

Nebraska

Title: RHTP – Make Nebraska Healthy Again - Nebraska Department of Health and Human Services (DHHS) will build a prevention-first, tech-enabled sustainable rural health care system.

Abstract: The Rural Health Transformation Program (RHTP) is a once-in-a-generation opportunity to Make Rural Nebraska Healthy Again. Nearly 95% of counties in Nebraska are rural or frontier. Over one-third of Nebraskans live in areas where critical workforce shortages in primary care, obstetrics, and behavioral health persist. Despite Nebraska’s agricultural strength, 48 of 93 counties qualify as food deserts and children lack access to healthy foods. Nebraska will leverage RHTP funds to address unique challenges, including obesity amid food deserts, lack of maternal care in a State committed to family values, and an aging rural population. With a proposed annual budget of \$200 million, the Nebraska Department of Health and Human Services (DHHS) will build a prevention-first, tech-enabled sustainable rural health care system. The project will prevent chronic disease, regionalize care, and advance Make America Healthy Again priorities. To achieve this vision, DHHS will implement seven integrated initiatives to strengthen the State’s rural health infrastructure, address workforce gaps, and ensure access to care through consumer-facing technology. DHHS will partner with health care providers, agriculture and community partners through requests for application (RFA).

1. **Make Rural Nebraska Healthy Again through Food as Medicine:** Establish statewide infrastructure to improve access to whole foods and lower obesity risk by transforming rural school kitchens, developing regional food hubs to include farmers and ranchers, and introducing nutrition education and fitness programs. Subrecipients include Nebraska Department of Education and University of Nebraska Kearney.
2. **Regionalized Rural Access and Navigation:** Develop hub and spoke regional networks to ensure rural residents can access care for emergency response, maternal care, post-acute follow-up, preventive care, and other local services. Subrecipients include Local Health Departments (LHD), Tribal Organizations (TO), Nebraska Association of Local Health Departments, Nebraska County Extension Offices, and rural hospitals and clinics.
3. **Rural Workforce Acceleration:** Address care gaps by recruiting, training, and retaining a resilient workforce that advances whole-person health through the State’s “grow local” strategy. Subrecipients include Nebraska Hospital Association (NHA), community colleges, private colleges, University of Nebraska system, and Creighton University as teaching partners ensuring the funding goes to rural Nebraska workforce.
4. **eHealth and Mobile:** Implement remote care through mobile clinical units, oral health teams, technology-enhanced pharmacy services, and consumer-facing remote patient monitoring. Subrecipients include Nebraska Perinatal Quality Improvement Collaborative, LHD, TO, Creighton University and UNMC School of Dentistry, and Nebraska Enhanced Services Pharmacies.
5. **Rural Emergency Behavioral Health:** Address behavioral health needs by creating a continuum of care for early intervention and emergency behavioral health and substance use services. Subrecipients include Nebraska Medical Association.
6. **Assisted Living Facility (ALF) Special Needs Population Incentive Model:** Better serve residents with complex medical, physical, intellectual, and other high-acuity needs through provider add-ons and modernization grants for ALFs.
7. **Nebraska Rural Health Technology Catalyst Fund and Partnership Initiative:** Improve access, enhance disease management, and strengthen the financial sustainability and workforce capacity of rural providers by investing in high-tech innovations to support critical healthcare gaps in rural communities. Nebraska’s proposal combines evidence-based innovation with deep community partnerships to transform how care is delivered across the State. Through the RHTP, Nebraska will not only improve health outcomes but also revitalize rural economies, empower local providers, and build healthier, more connected communities for generations.

This document includes the State’s Rural Health Transformation (RHT) Program Project Abstract submitted in its RHT Program Application. As outlined in the Notice of Funding Opportunity (NOFO), States were required to submit a one-page summary of their proposed project including its purpose and anticipated outcomes for the purposes of public information sharing. Budget amounts/requested funds highlighted in the State’s Abstract are purely illustrative and hypothetical and do not reflect the State’s final award amount or approved use of funds.