



Utah

Title: Utah Rural Health Transformation Program: A bold, multi-faceted innovative effort aimed at generational investments to build resilient, sustainable rural health systems.

Abstract: Utah geographically is the 13th largest State and 77% rural. Rural residents in Utah face persistent healthcare barriers including geographic isolation, provider shortages, aging infrastructure, and economic hardships. These challenges contribute to higher rates of chronic disease, behavioral health issues, and poor maternal and child health outcomes. Addressing these challenges requires building a sustainable, patient-centered system of care to improve outcomes and ensure the long-term viability of rural healthcare in Utah.

Utah's Rural Health Transformation Program (RHTP) is a bold, multi-faceted innovative effort aimed at generational investments to build resilient, sustainable rural health systems. This outcome-focused program will be guided by four strategic pillars—Making Rural Utahns Healthy, Workforce Development, Innovation and Access, and Technology Innovation. Within these strategic pillars, Utah will implement seven integrated initiatives in collaboration with State, local, Tribal, and community partners to create a rural health ecosystem designed to improve health outcomes: PATH (Preventive Action and Transformation for Health); RISE (Rural Incentive and Skill Expansion); SHIFT (Sustaining Health Infrastructure for Transformation); FAST (Financial Approaches for Sustainable Transformation); LIFT (Leveraging Innovation for Facilitated Telehealth); SUPPORT (Shared Utilities for Partnered Provider Operational Resources and Technology); and LINC'S (Leveraging Interoperability Networks to Connect Services).

Combined, these initiatives will create financially sustainable health systems while supporting healthy lifestyles for rural Utahns, beginning in childhood and extending across the lifespan. PATH fosters lifelong wellness through improved nutrition, physical activity, and healthy environments. RISE strengthens the rural workforce through early and alternative career pathways, education, training, and structured provider incentives. SHIFT strategically invests in preventive care infrastructure to advance proactive, community-based health delivery systems, while strengthening public health capacity. FAST drives high-quality care, cost efficiency, and financial stability in rural health systems. LIFT expands access to care through telehealth to overcome geographic barriers. SUPPORT modernizes digital and administrative systems to enhance operational efficiency. And LINC'S improves and optimizes data sharing across clinics, hospitals, behavioral health providers, and community organizations to enable coordinated care. Created through robust stakeholder engagement, these initiatives aim to unite rural providers, community partners, and public health entities to transform healthcare delivery, strengthen patient-centered care, and drive measurable improvements in health, coordination, and financial sustainability across rural Utah. Utah's RHTP framework ascribes to a core Utah financing principle: to use one-time funding to convert short-term investments into lasting operational efficiencies and policy reforms. By aligning financial incentives, modernizing infrastructure, expanding telehealth capacity, and addressing workforce shortages, Utah is positioned to cultivate a data-driven, patient-centered rural health system that supports providers to thrive and ensures rural Utahns have consistent access to high-quality care for generations to come.

Lead organization: Utah Department of Health and Human Services

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.