyx).

- Financially incentivizing clinicians in rural communities to provide better outcomes at a lower cost will align adoption (payers) and co-design of the most successful digital tools (Pangaea Data).

- Frameworks, toolboxes, and science-backed options for remote learning at scale will facilitate working with states' businesses, communities, providers, payers, non-profits, and governments to ensure that workforce development, recruitment and retention efforts are targeted to areas and occupations with the greatest needs (Accenture, KPMG, National Association of Community Health Centers).

- Expanding scope of practice for pharmacists to enable better recruitment and retention of highly trained clinicians into rural communities across the country. (CVS Health, Walgreens, Walmart)

- Educating existing workforce to provide services such as expanding scope for pharmacist technicians by providing community health workers. (Walgreens)

- Structure incentives to hire and retain pharmacists and pharmacist technicians in rural areas with staffing challenges. Partner with local colleges of pharmacies for strategic pipeline initiatives. (Walgreens)

- On-demand provider-to-provider telemedicine is a powerful tool in supporting the recruitment, retention and ongoing training of the rural health workforce. This occurs when general medicine providers activate telemedicine for support on difficult or unusual patient cases and get expert support in walking through the differential, diagnosis and treatment. This is especially powerful in the emergency room while treating highly critical patients and being coached through a first intubation or chest tube placement, but also helpful in during a routine admission in identifying treatment protocols that need updating to the latest clinical standards. (Avel eCare)

6. **Providing technical assistance, software, and hardware for significant information technology advances designed to improve efficiency, enhance cybersecurity capability development, and improve patient health outcomes.**

- RHT Collaborative has been leading in supporting rural health providers with technology and services for efficiency, resiliency, and better patient outcomes. Examples include:
    - Cibolo's economies and value-add services to its members
    - Microsoft's cyber product services and discounts available to rural hospitals nationwide.
    - Viz.ai's chart summarization tool that integrates imaging, EHR data, and scanned PDFs to produce condition-specific summaries with guideline-based recommendations, enabling faster treatment locally while reducing provider burden.

All of our solutions and partner solutions are contractually obligated to deliver technical support, and assistance of both the software and hardware.

- We are constantly improving and enhancing our technology to optimize efficiency and improve patient health outcomes.
- All of our solutions are built on a framework that puts cybersecurity as our number one priority.
- Our agile cloud platform means that the maintenance and support is our job. This is our core service that community health centers and hospital systems do not need to hire teams to maintain.
- This design also allows us to rapidly deploy the latest updates at any time of day for the entire system. Our systems are also constantly monitored and protected from potential cyber-attacks.
- Using global best practices to integrate local insights with large-scale implementation and even management of the most advanced technology solutions across a broad ecosystem technology innovators and including leading information security practices meeting the highest security standards to deliver technical architecture, operational infrastructure, governance, and data protection. (Accenture, KPMG, PwC)
- System integration AI-enabled models that align technology with clinical workflows, workforce readiness, and regulatory requirements and connect key stakeholders (federal agencies, health associations, and technology vendors) to translate technology into measurable outcomes. (Accenture, PwC)

7. **Assisting rural communities to optimize their health care delivery systems by identifying needed preventative, ambulatory, pre-hospital, emergency, acute inpatient care, outpatient care, and post-acute care service lines.**

- Our deep multi-faceted collaboration and healthcare experience means that you will have insights from leading experts and institutions. We have successfully built and deployed effective tools and strategies for a wide diversity of healthcare needs and environments.
- Our advanced data analytics capabilities also means that you will have deep objective insights to guide data-informed decisions with ongoing monitoring for continual enhancements and further impact.
- Our GrowthOS accelerator along with demand forecasting, consumer segmentation, and footprint analytics, rapidly synthesizes data, models patient needs, and tests service-line scenarios in days, helping rural health leaders quickly identify and prioritize the right mix of care services with confidence. (Accenture)
- Our diverse set of clinicians represented means that you will be able to identify the right care, in the right location by the right clinician. (National Association of Community Health Centers)
- Our trusted and experienced partners of effective, bi-directional engagement with rural health care providers (Huntsman Cancer Institute and collaborating cancer institutes) will help manage the implementation of innovative solutions, to move the needle in rural health, from prevention to care.

- Our tele-specialty clinic services help rural communities optimize healthcare delivery by bringing board-certified specialists directly into local clinics, strengthening primary care teams, improving care coordination, and reducing delays in access. (Avel eCare)
- By identifying patients at higher risk for poor outcomes and care gaps and determining the size of the patient population falling into these care gaps will allow health systems and primary care practices to build capacity based on empirical evidence and triage patients based on prioritization thereby reduce wait times. (Cibolo Health, Humetrix, Pangaea Data, Community CareLink)
- Capture and analyze community-based and non-clinical determinants of health data from local community based organizations, behavioral health agencies, and FQHCs in order to enable state and local systems to optimize service-line planning based on real-world, community-level need data. This ensures that preventative, post-acute, and outpatient services are right-sized to the population's actual needs (Community CareLink)
- Chronic care management, inclusive of:
    - Hypertension screening and disease awareness via digital, telephonic or in-person modalities
    - Disease management with close monitoring, active counseling, nutrition/lifestyle management
    - Supportive care between provider visits
    - Expanded access points through virtual care for patients without a primary care provider. (Walgreens)

8. **Supporting access to opioid use disorder treatment services, other substance use disorder treatment services, and mental health services.**

- We have a connected network of mental health professionals, tools and resources for opioid use disorder, other substance abuse disorders, as well as mental health services including for chronic pain, anxiety, and depression. (National Association of Community Health Centers, Teladoc, Community CareLink)
    - Technical solutions can be incorporated to empower clinicians and patients in their communities with the latest education and training to address these issues with the latest evidence-based practices.
    - Offering consumer-facing tools to alert patients of their opioid addiction risk based on recently prescribed opioid drugs, to prevent addiction before it takes place. (Humetrix)
    - Tools help patients and providers easily manage privacy and sensitive data sharing consents across provider, payers, and community-based organizations. (Community CareLink)
    - Our connected network of traditional providers is available via telehealth and mobile health.

- We also have experts who have pioneered the use of non-opioid alternatives such as distraction therapy including the use of virtual reality, mediation, and acupuncture.
- We have a network of innovators, including early-stage companies, in the behavioral health space with solutions that we can quickly integrate and activate in a rural setting to triage patients to the right type of care including digital treatments, online peer supports, two-way texting to supplementing resources. (Accenture)
- Experience in behavioral crisis response by implementing 988 crisis lines in several states, this includes a cloud-based omnichannel communication platform to support scalable behavioral health services and 24/7 assistance. (Accenture, Community CareLink)
- Access to inpatient, outpatient and emergency tele-behavioral health (24/7) and psychiatry in remote rural facilities. (Cibolo Health)
- Leaders in virtual behavioral crisis care to support law enforcement in the field. (Avel eCare).

9. **Developing projects that support innovative models of care that include value-based care arrangements and alternative payment models, as appropriate.**

- Many of our consortium organizations and teams of experts have been focused on developing, implementing, and refining value-based care and payment models. (Cibolo Health in partnership with independent rural providers and local/national payors)
- Our team also has related experience pioneering innovative models of care focused on the quadruple aim (1) Improving the patient experience, (2) Improving the health of populations, (3) Reducing healthcare costs, (4) Enhancing provider well-being. All of these are aligned to value-based care and payment.
- Our integrators are leaders in designing strategies to operationalize value-based care arrangements using advanced analytics, benchmark modeling, and care model redesign to align incentives to improve quality and cost outcomes for rural populations. (Accenture, Cibolo Health, KPMG, PwC)
- Enabling better reimbursement and billing workflows for Community-Based Organizations (CBOs), Behavioral Health providers, and FQHCs, aligning their services to value-based and alternative payment arrangements under Medicaid and MCO programs. This ensures sustainability for the rural care ecosystem while closing care gaps that CMS measures for RHT funding. (Community CareLink)
- Building connectors to ONC g10 certified servers to facilitate real-time ACO reporting. (Onyx)

10. Investing in existing rural health care facility buildings and infrastructure, including minor building alterations or renovations and equipment upgrades to ensure long-term overhead and upkeep costs are commensurate with patient volume, subject to restrictions.

- Our teams recognize that building an effective and efficient healthcare system requires infrastructure.
    – Our partners and team members have extensive knowledge and experience designing and retrofitting buildings with the wired and wireless networks and alternative power sources that support tech enabled care models.
- This includes redundant fiber lines for redundancy, campus wide wireless communication with WiFi and 5G, that empower monitoring sensors, asset tracking, robotic delivery systems, and drones.
- We also have expertise in other infrastructure including advanced HVAC to cycle clean air.
- We provide increased visibility to occupancy costs, reduce demand for facilities services through preventative maintenance and predictive analytics, lower costs through improved pricing, increase the speed of services through increased digital augmentation and automation, improve governance and oversight on capital projects to reduce scope, budget, and timing overruns, and improve productivity through and more efficient and effective organization. (Accenture)

11. Initiating, fostering, and strengthening local and regional strategic partnerships between rural facilities and other health care providers to promote quality improvement, improve financial stability of rural facilities, and expand access to care.

- Leverage advisory/SI partner capabilities to bring together networks of provider systems, payers, and innovators to drive consensus and accelerate digital transformation. Partners can serve as the trusted intermediary, ensuring all stakeholders (technology, provider, payer, community health, and non-profit) align on shared priorities, and move quickly from discussion to coordinated implementation to rapidly expand access.
- We are driven by a holistic approach to healthcare delivery, that not only includes the individual patient, but also their family in context of their healthy communities. All are empowered by meaningful jobs that provide financial stability, pride, and purpose.
- Our team members and partners have designed deployments around empowerment of the patient, provider, and supporting staff in the community. Existing community health centers, hospitals, and clinics can utilize our robust training and engagement modules that are available through a diversity of venues including free certificate courses, virtual learning, learning collaboratives, as well as on the job working with our expert teams.
- We bring proven frameworks, facilitation capabilities, and integration of collaboration platforms to structure durable partnerships across hospitals, community health centers, local providers, payers, and local organizations. Our proven-track record in

effective partnership and collaboration with rural health care providers will ensure respectful engagement and impactful implementation (Huntsman Cancer Institute). Our expertise in governance, joint-venture design, public-private partnerships, and performance improvement helps rural facilities expand access to care, stabilize finances, and share capabilities at scale. (Accenture, KPMG, National Association of Community Health Centers, PwC)

- Furthermore, an optimally educated community becomes enabled to co-develop or independently design solutions that are custom fit for their needs. This in turn can lead to new companies and industries that make communities more robust and resilient.
- Platform serves as the foundation for new shared services models of care between rural and tertiary care centers, supporting safe data exchange, coordinated care, and better alignment of resources. (Microsoft, Viz.ai)

Summary: Collaborative Value Prop and Roles

Collaborative Value Proposition

The RHT Collaborative delivers:

- Access to industry-standard technology (HIPAA, FHIR, cybersecurity)
- **Efficient rural community health and retail health solutions** through telehealth, mobile health, remote monitoring, and AI-powered platforms
- **Integrated, evidence-based care models** that expand access points and provider capacity and improve outcomes
- **Sustainable partnerships** across technology, provider, payer, and non-profit sectors
- Coordinated, shovel-ready solutions and grant writing and tracking for states applying to the CMS RHT Program
- **Robust Economic Modelling** to show the impact of the multiple program initiatives across the rural care delivery landscape
- **Healthier communities and improved total cost of care** through expanded access points and utilization of telehealth in creative ways that keeps care local, improves outcomes, and reduces unnecessary transfers and hospitalizations
- **A Vehicle for Rural Health Transformation** via development of state-based, rural provider owned, High Value Networks

RHT Collaborative Members

Technology (Platform, AI, Remote Patient Monitoring, Robotics)

Avel eCare

Developed for rural care by rural clinicians, with over 30 years of telemedicine experience, Avel eCare delivers a comprehensive, technology-enabled virtual care model that strengthens local healthcare systems and ensures access to high-quality care in even the most remote communities. Through its Joint Commission–accredited virtual hospital and multidisciplinary clinical teams, Avel provides 24/7 real-time support across hospital, clinic, EMS, and senior care settings—bridging gaps caused by workforce shortages, geography, and cost barriers.

By integrating virtual Hospitalist, Critical Care, Emergency, Senior Care, EMS, and Specialty Clinic services into existing rural infrastructure, Avel helps hospitals and clinics keep patients local, enhance clinical quality, stabilize staffing, and manage total cost of care. This scalable, data-driven model empowers rural providers to deliver timely, coordinated, and patient-centered care—transforming isolated facilities into connected networks capable of sustaining high-value care delivery and measurable improvement in outcomes.

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BioIntelliSense

BioIntelliSense is a leader in continuous health monitoring technology that can be used in the hospital or at home. Its FDA-cleared BioButton® System is a wearable sensor that continuously measures and transmits a patient's vital signs, sleep, and other biometrics to an AI-powered clinical intelligence engine with an exception management dashboard that notifies clinicians of concerning trends and out-of-range values. This technology platform addresses multiple aspects of the RHTP criteria including:

- Development of a standards-based platform that integrates and stores patient health data from remote monitoring devices and existing health records, enabling continuous monitoring both in facilities and at home, with AI-based clinical intelligence that delivers actionable information to providers and their patients.
- Training for digital health navigators, nurses, and/or community health workers to help patients learn to use these new technologies.
- Improving provider capacity to leverage continuous monitoring as a *hub* for managing both urgent and chronic conditions across care settings.
- Advancing data and clinical intelligence to improve outcomes: Demonstrating how AI-driven insights support proactive interventions and align with CMS's focus on outcomes including decreased readmissions and emergency department use, improved management of chronic conditions, and increased patient satisfaction. Building sustainable infrastructure: Offering clear financial models (per-bed/per-year

and per-patient/per-episode) with extensive data collection/reporting that satisfy key RHTP technical factors (B.1, C.1, E.1, E.2, F.1, F.2, F.3).

BioIntelliSense has created an RHT Program NOFO Kit with various cut-and-paste components (narrative, implementation timelines, budget) to facilitate incorporation into a State's RHT Proposal available at www.BioIntelliSense.com/RHTP.

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Community CareLink (CCL)

Community CareLink (CCL) is a comprehensive, statewide social services management platform designed to help states advance their Rural Health Transformation (RHT) goals by unifying health, human, and social care data across government agencies, healthcare providers, and community organizations. CCL meets the CMS criteria for 5 of the 10 approved use of funds. (*1, 3, 6, 8, 9*)

Built on secure, HIPAA-compliant, Azure cloud architecture, CCL connects state oversight systems with the daily work of Community Health Workers (CHWs), Behavioral Health providers, and Community-Based Organizations (CBOs) that form the backbone of rural service delivery. Far more than a referral system, CCL enables documentation of every aspect of social service delivery—including assessments, case management, referrals, and outcomes—within a single, interoperable platform.

By capturing this "invisible" community-level data that often never reaches EHRs or claims, CCL creates a unified system of record across all participating agencies. This allows states to maintain real-time oversight of the programs they fund and the outcomes they support, while providing the transparent utilization and impact reporting required by CMS's RHT initiative.

CCL also includes a billing module allowing CBOs to submit claims under Medicaid's fee-for-service framework for social services which are key to creating true value-based care. By receiving claims for these preventative services state governments will be able to measure the outcomes of the value-based care model. Building out social services as a prevention model reduces the total cost of care.

Together with interoperability partners such as Onyx, which provides the FHIR-native infrastructure for data exchange, CCL completes the "last-mile" of the rural health data fabric.

- Onyx ensures that structured health data flows seamlessly across payers, providers, and CMS systems.
    - CCL ensures that the community and social care data—where much of rural health transformation happens—is captured, standardized, and shared in compliance with FHIR and CMS guidelines.
- This complementary approach enables states and rural provider networks to demonstrate measurable progress on CMS RHT priorities, including:
    - Evidence-based prevention and chronic disease management
    - Behavioral health and SUD coordination
    - Sustainable workforce and community-based service models

- Secure, interoperable data exchange supporting Health Data Utilities (HDUs)

- By aligning social, clinical, and financial workflows on a shared, scalable cloud platform, Community CareLink ensures that every dollar invested in social services translates into tangible improvements in health, stability, and community resilience.

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Cortina Health

Cortina Health is the nation's premier teledermatology solution, serving patients of all ages in all 50 states. Cortina's proven model expands specialty access, strengthens prevention and chronic disease management, and enhances workforce capacity—directly advancing RHTP's core priorities of prevention, innovation, workforce development, consumer technology, and community collaboration.

Prevention & Chronic Disease Management

Over 60% of the 3,000+ skin conditions Cortina treats are chronic. By removing barriers of travel, cost, and multi-month wait times, Cortina enables early detection and continuous management that keeps patients adherent and out of emergency settings. Patients can submit follow-up photos, receive timely adjustments, and engage directly with board-certified dermatologists— improving outcomes while reducing long-term Medicaid expenditures.

Innovative & Sustainable Access Models

Cortina eliminates 8–14-month wait times through a hybrid care model combining asynchronous photo-based intake with synchronous dermatologist visits. Every patient, in every rural community, can be seen by a board-certified dermatologist within a few days. This right-sizes specialty access, ensuring rural residents receive high-quality care locally and equitably.

Workforce Development & Technical Assistance

Cortina's platform functions as a virtual dermatology department, instantly expanding a healthcare system's specialty capacity without recruitment and relocation costs. Cortina equips local primary care providers with dermascope training, enabling high-resolution imaging and early cancer detection. This technology-enabled partnership empowers GPs to collaborate directly with Cortina dermatologists for immediate diagnosis and treatment—improving outcomes for rural patients disproportionately affected by skin cancer.

Consumer Technology & Community Collaboration

Cortina's HIPAA-compliant platform integrates seamlessly with state systems and community health networks, offering patient-facing access and coordinated referrals for in-person procedures when needed. This turnkey model scales rapidly across any rural facility, bringing board-certified dermatology expertise and modern digital infrastructure to every state.

Cortina Health stands ready to deliver measurable improvements in access, outcomes, and efficiency—helping your Medicaid program lead the nation in equitable rural specialty care

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Docusign

Docusign directly strengthens the RHT Program's strategic goals of Tech Innovation, Workforce Development, Innovative Care, Make Rural America Healthy Again and Sustainable Access. Within state health agencies and rural provider networks, Docusign enables secure digital workflows for critical agreements—such as provider participation forms, telehealth consents, informed consent, patient intake, data-sharing authorizations, grant attestations, and subcontractor MOUs to name a few—that otherwise delay program execution. With over 1000 integrations, IAM seamlessly blends automated workflows with standard tools already ubiquitous in most enterprises, transforming slow, paper-based steps into secure, immediate digital processes.

- *Accelerated Access*: Mobile-ready signing allows clinicians, patients, and administrators in remote communities to execute forms anytime, anywhere and on low-bandwidth devices - reducing paper and mailing delays in remote or underserved regions.
- *Care Coordination*: Interoperability Standards supporting HL7 and FHIR standards for structured exchange of patient consents, referrals, and clinical authorizations — enabling seamless data movement between EHRs, HIEs, and state Medicaid systems.
- *Grants Management*: Built-in audit trails, retention policies, secure identity verification, and immutable logs deliver end-to-end accountability for CMS grant and provider compliance (aligned with 2 CFR Part 200).

Docusign's platform meets stringent government standards, accelerating missions across all levels of the US government, including all 15 Federal Executive Departments and State & Local Governments in all 50 states.

- Secure, Compliant Workflows: SOC 1 and SOC 2 Type II certified, FedRAMP Moderate, GovRAMP, and DoD IL4 authorized — ensuring robust protection of health data under HIPAA, HITECH, and 42 CFR Part 2.

Docusign is trusted by over a billion users globally and was named the #1 Most Trustworthy Software and Telecommunications Company in America by Newsweek for two years in a row (2024 and 2025).

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eClinicalWorks

eClinicalWorks provides scalable, secure, and HIPAA compliant healthcare IT solutions serving more than 180,000 providers, 1 million medical professionals, and 850 health centers include FQHCs, RHCs & CHCs:

- Cloud-based EHR and Practice Management solutions for ambulatory practices, specialists, health centers, urgent care facilities, and hospitals supporting revenue cycle, patient relationships, and Population Health initiatives.

- AI Bundle featuring Sunoh.ai™ ambient listening for faster documentation, healow® Genie AI-powered contact center, and predictive analytics tools to reduce no-shows through AI-Powered No-Show Prediction Model and optimize workflows.

- Interoperability & Data Exchange through healow PRISMA, leveraging Carequality to access external health records; the PRISMA AI Assistant to identify care gaps; and PRISMANet, a Qualified Health Information Network (QHIN™) enabling nationwide data sharing.

- Value-Based and Chronic Care Management with tools for HCC, HEDIS®, and NCQA PCMH support, plus integrated Remote Patient Monitoring, Transition Care, and analytics for proactive care coordination.

- Patient Engagement with healow TeleVisits™, healow CHECK-IN™, and 24/7 Patient Portal access.

- Behavioral Health module supporting mental and substance-use treatment, telepsychiatry, group care, and 24/7 residential treatment services.

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Humetrix

Humetrix is a digital health solution leader offering consumer-facing mobile health applications for patient triage, care coordination and chronic care management and advanced analytics platforms for population health. With its proven record in large-scale deployments, Humetrix successfully deployed its analytics platform to help the U.S. Department of Defense in its pandemic support mission, monitoring for 18 months 20 million Medicare beneficiaries at risk for severe Covid and analyzing weekly 100 million Medicare claim lines for real time risk stratification to enable targeted interventions, including vaccinations, and outcome monitoring nationwide. By accessing, transforming and analyzing individual claim data (e.g. from Medicare, Medicaid or commercial plans) with or without electronic health record (EHR) data, Humetrix provides both consumer-facing mobile health and analytics solutions which optimize care delivery, chronic care management at both the individual and population health levels. Humetrix solutions include:

- A Voice-Enabled Multilingual Health Triage Solution: successfully used at the Summer Olympics in Paris for real time health triage of spectators and athletes in more than 200 EDs and first aid stations, it enables real time patient-provider communication in over 25 languages for fast and efficient patient intake and triage. For both English and non-English speaking patients and providers, the web-app solution is a multi-language electronic clipboard for patients to quickly fill out or speak and share with their providers, overcoming language and medical literacy barriers.

- Patient-facing Personal Health Record (PHR) Solutions: the Humetrix iBlueButton PHR application securely aggregates on the patient's phone his Medicare claims, VA and EHR data. The app provides a detailed medical history, a current medication list to support chronic disease management and care coordination while also generating personalized care guidelines and medication safety notifications. Humetrix WhatMeds, a CMS Blue Button 2.0–connected mobile app for all Medicare beneficiaries with Part

D coverage, offers an up-to-date medication list and real-time drug safety alerts to help prevent polypharmacy-related safety issues, one of the leading causes of preventable hospital readmissions in the Medicare and dually-enrolled populations.

- Population Health Analytics: the Humetrix's Analytics Platform aggregates and analyzes claims, EHR, and device data to deliver real-time population health insights, identify at-risk individuals, and monitor health and interventions outcomes.

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OnMed

OnMed brings a clinic-grade, technology-enabled access point that augments, never replaces, local providers, giving states a fast, vendor-neutral way to turn policy into practical access. CMS cited OnMed's Auburn Rural Health Initiative deployment in the RHTP NOFO as a model for "sustainable access," illustrating how states can use RHTP funds to deploy clinic-grade, technology-enabled access points. Partnering with OnMed, gives your state a proven, CMS-endorsed pathway to include in your RHTP application and marketplace has recognized OnMed with TIME Magazine officially naming OnMed one of its Best Inventions of 2025.

OnMed's Solution

OnMed is built to plug into a state's existing infrastructure – rural hospitals and FQHC networks, and local partners to close access, workforce, maternal, and behavioral health gaps and strengthens rural systems. OnMed delivers a scalable, technology-enabled solution that brings clinic-grade care directly into communities, without requiring patients to travel. OnMed CareStations function as "clinics in a box," offering private, real-time access to licensed providers for primary care, behavioral health, and chronic disease management.

Unlike traditional telehealth that relies solely on video, OnMed integrates diagnostic capabilities – vital signs, ENT/dermatologic imaging, and routine screenings – so clinicians can deliver more comprehensive remote encounters. This approach expands access, eases workforce strain, supports older adults, and helps rural hospitals extend their reach sustainably. By combining advanced telehealth with local health-system partnerships, OnMed can bridge a state's gaps in care while advancing the state's long-term rural transformation goals.

What the Subscription Includes

The CareStation comes with 91 hours per week of live clinician coverage; clinic-grade diagnostics (stethoscope, otoscope, BP, derm/ENT imaging, etc.); software licenses; security/compliance; EHR/FHIR integration; remote monitoring, maintenance/warranty, and help desk; analytics and quarterly performance reporting.

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Microsoft

Microsoft is a cloud hyperscaler that provides:

- Secure, HIPAA-compliant, interoperable data & AI cloud-platform
- Cybersecurity cloud capabilities currently deployed in 700+ rural hospitals
- Multimodal data & AI platform healthcare providers, retail health, payers, and non-profits.
- Microsoft Azure AI Studio, AI Foundry, Purview, and M365 (with Teams) where AI foundation models and agents can be developed, managed, and orchestrated
- Ambient clinical voice AI platform (DAX/Dragon Copilot) that streamlines clinician documentation and integrates with other AI applications
- AI-powered consumer application (developed in collaboration with CMS) that can facility consumer healthcare navigation.

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OCHIN

OCHIN is a national nonprofit with 25 years of experience driving rural health transformation. We equip providers with modern health IT—including our cloud-based OCHIN Epic EHR—AI innovation, and tailored support to improve care, outcomes, financial sustainability and workforce readiness. Our network spans 300+ independent organizations across 44 states, serving 8.1 million patients. We responsibly deploy AI to enhance—not replace—human care, and pair technology with infrastructure, training, and change management to ensure lasting impact.

We're ready to partner with states to advance CMS RHTP priorities across four key pillars:

- *Modernizing Health IT and Advancing AI*: Upgrading rural providers to OCHIN Epic electronic health record (EHR) will advance interoperability, improve efficiency, and embed AI to strengthen chronic disease prevention and management. Rural providers need timely, high-quality data to improve care, manage population health, and succeed in value-based models. Modernized EHR is a critical foundation for achieving RHTP goals.
- *Workforce Development*: OCHIN's approach creates career pathways in rural communities—including billing, coding, AI, community health workers, EHR specialists and more. We address workforce shortages and offer flexible, market-driven programs. OCHIN upskills staff and trains new talent. Our employer-aligned programs don't require college degrees, making entry into healthcare more accessible.
- *Building Capacity and Expanding Specialty Access*: Many rural patients face long waits—or no access at all—for specialty care, worsening outcomes and driving up costs. OCHIN's shared services specialty network connects providers to share capacity, integrate AI-powered decision support, and streamline specialty access. This model

improves efficiency and ensures patients get high-quality care while providers work at the top of their license.

- *Strengthening Financial Sustainability*: OCHIN strengthens rural providers' financial health by optimizing revenue cycle operations, reducing denials, and accelerating reimbursements. We also prepare providers for value-based payment models—supporting long-term viability, alignment with state payer strategies, and resilience in rural and Tribal communities.

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Onyx Technology, Inc.

Onyx is a leading Health IT innovator specializing in FHIR-native interoperability, data exchange, and prior authorization automation aligned with CMS-0057-F (Interoperability and Prior Authorization Final Rule). As a trusted CMS partner and a core contributor to HL7® Da Vinci and CARIN implementation guides, Onyx empowers payers, providers, and state agencies to meet CMS interoperability mandates and streamline administrative workflows.

Onyx delivers FHIR-as-a-Service® platforms that support:

- Payer-to-Payer, Provider Access, and Patient Access APIs, enabling real-time, secure data sharing across payers and providers while maintaining patient control and consent.
- Prior Authorization APIs with full Da Vinci CRD, DTR, and PAS compliance, reducing administrative burden and accelerating approvals in line with CMS 2027 requirements.
- Interoperability accelerators that integrate with EHRs, provider systems, and payer platforms for seamless data liquidity and regulatory alignment (CMS-0057-F, USCDI, HL7 FHIR R4, and SMART on FHIR standards).
- Advanced analytics and automation, transforming raw FHIR data into actionable insights for population health management, quality reporting, and value-based care delivery.
- Patient and Provider Educational Resources, leveraging plain language, multilingual interfaces, and inclusive design principles consistent with CMS guidance for equitable access and digital health literacy.
- OneConnect, bulk-FHIR application for Clinical Data abstraction and integration across various G(10) EMR sources.

By providing FHIR-based infrastructure, Onyx helps states, health systems, and rural payer entities achieve compliance, data transparency, and interoperability — critical pillars of the CMS Rural Health Transformation Program. Through its secure cloud infrastructure and AI-driven workflow orchestration, Onyx ensures rural health organizations can confidently exchange, analyze, and act on healthcare data to improve outcomes and reduce burden.

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Pangaea Data

Pangaea Data are a South San Francisco and London based company. Pangaea provide an AI-driven platform, which is being deployed across health systems in 13 countries to help clinicians close care gaps by finding untreated and under-treated patients based on existing guidelines, who are missed despite relevant data being present in their medical records. This has shown improvement in patient outcomes combined with reduced costs (through early diagnosis, effective triaging) and increased revenues (through improved pre-authorizations and treatments) in a sustainable and compliant manner. Through Pangaea's collaboration with Microsoft, NVIDIA and Topcon, they have further demonstrated the deployments to be a low lift for health systems given their platform's integration into existing EHRs, ambient listening, scheduling systems and clinical workflows thereby allowing clinicians to view and action insights from within their existing applications without disruption. For the health systems, this model proves to be a low cost opportunity to get started and show a return on investment (ROI).

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Teladoc

Teladoc Health is uniquely positioned to provide services in every zip code of the United States at an unmatched scale, spanning a breadth of urgent, preventative, behavioral health, specialist and chronic condition management services across all 50 states. Teladoc Health has delivered over 70M telehealth visits and is the world's largest provider of telemedicine solutions. Additionally, Teladoc supports 60 of the Top 100 US Hospitals and Health Systems, with health system partners leveraging Teladoc's connectivity solutions at over 15,000 locations globally and over 1.1M active physicians on our platforms. With its extensive experience serving consumers both directly and through our leading base of Health System clients, Teladoc Health is positioned to extend access to needed care in every community, and in a way that partners and connects with local health systems. The portfolio of integrated Teladoc solutions addresses 8 of the 11 requirements and has the power to strengthen rural health outcomes and their local healthcare communities.

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Topcon

Topcon Healthcare, Inc. (THI) combines automated ophthalmic devices with AI to deliver both autonomous diagnosis and risk-indicator–driven decision support at the point of need. THI provides FDA-cleared autonomous AI for diabetic retinopathy, alongside analytics that surface ocular risk indicators for chronic and sight-threatening disease, enabling earlier identification and referral in rural and retail clinics before patients become high-resource.

THI technology directly and effectively addresses the following seven (7) of the eleven RHT program criteria. (*1, 3, 4, 6, 7, 9, 11*)

- Topcon Healthcare, Inc. employs robotic ophthalmic devices powered by AI-enabled decision support to detect disease at the point of need. Using THI technology, providers can proactively identify people at high risk for serious cardiovascular,

metabolic, and sight-threatening disease before notable symptoms appear. These high-risk individuals can be directed to preventative care before their disease progresses, and they become High Resource Patients. (1, 4)

- The THI robotic technology can be deployed in physician offices, eye clinics, pharmacies, and in self-service kiosks promoting consumer-facing solutions for disease management by enabling people with no symptoms to receive fast, non-invasive assessment for high-risk disease. (3)

- THI technology is in use in over 2,000 US sites that report successful identification of at-risk individuals before they report symptoms, thus enabling early intervention and improving efficiency and patient health outcomes.*(6)*

- By helping rural communities and providers to identify and quantify community members at risk for serious, chronic disease, THI technology is useful to rural communities in right-sizing their delivery systems. For example, by directing early state diabetic retinopathy patients into optometry clinics, providers can relieve the burden on the limited retinal specialist and significantly reduce the cost of care for these patients.*(7)*

- Using THI technology for early identification of disease and implementation of lifestyle modification programs supports a new, proactive care model.*(9)*

- The THI-connected care model fosters strong relationships across local and regional care providers. Community members can enter care at the point of need (PCP office, OD office, health fairs, etc.). In the connected care network, information is shared across providers resulting in closed gaps, better outcomes, and more efficient health systems.*(11)*

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TruBridge

TruBridge proudly supports rural and community healthcare providers in their efforts to stay strong, independent, and deeply rooted in the communities they serve. Backed by more than 45 years of healthcare experience and trusted by over 1,500 clients nationwide, we offer a mix of technology, services, and strategic expertise — including revenue cycle management (RCM), electronic health records (EHR) and analytics — all designed singularly for the realities of rural and community healthcare.

Whether via EHR agnostic revenue cycle technology and tech-enabled services for hospitals of any size, or its purpose built EHR specifically designed for rural hospitals, TruBridge enables rural and community healthcare providers to harness automation and innovation that drive efficiency and clinical outcomes.

- End-to-end revenue cycle optimization with HFMA Peer Reviewed technology and services
- SaaS EHR, supported by best-in-class partner solutions including Microsoft Co-pilot
- Security solutions including virtual CISO support

- Evidence based, outcomes driven interventions and other quality measure initiatives including social determinates of health

Through its alignment with the CMS Rural Health Transformation priorities, TruBridge directly advances goals around provider payment reform, IT modernization, delivery system optimization, and value-based care enablement. By modernizing revenue operations with AI-driven automation and predictive analytics, TruBridge strengthens the financial foundation of rural providers, supporting fair and timely reimbursement while reducing administrative burden. Its cloud-hosted platforms and cybersecurity programs improve data interoperability and resilience, helping hospitals meet compliance and technology modernization objectives. TruBridge also equips rural facilities with actionable financial and operational insights that guide service-line optimization and sustainable growth, ensuring that transformation efforts deliver measurable improvements in quality, efficiency, and community health outcomes.

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Viz.ai

Viz.ai is the most widely deployed AI safety net in U.S. hospitals, ensuring that patients in rural and underserved communities with life-threatening conditions are identified within minutes and rapidly connected to the right specialist. Viz.ai was the first company awarded CMS reimbursement for artificial intelligence through the NTAP process in 2020 under President Trump, establishing a national precedent for AI as reimbursable patient-safety technology, with measurable benefits for rural populations.

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Digital Advisor/ Systems Integrator (SI)

AVIA Health

As the nation's leading digital transformation partner for health systems, AVIA empowers healthcare leaders with the strategic insights, proven tools, and expert guidance needed to drive better clinical outcomes, operational efficiencies, and financial performance. Through AVIA's two-sided Network, health systems gain access to results-driven consulting and collaborative solutions to tackle the industry's most pressing challenges with confidence. AVIA has extensive research and advisory capabilities that extend to rural health systems, enabling them to rapidly leverage digital solutions to improve access, experience, quality, and outcomes.

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Accenture

Accenture is a global leader in system integration, serving Health and Public Services clients with unparalleled expertise. We deliver comprehensive Strategy & Consulting, Digital, Systems Integration, Workforce and Talent Management, Transformation Program Management, and Application and Business Managed Services. These services are currently utilized by public and private providers, payers, and state governments to drive innovation and efficiency. As an early

leader in bringing advanced technologies like GenAI to our clients, Accenture leverages AI-enabled tools such as Momentum for outcomes/value tracking and enables successful integration and adoption of advanced technologies from our ecosystem partners like Microsoft. Our rich database of early-stage HealthTech innovators also allows us to quickly deploy cutting-edge solutions to enhance rural healthcare and drive clinical and technological advancements.

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KPMG

KPMG's Health and Government practice supports several states, payors and providers across the nation in the commercial and government space driving better rural health. We support our clients from enterprise strategy through to complex delivery including enablement by integration of technology capabilities and AI. We leverage our global network to be bring successful examples from across the globe and bring those initiatives to bear in the US rural healthcare ecosystem which helps us deliver the quadruple aim of a better experience for patients and consumers, reduced cost of care and better clinical outcomes.

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PwC

PwC's Health Industries practice supports the advancement of rural health with services that range from strategy to the end-to-end integration of technology capabilities and AI, including our agentOS AI platform for agentic orchestration. Our deep health industry knowledge and experience working across public health, payers and providers enables the transformation and value needed by organizations today. We aim to help organizations create a connected rural health ecosystem that increases access, improves quality, delivers value and reduces the cost of care.

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Providers – Retail Health

CVS Health

Today With 9,000 community-based pharmacies, >800 retail clinics and +2,400 providers offering in-person and virtual acute and primary care services – CVS offers a health care practice that conducts millions of in-home health evaluations annually to close care gaps and reduce health care costs and includes telehealth capabilities in all 50 states. This uniquely positions CVS Health to support the integrated innovative care models envisioned by the Rural Health Transformation. Signify Health, a leading technology and services provider bringing clinicians into the home, is already present in rural communities where they engage patients and provide in-home assessments in every US county. In 2024 they completed 3.3 million in-home health evaluations (IHE) with 739,000 visits to rural and other hard-to-reach areas in 2024 (27% of total IHEs). Reinforced by nearly 12,000 licensed physicians, nurse practitioners and physician

assistants operating across all 50 states, in home visits last up to an hour, allowing the time to thoroughly discuss the person's health.

CVS MinuteClinic practices (Urgent and Primary Care) provide quality, convenience and accessibility for chronic conditions that enables patients to choose between virtual and in-clinic encounters from the convenience of their phone. Additionally our NP/PA model supports local hospital systems in Clinically Integrated Network offerings to partner to provide quality care to patients in need. Together the unique CVS Health ecosystem provides a trusted, high quality clinical partner committed to the transformation of healthcare in rural America. The portfolio of integrated CVS Health care delivery solutions addresses most requirements and has the power to strengthen rural health outcomes and their local healthcare communities.

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Kroger Health*

Kroger Health is uniquely positioned to strengthen rural healthcare by expanding preventive services and chronic disease management programs. Leveraging our network of over 2,200 pharmacies and hundreds of clinics, our 20,000+ healthcare professionals deliver care that combines health, wellness, and nutrition. Our pharmacist-led clinical interventions and dietitian services enhance medication adherence, close care gaps, and improve disease management, contributing to better population health outcomes and reduced healthcare costs.

Key offerings could include:**

- Screenings (blood pressure, A1C, cholesterol, BMI)
- Test-to-treat for flu, COVID-19, and strep
- Hormonal contraceptive prescribing
- Nutrition counseling and food prescriptions by registered dietitians
- Food benefit cards with approved product lists and incentives/rewards
- Cardiometabolic management programs with device monitoring
- Smoking cessation & naloxone education/distribution
- Community health campaigns with schools, employers, and organizations
- Vaccinations (flu, COVID-19, RSV, shingles, etc.)
- Adherence tools (automatic refill, extended-day supplies, notifications, pharmacist counseling, & prescription refill management via our app)

Our holistic approach, using "Food for Health" tools and an innovative fintech platform, addresses social & lifestyle needs such as nutrition security, transportation, and OTC medications, driving engagement and improving sustainable health outcomes for rural communities.

*Subject to review of applicable federal and state RHT program terms and conditions.

**Clinical service availability varies by state and division according to Kroger Health policy and applicable laws.

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Walgreens

Walgreens is woven into the fabric of American healthcare, with more than 8,000 community pharmacies serving as trusted access points for millions each day. Nearly half of rural residents live within 10 miles of a Walgreens, bringing essential care closer to areas with the most severe provider shortages. Our presence extends beyond the counter, with integrated digital and virtual platforms acting as connective tissue that links patients to preventive services, chronic care, and specialty therapies. Supported by 85,000 healthcare professionals embedded in local communities, Walgreens achieves patient engagement rates that consistently exceed 70 percent. Through high-touch adherence programs, therapy management, and preventive screenings, we improve outcomes and reduce costs - resulting in over $200 million in avoided healthcare expenses last year. This powerful combination of physical reach, digital innovation, and measurable results positions Walgreens as a strategic partner to states working to transform rural health.

RHT Pillar 1 | Make Rural America Healthy Again

- Leveraging our trusted presence in rural communities, proven clinical capabilities and technology-enabled care models, Walgreens will expand on its' existing infrastructure to deliver measurable, lasting outcomes for rural residents. Specifically, Walgreens can serve as key partners to states through dedicated population health programs. This includes programs targeted to patients with hypertension, substance use disorders and support for maternal health populations. Walgreens interventions have led to an 85% therapy adherence rate for chronic hypertension and diabetic patients. 40% of patients engaged by a pharmacy team member came in for blood pressure reading and consult compared to 5% with other providers. Directly reduces top rural mortality drivers including cardiovascular disease, maternal mortality, behavioral health crises and substance use disorder; lowers cost of care; improves health outcomes. Underscoring Walgreens' targeted population initiatives includes a robust preventive care network, including broad access to immunizations, administering more than 20M vaccines and 12M patients protected each year.

RHT Pillar 2 | Sustainable Access

- Walgreens is enhancing rural healthcare delivery by expanding access through telepharmacy and virtual care solutions, meeting patients where they are and improving continuity of care. In the past year alone, our teams completed approximately 50,000 virtual health engagements, supporting patients across a wide range of conditions. In parallel, our pharmacists delivered over 1.75 million medication therapy management services, helping to avoid an estimated $200 million in healthcare costs.

- We are transforming our pharmacies into sustainable care access *hubs* that integrate seamlessly with FQHCs and regional health systems through secure data-sharing and an interconnected delivery model. Our medication reconciliation programs have demonstrated a 15 to 40 percent reduction in 30-day hospital readmission rates,

reinforcing our role in improving outcomes and easing system-level burdens. These capabilities position Walgreens as a long-term partner in building the infrastructure needed to embed pharmacies into rural health systems as reliable, high-value access points for care.

RHT Pillar 3 | Workforce Development

- Pharmacists play a critical role in equipping the workforce to meet the rural healthcare needs of tomorrow. Our deep, existing partnerships with pharmacy schools, extensive residency experience, 311 graduates since launch, and programs that support technicians become pharmacists, make Walgreens an ideal partner for promoting top of license function, creating a sustainable workforce pipeline and extending the workforce through digital pathways as a turnkey solution.

RHT Pillar 4 | Innovative Care

- Walgreens continues to expand pharmacy care models (chronic disease management, adherence) to population health management; performance-based reimbursement to drive quality care. This is inclusive of pharmacy staff triaging, supporting with vitals or labs draws (point of care tests) and coordinate follow up with partner providers.

RHT Pillar 5 | Technology Innovation

- Lastly, Walgreens has longstanding relationships with key technology innovators that allow for seamless data interoperability and patient/pharmacist engagement tools. The Rural Healthcare Transformation program provides an opportunity to invest in essential technology infrastructure required for the delivery of whole-person care.

- Walgreens is ready to leverage our infrastructure with local presence to partner with states to close access gaps, reduce the burden of chronic disease and advance sustainable improvements in health equity through the Rural Healthcare Transformation Program over the next five years.

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Walmart

Walmart serves as an access point for the dissemination of various services through the more than 4,200 stores with full grocery offerings, 4,600 pharmacies, and 3,000 vision centers.

Pharmacies represent one of the most accessible and trusted healthcare entry points in rural communities but are often underutilized due to restrictive scope-of-practice laws and limited reimbursement models. The Rural Health Transformation Funds provide states an opportunity to pilot a transformative model of care delivery that could provide widespread access to chronic disease prevention and management, minor acute illness management and nutrition education to rural communities, transforming these communities access to the care.

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Rural Health Care Providers

Cibolo Health: Convening Member-owned High Value Networks for Rural Transformation

Independent rural hospitals and clinics are essential community assets, but they often lack the collective scale to thrive. Cibolo serves as the enabler and convener, supporting the creation and operation of member-owned High Value Networks (HVNs) that preserve local decision-making while aligning providers under a shared, accountable framework. These HVNs allow rural providers to pool resources, negotiate collectively, and ensure that Rural Health Transformation Program (RHTP) funds are deployed with transparency, accountability, and measurable impact.

Through HVNs, Cibolo provides the structure and tools rural providers need to:

- Steward federal and state funds, with mechanisms for tracking, compliance, and timely reporting.
- Eliminate waste and duplication by coordinating shared investments across facilities.
- Keep resources rooted in local communities, ensuring funds directly strengthen care delivery close to patients.
- Link expenditures to measurable improvements in prevention, chronic disease management, and sustainable access.
- This model gives provides confidence that resources are managed wisely and transparently, while empowering rural communities to lead their transformation with Cibolo as their trusted partner and convener.

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Huntsman Cancer Institute and Collaborating Cancer Centers

Huntsman Cancer Institute (HCI) at the University of Utah is a nationally recognized, NCI-designated Comprehensive Cancer Center with a bold mission: to drive innovation in rural health care and deliver visionary solutions that improve health outcomes for underserved communities. Serving the five-state Mountain West region—Idaho, Montana, Nevada, Utah, and Wyoming—HCI's reach and influence extend across the largest geographic area of any NCI-designated cancer center.

Our work is grounded in collaboration, innovation, and a deep commitment to rural health. Across multiple states, we bring together community partners, policymakers, and health leaders to advance care where it's needed most. By combining real-world experience with cutting-edge solutions, our team helps communities overcome barriers, strengthen systems, and build lasting improvements in health and well-being.

HCI is synonymous with:

- *Broad Impact*: Our work spans five rural and frontier states, ensuring that our reach and impact is wide.

- *Trusted Partner*: We collaborate closely with key organizations, stakeholders, and legislators in every state we serve, building strong relationships and advancing shared goals.
- *Effective Bi-Directional Engagement*: Our team includes expert consultants who specialize in effective engagement with rural and frontier communities, helping others navigate unique challenges and opportunities.
- *National Leadership in Implementation*: Huntsman investigators have extensive experience in implementation of technology-driven solutions to improve care in collaboration with community healthcare systems. We are known for effectively partnering with Community Health Centers (CHCs) to deploy cutting-edge, evidence-based technologies that set new standards in care.
- *Vision for the Future*: We are committed to transforming rural health care through innovation, partnership, and a relentless focus on better outcomes.

Collaborating cancer centers are members of the Association of American Cancer Institutes, representing the top cancer centers of the nation. AACI is accelerating progress against cancer by enhancing the impact of academic cancer centers and promoting cancer health equity. Collaborating cancer centers share the vision of serving rural communities through community outreach and engagement, research, and impactful interventions. They include members from multiple states with large rural populations, including New Mexico, Omaha, Kansas and others.

Together, we can transform rural health care through innovation, partnership, and a shared commitment to ensuring that every community has access to the best in health promotion, cancer care, and health innovation.

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Independent Pharmacy Cooperative Digital Health

With over 2,300 community pharmacies, Independent Pharmacy Cooperative (IPC) leverages iCare+ interoperability to enable pharmacists to onboard patients into RPM and CCM programs, monitor health data, triage information back to physicians, and support CMS-compliant care plans. Positioned in underserved markets, IPC-trained pharmacy staff extend clinical reach directly into the patient's home, transforming the local pharmacy into an active node for digital care delivery.

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National Association of Community Health Centers

The National Association of Community Health Centers (NACHC) mission is to champion Community Health Centers delivering affordable, effective, comprehensive primary care that is community-driven and improves health for all. NACHC serves as the leading national care delivery and advocacy organization in support of Community Health Centers and the expansion of health care access for the medically underserved and uninsured.

NACHC:

- Provides <u>training, leadership development and technical assistance</u> to health center staff and boards to support and strengthen health center operations and governance.
- Develops alliances and partnerships with the public and private sectors to build stronger and healthier communities and bring greater resources to and investment in <u>community health centers</u>.
- Works closely with chartered <u>State and Regional Primary Care Associations (PCAs)</u> to fulfill their shared health care mission and support the growth and development of community-based health center programs.

Our is healthy and thriving communities where everyone receives exceptional primary care.

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Rural Health Affiliated with Large Health Systems

Advocate Health

With nearly 70 nonprofit hospitals serving local communities across six states, Advocate Health directly supports more than 859,000 rural patients living in 36 countryside counties. From Centre, Alabama, to Wadesboro, North Carolina, to Manitowoc, Wisconsin, Advocate Health doctors and nurses provide hands-on, personalized care as medical professionals who live in the communities they serve and understand the needs of their patients – their neighbors – best.

With 322 clinics and 21 hospitals in rural areas, Advocate Health's attention and commitment to rural care has grown with it – fueled by enhanced resources, innovations and expertise that come with providing care to patients and communities in different regions of the country: Advocate Health Care in Illinois; Atrium Health in Alabama, Georgia, North Carolina and South Carolina; and Aurora Health Care in Wisconsin. "At its core, improving the health of people who live in rural areas is about finding ways to provide excellent care in places where it's often difficult to get, but desperately needed," said Kinneil Coltman, executive vice president and chief consumer and social impact officer for Advocate Health. As an example, as recently as May 2025, Advocate Health announced it is expanding its school-based therapy program to serve students in five more rural counties in North Carolina.

To provide nation-leading care to rural areas, Advocate Health combines:

- **Local Care**: Advocate Health hires people who live in the community and understand its needs. They provide in-person care with a personal touch, building trust and delivering care that feels familiar and compassionate.
- **Innovative Solutions**: The health system uses the latest tools, expert knowledge and strong teamwork to tackle health challenges early. The goal is to help people stay healthy and avoid hospital visits unless absolutely necessary

- **Specialist Care Close to Home**: Thanks to new technology, patients in small towns can connect with top specialists without needing to travel far. Whether it's a virtual consultation or remote monitoring, expert care is just a click away.
- **Jobs with Purpose that Enhance Economic Well-being**: Advocate Health offers a wide range of good-paying, purpose-driven careers, whether as a nurse, technician or another vital role on the care team. In many rural areas, hospitals are among the largest employers. That means these jobs don't just support individuals and families – they help strengthen entire local economies.

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Others – In discussion with several other health systems

Payers – In discussions with several payers

Non-Profits

American Heart Association/American Stroke Association

As long-standing and trusted brand by both patients and providers, the American Heart Association/American Stroke Association (AHA) can and will be a convening entity for delivering community-based health screening with a focus on cardio-kidney metabolic health (CKMH) and a special emphasis on identifying high blood pressure.

Effective Community Health Screening can serve as an important way to:

- Identify health issues early
- Educate and engage individuals
- Path and route for further testing and/or health services
- Engage and convene community health leaders and resources

The AHA works hand-in-hand with great partners and collaborators such as Higi, using its advanced (AHA branded) Health Kiosks (typically located in retail settings), to reach people quickly and effectively with risk screening all the way to home-based remote-monitoring. These Health Kiosks rely on the AHA's Life's Essential 8 (LE8) Heart Health screening tool to quickly identify those at risk and in 2026 these kiosks will have the ability to screen for Aortic Stenosis and other conditions as capabilities and algorithms improve.

Additionally, the AHA's relationship with TopCon provides an innovative and new way to do health screening from the eye – with an emphasis on cardiovascular risk screening also using the AHA's LE8 Health Assessment and with the ability in 2026 to overlay Blood Pressure and Diabetes screening through advanced AI screening tools that can identify these health issues through a retina scan.

The combination of health and risk screening from the eye and from a network of distributed health kiosks with a core focus on essentially CKMH screening/educating/routing/pathing presents an extraordinary opportunity to "blanket" a community with healthcare support and services, offsetting the need for (or supplementing), other approaches.

Our shared relationship with Microsoft, and a strong reliance on MS/Azure across these relationships, affords this Community Health Screening approach also the ability to quickly identify key health data points and issues across communities, states, regions as we increasingly work to help people move towards better health and for health leaders and administrators to more effectively use limited resources.

We're implementing this advanced, integrated model beginning in November in New Orleans – the location of our annual Scientific Conference called Scientific Sessions – with local health leaders from across the City. And in conjunction with our Tech Partners and also the AHA's Local Community Health Impact Staff – the AHA has several thousand such staffers across the country through our regional offices – an incredibly powerful testament to our grass-roots capabilities. We will also be sharing this model there and at the upcoming HLTH Event in Vegas and at our Scientific Sessions in New Orleans. For all those interested please reach out… will be happy to connect.

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APPENDIX 1: RHT Collaborative Legal Disclaimer

Rural Health Transformation Collaborative members agree that they will not share competitively sensitive information, agree on business decisions, and/or perform any activities that may result in antitrust activity.