

Welcome to the

California Telehealth Resource Center 14th Annual Digital Health Summit

Bridging the Gap: Digital Health and AI for Smarter Care, Stronger Teams,
and Sustainable Healthcare

*Setting the Foundation: Statewide Digital Health Priorities under
California's Rural Health Transformation Program*



Jacob Parkinson, DxF Program Director, HCAI
9:00am – 9:45am (PT)

Disclaimer



This session is purely for informational purposes.

The California Telehealth Resource Center has no relevant financial interest, arrangement, or affiliation with any organizations related to commercial products or services discussed during the Summit.

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Summit Sessions

8:30 am

Opening Remarks | Setting the Vision:
Digital Health, AI, and the Future of a
Sustainable Health Ecosystem

9:00 am

Opening Keynote | Setting the
Foundation: Statewide Digital Health
Priorities under California's Rural
Health Transformation Program

10:00 am

From Clinic to Community: Scaling
Chronic Disease Management Beyond
the Visit

11:00 am

From Innovation to Sustainability:
Payment and Policy Pathways That
Make Digital Care Scalable

1:00 pm

Trust Is Built, Not Bought: Making AI
Safe and Defensible in Clinical Care

2:00 pm

Building What Lasts: Rural Digital
Health Sustainability in Practice

3:00 pm

Clinical AI That Delivers: Evidence,
Workflow Fit, and What Actually
Changes Care

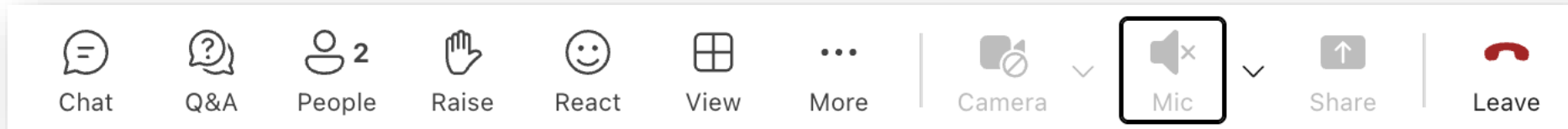
4:00 pm

Closing Keynote | From Promise to
Practice: Preparing Care Teams for
Generative AI in the Next Year

[Register Here](#)

All times are in Pacific Time Zone (PT).

Microsoft Teams Tips



Open the Chat

Please open the chat and use it liberally; we want to hear from you!

Raise your Hand or React

Attendees will have an opportunity to ask questions. Raise your hand or send reactions!

Muted on Entry

You are muted on entry.

Session Recording

Today's session is being recorded! Keep an eye out for attendee announcements when recordings are available.

Thank You, CTRC Funders



Established in 2006, the California Telehealth Resource Center (CTRC) exists to share **unbiased, no-cost digital health resources and consultative support services** with providers and patients located across all 58 California counties and beyond. As part of a collaboration of 12 regional and 2 national Telehealth Resource Centers, CTRC is **committed to implementing digital health programs for rural and underserved communities.**

The work of the CTRC would not be possible without funding and support from the Health Resources and Services Administration's **Office for the Advancement of Telehealth** and the **CA State Office of Rural Health**, part of the Department of Health Care Access and Information.

Setting the Foundation: Statewide Digital Health Priorities under
California's Rural Health Transformation Program

Meet Your Presenters



Jacob Parkinson

DxF Program Director

HCAI



CALIFORNIA
RURAL HEALTH TRANSFORMATION

Statewide Digital Health Priorities under California's Rural Health Transformation Program

Jacob Parkinson
DxF Program Director
CalRHT Tech & Tools Lead



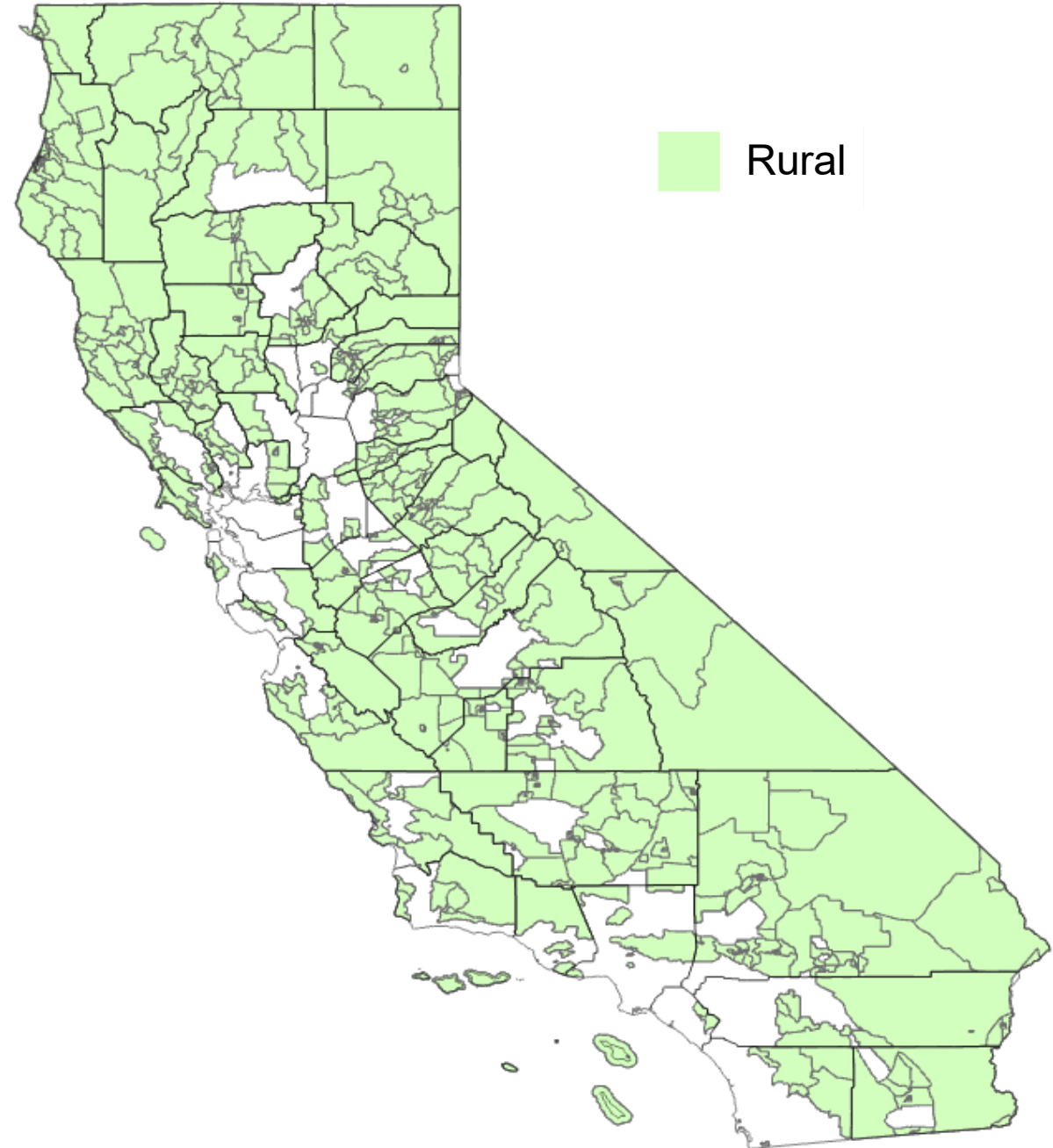
Agenda

- Rural California
- CMS's Rural Health Transformation Program Overview
- Stakeholder Engagement
- CalRHT Proposal & Timelines
- BY 1 Funding Opportunities and Timeline
- Rural Health Policy Council
- Looking Ahead

The CalRHT 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 totaling \$233,639,308.46 with 100 percent funded by CMS/HHS. The contents are those of CalRHT and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.

Rural California

- The state has over 2.7 million rural residents
- Of California's 58 counties, 57 contain rural areas
- 82.1% of California is a rural census tract
 - Approximately 76% of rural census tracts are in a Primary Care Health Professional Shortage Area
- The state has:
 - 279 Rural Health Clinics (RHC)
 - 45 Indian Health Service clinics
 - 296 Federally Qualified Health Centers (FQHC), including dual funded tribal clinics
 - 65 hospitals meeting HRSA or CMS's definitions of rural



CMS's RHTP Strategic Goals

H.R.1 created the \$50 billion Rural Health Transformation Program (RHTP) with the following strategic goals:

Make rural
America
healthy again

Sustainable
access

Workforce
development

Innovative
care

Technology
innovation

Permissible Use of Funds

Funds must be used for at least three of the CMS-designated categories:

Prevention
and chronic
disease

Provider
payments*

Consumer
technology
solutions

Training and
technical
assistance

Workforce*

IT advances*

Appropriate
care
availability

Behavioral
health

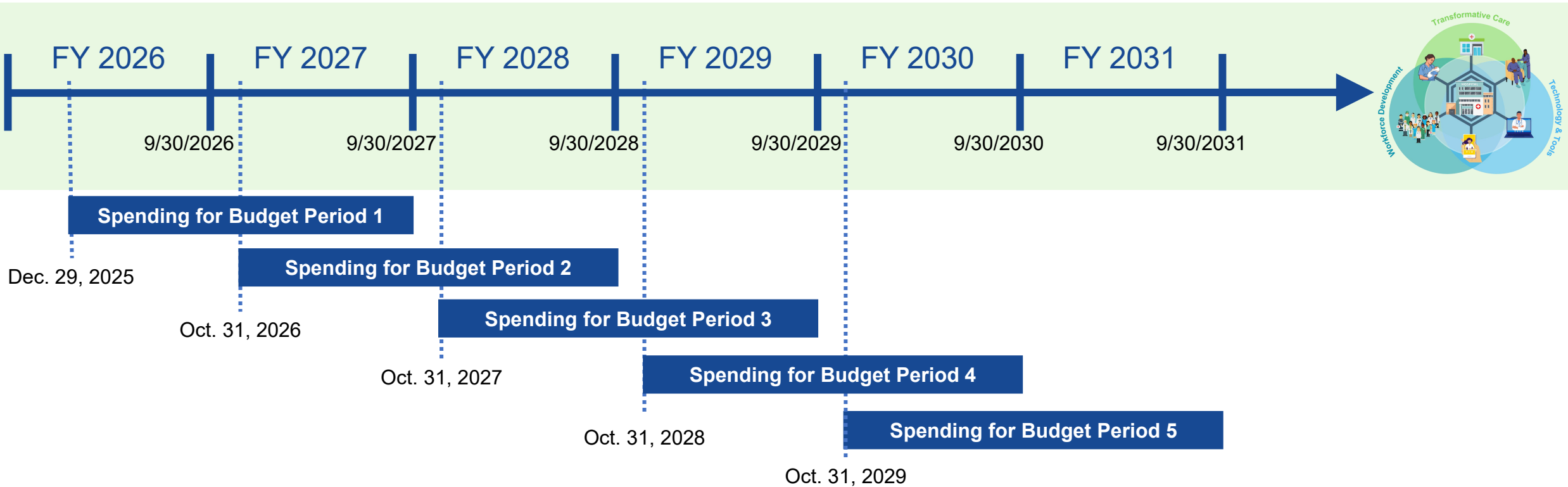
Innovative
care

*restrictions apply

RHTP Budget Period Timeline

Program funding is appropriated from FY2026 through FY2030

- The Federal Fiscal Year's funding aligns with the five Budget Periods. Funds for each period need to be obligated by the end of the Budget Period.
- Expenditures obligated during each Budget Period may extend to the end of the following Federal Fiscal Year, as shown below.



Overview of CMS RHTP Award Process

- California received the third-highest FY 2026 award amount under the CMS Rural Health Transformation Program
- **\$233,639,308** for Budget Period 1 (Jan – Oct 2026) of the RHTP

On Nov 4
Application
submitted

On Dec 29
California
awarded
\$233.6M

On Jan 30
HCAI submitted
budget revision
to CMS

On March 31
CMS approved
budget revision

Summer
Request for
Applications
(RFAs) released

Summer-Fall
Application Reviews
and award
announcements
(subject to CMS approval)

California Rural Health Transformation



The California Rural Health Transformation (CalRHT) program vision is a **connected, resilient rural health system** in which every rural Californian can access timely, person-centered primary, maternal, specialty, chronic condition, and behavioral health care close to home, **supported by a sustainable workforce, modern technology and data infrastructure.**

The program will develop regional coordination and partnerships, apply evidence-based care, deploy tools that work in low resource settings, and align sustainable payment to fund local readiness and health care services .

Stakeholder Engagement

In just over 8 weeks through the application process, HCAI heard from over **1600** stakeholders about priorities for strengthening California's rural healthcare.

Stakeholders included Hospitals, including Critical Access; Federally Qualified Health Centers; Indian Health Service, Tribal Health, or Urban Indian Health Organizations; Mental Health Programs; Academic Centers; Health Plans; Community Based Organizations; County and Local Governments and Departments.

Stakeholders mentioned the following priorities:

- **Access to care (77%)**
- **Financial stability of rural hospitals (66%)**
- **Telehealth and remote monitoring (63%)**
- Infrastructure modernization (54%)
- Workforce recruitment and retention (51%)
- Training and education (49%)
- Innovation pilots (40%)
- Culturally responsive care (34%)
- Community health workers and doulas (23%)
- Maternal and child health (20%)
- Tribal health partnerships (14%)

CalRHT Initiative: Transformative Care Model

Establish regional hub-and-spoke collaboratives

To create rural primary and maternity regional care collaboratives and partnerships that elevate rural health care by connecting regional hospital system hubs with local healthcare facilities and other providers to improve access to local, high-quality care.

Implement evidence-based models

Through Extension for Community Healthcare Outcomes (Project ECHO), OB Nest, California Child and Adolescent Mental Health Access Portal (CAL-Map), and Perinatal Psychiatry Access Program (PPAP) to extend workforce and improve quality of care.

Leverage technology

That will expand telehealth primary, maternity, specialty and chronic condition care; eConsults; remote patient self-monitoring; and other tailored technology solutions.

Expand and support rural workforce capacity

To reduce rural bypass by offering obstetrics training fellowships, supporting development of CHWs, LVNs, doulas, midwives, and other allied health professions.



Transformative Payments: What Has Been Established

Purpose within TCM

- Targeted, time-limited investments in select rural hospitals critical to access
- Designed to support participation in feasible TCM components
- Focused on improving utilization, access, and long-term sustainability

What these payments are NOT

- Not reimbursement for billable services
- Not ongoing operating subsidies
- Not duplicative of other funding streams

Core design principle

- Milestone-based, conditional funding tied to measurable transformation



CalRHT Initiative: Technology & Tools

Infrastructure enhancement

To help rural health entities meet baseline technology needs, tailored to facilitate reliable connection to and participation in regional care collaboratives and partnerships.

Technical assistance

Through the Rural Technical Assistance Center which provides expert advice and hands-on support to transformative care model participants and other grantees.

Grant funding

To support providers in a variety of needs including modernizing electronic health records, practice management, screening tools, population health systems, telehealth and e-Consult platforms, optimizing interoperability, and improving revenue cycle management.

Expand regional collaboration

By leveraging the Rural Technical Assistance Center to coordinate efforts to reduce technology costs and staffing burden for rural providers and create opportunities for group purchasing and shared management of tech services.

Technology & tools to empower consumers

By promoting development of accessible digital tools and technologies and educating consumers on self-monitoring and reporting.



CaRHT Initiative: Workforce Development



Develop a rural workforce mapping and planning tool

To identify demand trends and pinpoint county-level capacity gaps across clinicians and team-based care support roles in primary care and maternal health.

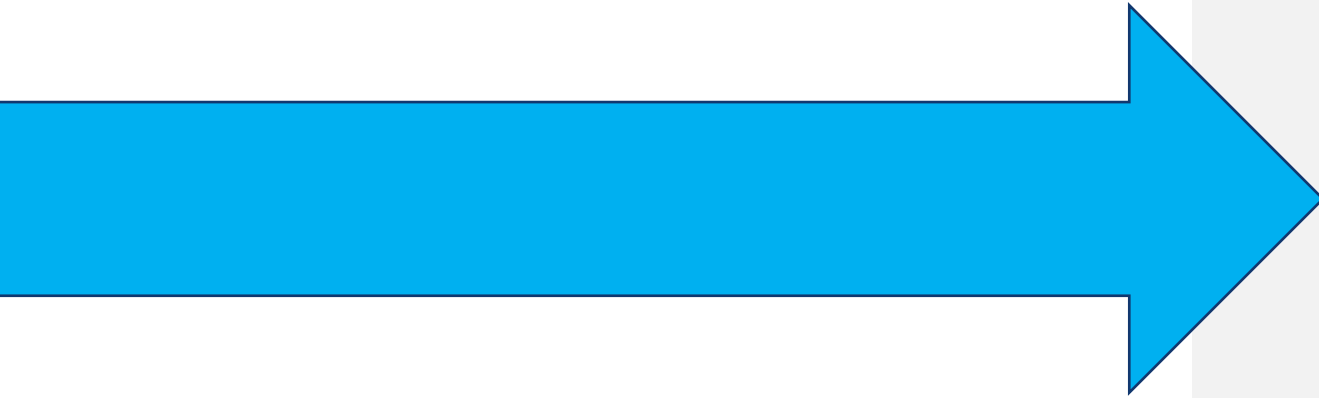
Strengthen training pathways and clinical placement networks

To create a sustainable pipeline of rural students pursuing careers in health professions and build pathways for them to train, stay, and practice in rural communities.

Retention and relocation

To keep existing health workforce in rural communities and make recruitment practical when needed through incentives and wrap around supports that strengthen stability and fit.

Budget Year 1 Initiatives



CalRHT Key Dates



CalRHT Webinars

Spring – Fall 2026

- Webinars will be scheduled to align with launch of new programs



Rural Health Policy Council

Summer 2026

- RHPC council members announced
- First meeting convened



Applications

Summer 2026

- Begin release of Request for Applications



CalRHT Program Grants

Key Dates



Grant Selection

Summer 2026

- CalRHT awardees submitted to CMS for review
- HCAI announcements of CalRHT awardee selection



CMS Review

Summer – Fall 2026

- CMS will approve, amend, or deny CalRHT subaward decisions
- CMS authorizes fund use for grant subawards



Grant Funding

Summer – Fall 2026

- CalRHT begins disbursement of grants
- Awardees must use funds by September 30, 2027

Request for Applications (RFAs)

CalRHT is committed to supporting your success in applying for funding. We are actively working to finalize and announce exact dates for each RFA opening this summer.

RFAs will be rolled out individually starting in late-June / early-July 2026. All RFAs will:



Allow for at least 30 days to submit applications.



Awards will begin to be announced in Summer–Fall 2026.



All awards require CMS review.



Current awards are limited to Year 1 budget funds.



Quarterly and annual reporting to HCAI will be required for all awardees.

Rural Health Policy Council

HCAI will convene a broad group of stakeholders representative of California's rural health providers, including rural hospitals, clinics, physicians, clinicians, health plans, patient representatives, Tribal leaders, and state departments.

RHPC will be a public forum for rural health stakeholders to discuss the CalRHT program implementation, including:



Addressing policy questions from the CalRHT team



Proposing ideas for CalRHT consideration



Providing subject matter expertise

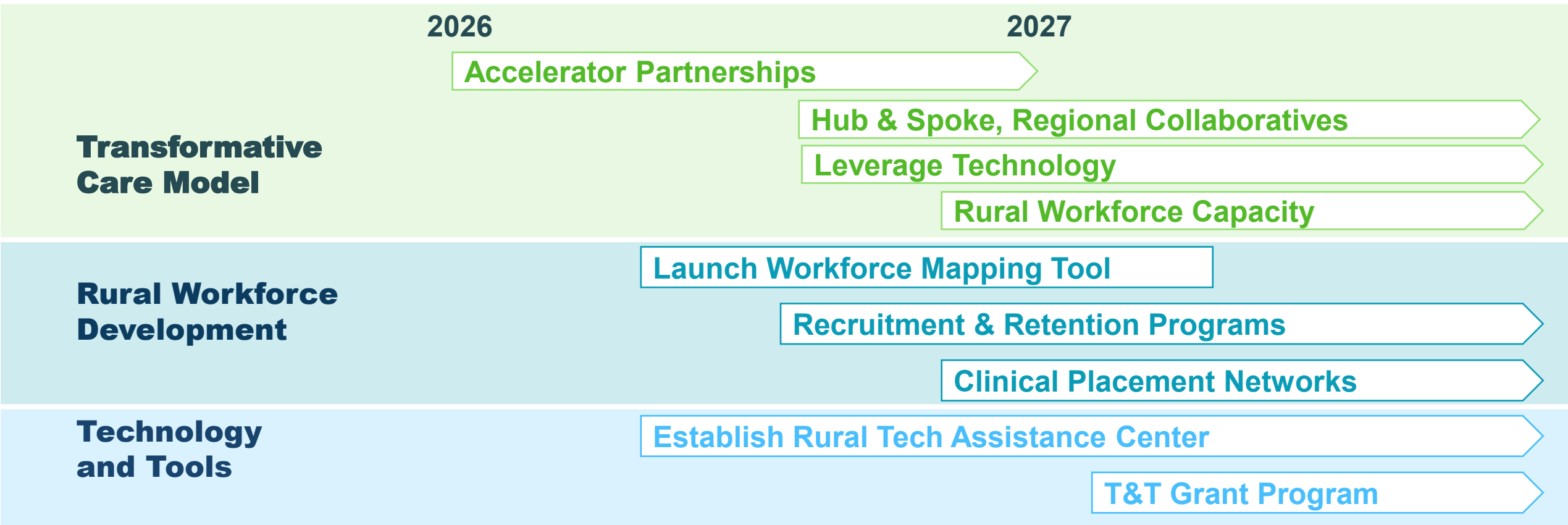


Helping communicate CalRHT policy to the community



Sharing program performance feedback from rural California communities

CalRHT Program Timeline



Questions?

For CalRHT program updates, FAQs and more, visit the

[HCAI CalRHT webpage](#)

OR

Please email
CalRHT@hcai.ca.gov

Ongoing Support



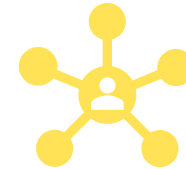
TECHNOLOGY ADVANCES

The technology continues to advance and the evidence base grows.



CONNECT WITH US

Shoot us an email, join us for a webinar, give us a call, visit the website, or even better, sign up for our newsletter to ensure you are informed on updates, events and opportunities.



OUR RESOURCES

DIY kind of person? We have numerous resources and a reliable network to get your answer. We're federally funded so our information and resources are at your disposal.



THE CTRC

CTRC is committed to advancing equitable and sustainable access to our communities via the adoption of digital health services.

INTRODUCING THE 2026 AI COHORT

VIRTUAL SERIES WITH AVAILABLE OFFICE HOURS | NO-COST REGISTRATION



SESSION 1

June 24 | 1:00 pm
CTRC Summit

Trust Is Built, Not Bought: Making AI Safe and Defensible in Clinical Care

SESSION 2

June 24 | 3:00 pm
CTRC Summit

Clinical AI That Delivers: Evidence, Workflow Fit, and What Actually Changes Care

SESSION 3

June 24 | 4:00 pm
CTRC Summit

From Promise to Practice: Preparing Care Teams for Generative AI in the Next Year

SESSION 4

July 29 | 2:00pm

AI Scribes in Action: Real-World Lessons from a Practicing Physician
Yimdriuska Magan, MD, MPH

SESSION 5

Coming Soon

Harnessing AI to Advance Maternal Health Outcomes
Melissa Wong, MD, MHDS

SESSION 6

Coming Soon

From Policy to Practice: Designing an Effective AI Governance Strategy
Maria Liu, Healthcare VP

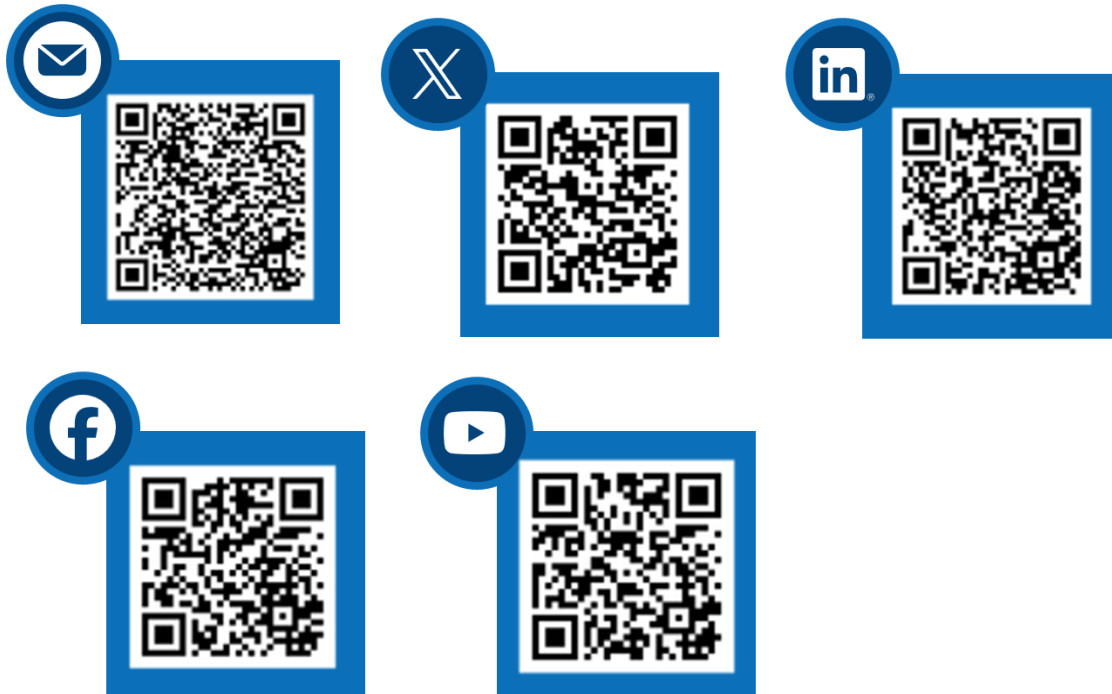
Scan the QR Code or visit HealthcareAIbootcamp.org



We value your input!
Please take a quick minute to complete our exit poll.

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Thank You



www.caltrc.org