Public Engagement

Rural Health Transformation Program

Agency collaboration
Health Care Authority (HCA), Department of Health (DOH), and Department of Social and Health Services (DSHS) are working with the Governor's Office to submit the application.

Intentional public engagement
We worked across platforms and networks to meaningfully engage the public. We also welcomed stakeholders' ideas.

Key priorities
Based on conversations with and written feedback from the public, we identified key priorities for funding that work best for Washington.

What is the Rural Health Transformation Program?

The recent federal budget (**H.R.1**) created the **Rural Health Transformation Program** (RHTP) to support sustainable health care change for rural communities.
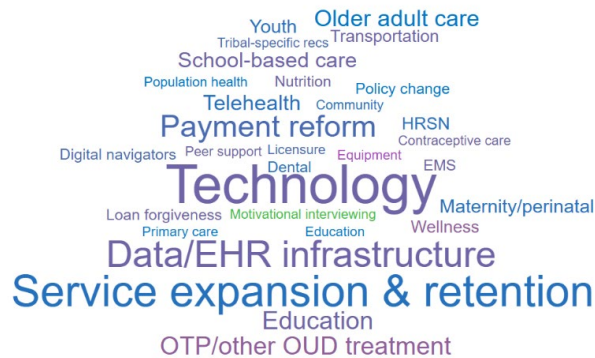
Funding for RHTP will provide $10 billion in federal funds each year from 2026–2030. Applying states will be approved or denied no later than December 31, 2025. Once approved, states are eligible for all five years of funding from RHTP.

Our initial priorities were based on the RHTP funding criteria and early stakeholder input:

- Sustainable delivery system reforms
- Workforce programs to grow, attract, and retain teams
- Programs to improve prevention, chronic disease management, and aging in place
- Investments in infrastructure, particularly technology
- Plans that align with state investments and build new programs over time

View the **RHTP one-pager** for more background information.

Request for public feedback

DOH, DSHS, and HCA worked closely with Governor Ferguson's Office throughout this process. We knew the most complete application would use feedback from the public.

In August 2025, we posted a **request for information** to HCA's website using the H.R.1 criteria for the RHTP fund. We also linked to this webpage from agency social media and a **GovDelivery notice**. The due date for submissions is September 26.

Thirty other states also requested input from the public. For example:

- Colorado provided a one-pager explaining RHTP.
- New Mexico is soliciting for a consultant to help with their application.
- Mississippi provided a one-pager and is also seeking consultant support.

Sixteen states have not put forth any action.

DOH, DSHS, and HCA also engaged in talks with associations, stakeholder groups, community collaboratives, and other agencies such as the Department of Commerce.

Responses from the public

As of mid-September, we received 170 written responses. The following table shows the most common submitter types.

Submitter types	
Nonprofit organizations	Rural hospitals and hospital districts
Non-hospital health care provider groups	Health care education programs
State and national associations	State agencies
Interested individuals	Colleges and universities
School districts	Tribes
EMS and firefighters	Public Health Departments

![Washington State Health Care Authority]

Most common topic themes from RHTP ideas

Youth Older adult care
Tribal-specific recs Transportation
School-based care
Population health Nutrition Policy change
Telehealth Community
Payment reform HRSN
Digital navigators Peer support Licensure Contraceptive care
Dental Equipment
Technology EMS
Loan forgiveness Motivational interviewing Maternity/perinatal
Primary care Education Wellness
Data/EHR infrastructure
Service expansion & retention
Education
OTP/other OUD treatment

🔑 Key priorities for RHTP funding

The public's feedback clarified needs and added context based on lived experiences. With the public's help, we chose the priorities in the following table.

We'll set aside administrative funds for reporting and evaluation, grants management, and oversight costs. Tribes will also have funds set aside.

Priority	Description	Examples
Supporting essential hospital services	Support ongoing and new service lines in rural hospital settings to create sustainability	• Hospital-specific technology investments • Networks for streamlining operations
Workforce investments	Keep, attract, and build a robust network of health care professionals in rural areas	• Grow-your-own • Rural residency • Non-physician education programs
Technology and building maintenance	Expand technology's capacity to connect patients to care, plus support for current building projects	• Cybersecurity • AI tools • Telehealth tools for remote provider check-up, education, and patient care • Minor, existing building changes or equipment upgrades

Priority	Description	Examples
Prevention and care management	Help communities provide resources to improve health outcomes outside of medical facilities	• Community-based prevention • Care coordination programs (like nutrition programs)
Access to care	Make health care more available by getting people to their appointments or mobile services into communities	• Transportation • Mobile health services
Behavioral health	Support programs focused on substance use disorders and mental health	Behavioral health programs, including: • Opioid treatment providers • Crisis services

📋 Next steps

We provide updates about the RHTP process and next steps in two meetings:

- **September 25**: Public webinar
- **October 24**: Legislative presentation

We'll try to incorporate any vital feedback from the webinar into the application.

DOH, DSHS, HCA, and Governor Ferguson's Office will continue to work together on the RHTP application.

The RHTP application is due **November 5, 2025**. Governor Ferguson's Office appointed HCA to submit the application for Washington. We'll keep you updated in this process.

By the end of the year, we'll send a notification if Washington's application was approved or denied.