

Arkansas's Rural Health Transformation Plan

What is the Rural Health Transformation (RHT) Program?

The program is a Congressionally authorized, 5-year statewide transformation program, authorized by the One Big Beautiful Bill Act (H.R. 1)

- Focuses on access, workforce, prevention, and sustainability
- Arkansas receives funding and distributes it to subrecipients
- Moves beyond short-term stabilization to long-term system redesign
- Investments in the rural healthcare ecosystem for future generations

Arkansas's vision for Rural Health

- Arkansas's RHT vision is to redesign rural healthcare around **prevention, connectivity, and sustainability**, not just facility stabilization.
- The State's plan explicitly ties healthcare transformation to broader goals: healthier children, stronger families, workforce participation, and local economic resilience.
- Potential subrecipients should view this as a **multi-year operating transformation opportunity**, not a one-time grant.

Arkansas's RHT Program Major Initiatives

HEART

- Prevention, nutrition, physical activity, and chronic disease

PACT

- Access, care coordination, networks, and hospital stabilization

RISE AR

- Workforce recruitment, training and leadership development

THRIVE

- Telehealth, remote patient monitoring, and digital infrastructure

Allowable and Unallowable Uses of Funds

Allowable Uses:

- Workforce recruitment, training, and leadership development
- Care delivery redesign and service expansion
- Telehealth and health IT infrastructure
- Care coordination and clinically integrated networks
- Planning for long-term sustainability

Unallowable Uses:

- Paying down debt or covering operating losses
- Routine facility maintenance or capital replacement
- Supplanting existing funding sources
- One-time purchases without sustainability
- Activities not aligned with approved initiatives of AR Rural Health Transformation plan

Subrecipient Eligibility and Commitments

Who can be a subrecipient:

- Rural hospitals (PPS, CAHs and REHs)
- Health systems with rural footprint
- Clinics, FQHCs, and RHCs
- EMS providers
- Pharmacists
- Universities, nonprofits, and community partners

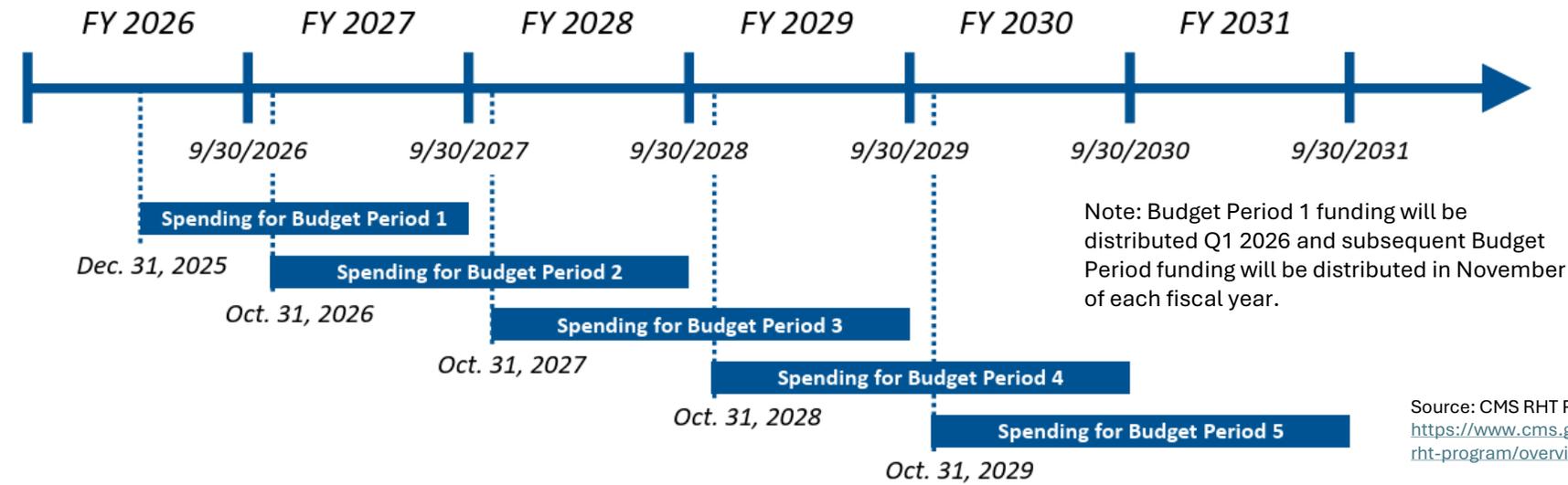
What Arkansas is asking of subrecipients:

- Alignment with statewide transformation strategy
- Regional collaboration across providers
- Participation in data sharing and performance reporting
- Willingness to redesign care models
- Commitment to long-term sustainability

Program Timeline

Program funding is appropriated from Federal Fiscal Year (FFY) 2026 through FFY 2030

- Each Federal fiscal year's funding aligns with the five budget periods
- For each budget period, recipients will have until the end of the following Federal fiscal year to spend awarded funding



Source: CMS RHT Program website
<https://www.cms.gov/priorities/rural-health-transformation-rht-program/overview>

Program Timeline

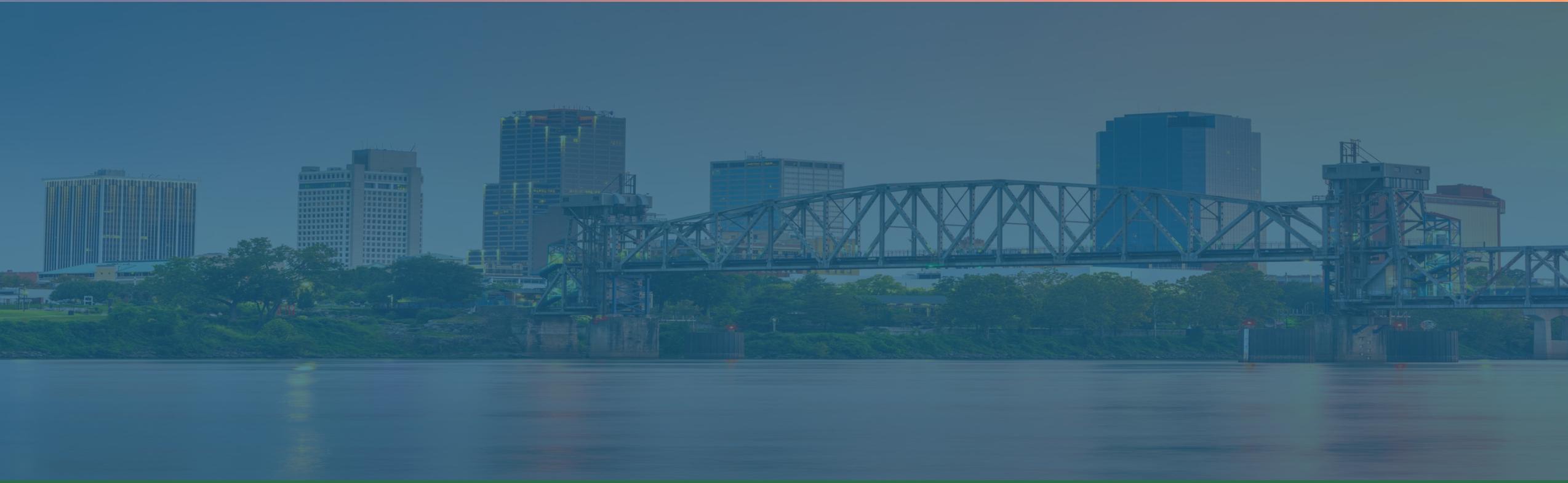
2026: Planning and early implementation

- April
 - Application Portal Online
 - Initial NOFO released: THRIVE
- May
 - THRIVE applications reviewed (EMS, RPM, Telehealth and IT infrastructure)
 - NOFOs finalized (PACT, RISE, HEART)
- June
 - RHTP dollars begin to flow
 - NOFOs released for other initiatives
- October
 - **All dollars must be obligated by October 30th**

2027: All Year 1 budget dollars must be spent by September 30th

Key Takeaways

- Arkansas's goal is redesigning rural healthcare, not just stabilizing it.
- Hospitals and providers are central to success, but community involvement is key.
- This is a multi-year, system-wide transformation.
- **Collaboration, accountability, and sustainability matter.**



Check for regular updates at www.arkansasrhtp.com

Contact our team at info@arkansasrhtp.com