



MHCC Request for Applications

Maryland Rural Health Transformation Program (RHTP)
Grant Funding to Expand Access to Primary Care in Rural
Maryland

MAY 21, 2026

CMS Funding Statement



The Maryland Rural Health Transformation Program is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award to the Maryland Department of Health (MDH) totaling \$168,180,837.61 with 100 percent funded by CMS/HHS.

The contents of this meeting are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.

Presentation Overview



- ▶ Maryland RHTP Overview
- ▶ Maryland RHTP Key Goals and Pillars
- ▶ MHCC's Role, Responsibilities, and Milestones



Maryland RHTP Overview

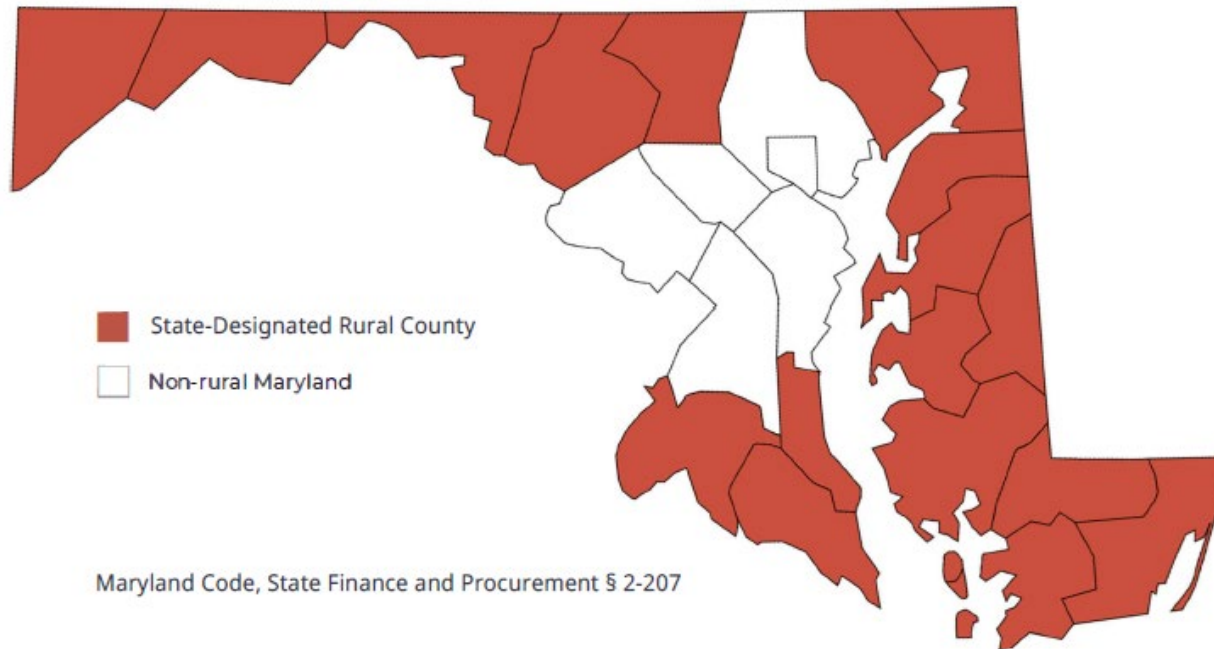


Overview



- ▶ The RHTP was authorized by H.R. 1 (Section 71401 of Public Law 119-21) in 2025 to empower states to strengthen rural communities across America
 - The RHTP is a federal \$50B, five-year grant program that aims to transform the health care delivery ecosystem by improving health care access, quality, and outcomes
- ▶ On December 29, 2025, MDH received \$168M for the first budget period of the program (annual funding is subject to the availability of federal funds)
- ▶ MDH has established strategic partnerships with State agencies and rural stakeholders to shape, implement, and evaluate program strategies
- ▶ MDH has allocated \$6.3M in Maryland RHTP funding to MHCC to establish and expand primary care services in rural communities

Rural Counties



- ▶ Maryland law recognizes 18 of 24 counties as rural, representing about 1.4M residents
 - Includes Allegany, Calvert, Caroline, Carroll, Cecil, Charles, Dorchester, Frederick, Garrett, Harford, Kent, Queen Anne’s, Somerset, St. Mary’s, Talbot, Washington, Wicomico, and Worcester



Maryland RHTP Key Goals and Pillars

Key Goals



- ▶ Support rural health innovations and new access points to promote preventative health and address root causes of diseases
- ▶ Help rural providers become long-term access points for care by improving efficiency and sustainability
- ▶ Spark the growth of innovative care models to improve health outcomes, coordinate care, and promote flexible care arrangements
- ▶ Foster use of innovative technologies that promote efficient care delivery, data security, and access to digital health tools by rural facilities, providers, and patients

Maryland RHTP Pillars



PILLAR 1

Transform the Rural Health Workforce



\$26 million
(15.3% of Period 1 award)

PILLAR 2

Promote Sustainable Access and Innovative Care



\$126 million
(74.9% of Period 1 award)

PILLAR 3

Empower Rural Marylanders to Eat for Health



\$15 million
(9.1% of Period 1 award)

Governance
\$1 million
(0.7% of Period 1 award)

PART 1 - IMMEDIATE IMPACT FUNDS

Quickly provide resources to expand “shovel-ready” activities in rural areas.

PART 2 - TRANSFORMATION FUNDS

Competitive opportunities for transformational initiatives in rural areas.

Pillar 1: Transform the Rural Health Workforce – \$18.5M



- ▶ Expand existing and implement new efforts to develop, recruit, and retain a strong health workforce in rural communities, addressing multiple types of clinicians and allied health professionals
- ▶ Immediate impact funds
 - Expand existing apprenticeship and training programs and expand the Rural Advancement for Maryland Peers
 - Expand the capacity of existing Area Health Education Centers (AHEC) programs and open a new AHEC in Southern Maryland
 - Implement a Maryland Health Workforce Data Clearinghouse
 - Create an online platform for health care workforce development applications

Pillar 2: Promote Sustainable Access and Innovative Care for Rural Marylanders – \$13M



- ▶ Immediate impact funds
 - Establish and expand primary care services in rural communities (MHCC)
 - Strengthen rural local health department (LHD) and Area Agencies on Aging revenue capture and self-sufficiency via vendors to provide coding, billing, and revenue cycle management technical assistance and explore LHD contracting and credentialing
 - Pilot Pre-hospital Blood Transfusion Program with rural emergency management services (EMS)

Pillar 2: Promote Sustainable Access and Innovative Care for Rural Marylanders – \$13M

(Continued)



- ▶ Immediate impact funds
 - Expand school-based health center capacity through the expansion of hours, services and services areas and the procurement of mobile units
 - Increase rural provider health information exchange connectivity, pilot artificial intelligence technology to improve clinical workflows, connect closed loop referral tools, and support community-based organization billing
 - Develop a centralized telehealth technical infrastructure

Pillar 2: Promote Sustainable Access and Innovative Care for Rural Marylanders – \$96M

(Continued)



► Transformation funds

- Health IT service expansion to meet current demand and build long-term capacity to improve health outcomes and deploy technology-enabled chronic disease management
- Support regional mobile health programs including chronic disease management, partnerships with EMS for community paramedicine and mobile health integrated health models, and community-based care teams
- Behavioral health services expansion to increase sustainable access to priority services across the full continuum of behavioral health care in rural areas
- Prepare rural providers to participate in innovative care delivery and value-based care models

Pillar 3: Empower Rural Marylanders to Eat for Health – \$10M



- ▶ Invest in infrastructure to support Marylanders' access to nutritious, locally grown and raised foods
- ▶ Immediate impact funds
 - Invest in cold storage infrastructure within rural communities to expand food aggregation and distribution capacity
 - Provide small grocers and mobile access points with funds for equipment purchases, minor renovations, and technology infrastructure
 - LHDs will provide targeted nutritional education to improve food and physical activity behaviors
 - Establish a Rural Food Coordination program with a regional approach to convening and coordinating
- ▶ Transformation funds
 - Food aggregation and food hubs to increase the availability of affordable local foods
 - New organizational purchasing strategies



MHCC's Role, Responsibilities, and Milestones

Scope of Work – Key Tasks



- ▶ Support the establishment and expansion of primary care practices in rural communities (Pillar 2)
 - Develop, release, and promote a Request for Applications (RFAs)
 - Eligible organizations include existing or newly established primary care practices; Federally Qualified Health Centers; employers or local governments willing to sponsor an advanced primary care practice
 - Manage a transparent RFA review and selection process
 - Provide technical guidance to awardees, monitor progress toward creating new primary care access points, and ensure that funded activities minimally address the community needs outlined in the RFA
 - Work with MDH to guide awardees in building the capabilities required for participation in PC AHEAD, MDPCP-AHEAD, Maryland Medicaid's Advanced Primary Care Program, and billing for other advanced primary care services

Why This Matters; Evidence-Based Rationale



- ▶ Research finds that increased investment in primary care improves access to care and health outcomes
 - The only specialty in which increased supply results in lower mortality and more equitable health outcomes
- ▶ Historically, underinvestment has led to workforce shortages and limited access to quality care, which undermines population health and increases health system costs
 - Rural communities face higher rates of provider shortages, delayed diagnoses, higher burdens of chronic disease
- ▶ Maryland RHTP funding will strengthen efforts to expand access in underserved rural communities, helping improve chronic disease management and reduce avoidable hospitalizations

Source: National Academies of Sciences, Engineering, and Medicine. Implementing High-Quality Primary Care: Rebuilding The Foundation of Health Care. Washington, DC: The National Academies Press, 2021. <https://nap.nationalacademies.org/catalog/25983/implementinghigh-quality-primary-care-rebuilding-the-foundation-of-health>. Accessed April 1, 2026.

Milestones



Task	Month/Date
MHCC releases RFA	May 4, 2026
Q&A – Opportunity for potential applicants to clarify program requirements, application procedures, and expectations for grant activities	May 11, 2026
Submission deadline	June 1, 2026
Evaluation Committee reviews all applications	June/July
MHCC notifies applicants about award decisions	July
Grant commences	August
Period 1 Grant Fund Spending Period Concludes	September 30, 2027

Awards



- ▶ Up to 15 grants will be competitively awarded based on available funds
 - Award amounts may vary based on need and scope of the proposed project, with a maximum of \$1.6M for a single award
- ▶ Award decisions will prioritize applicants that demonstrate readiness to establish or expand primary care services in rural communities with a focus on operational capacity, workforce planning, and timely implementation

Sustainability



- ▶ The RFA encourages use of billing codes for management and integration services that support advanced primary care by addressing medical, behavioral, and social needs through coordinated, team-based approaches
 - Advanced Primary Care Management (APCM), Collaborative Care Model (CoCM), Behavioral Health Integration (BHI), Community Health Integration (CHI), and Principal Illness Navigation (PIN)
 - APCM code consolidates multiple care-management activities into a single monthly payment, reducing administrative burden and allowing practices to focus on meaningful patient care rather than time-tracking
 - Applicants are encouraged to also join value-based care models that sustain funding and promote high quality care, such as the MDPCP and PC AHEAD advanced primary care models and accountable care organization (ACO) models

Terms and Conditions



- ▶ All partners and sub-awardees of Maryland’s RHTP cooperative agreement with CMS must agree to and comply with Maryland RHTP terms and conditions included in:
 - [CMS Notice of Funding Opportunity \(NOFO\)](#)
 - [CMS NOFO - Frequently Asked Questions](#)
 - [Maryland Notice of Award Terms and Conditions](#)
 - [CMS RHTP Frequently Asked Questions—April 2026](#)

Questions?





Contact Information

Melanie Cavaliere

*Chief,
Innovative Care Delivery*

melanie.cavaliere@maryland.gov

mhcc.maryland.gov



Appendix

MHCC Program Monitoring



- ▶ Awardees must demonstrate fidelity to their approved proposal
- ▶ Awardees will be requested to submit updates on the number of patients served
- ▶ Staff will offer technical guidance to awardees, monitor the net increase in primary care capacity within targeted geographic focus areas, and verify that expenditures align with the approved budget