



The Federal Office of Rural Health Policy (FORHP), within the Health Resources and Services Administration (HRSA), improves rural health care through two major areas of activity. FORHP advises the Secretary of Health and Human Services on the impact various policies may have on the delivery of health care to residents of rural communities. FORHP also administers a variety of state and community-driven grant programs that support local health providers and patients while also working with HHS and other Federal partners to focus on the health needs of rural residents.

**FORHP has provided billions of dollars in funding to increase health care access, strengthen health networks, and focus on care quality improvements for Critical Access Hospitals and small rural hospitals over its 36-year history.** FORHP is also supporting HRSA's goal to achieve health equity by funding efforts to strengthen health care delivery systems, improve maternal health, reduce the morbidity and mortality associated with substance use disorder, and provide COVID-19 pandemic relief in rural communities.

By increasing access to quality services and training a more skilled health workforce, these investments from FORHP have allowed communities across the country to improve health outcomes and address health disparities.

### ADDRESSING BEHAVIORAL HEALTH

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**FUNDING:** More than \$127 million through the [Rural Communities Opioid Response Program \(RCORP\)](#)

■ **Goals:**

- To strengthen capacity of rural communities to plan for, and provide, behavioral health care services, inclusive of mental health and opioid and substance use disorder (OUD/SUD) prevention, treatment, and recovery services
- To build the evidence base for behavioral health interventions in rural settings

■ **Program Activities:**

- \$65 million for three-year projects to implement OUD prevention, treatment, and recovery services in rural communities and regions
- \$29 million to improve the quality and availability of behavioral health care services in rural communities
- \$10 million for three-year projects to create new medication-assisted treatment access sites in rural communities
- \$10 million for three Rural Centers of Excellence on SUD to continue to support the identification and dissemination of best practices related to OUD/SUD, recovery housing, and synthetic opioids
- \$13 million to evaluate the impact of RCORP initiative and provide technical assistance to RCORP grant recipients

■ **Impact:**

- Since FY 2018, more than \$500 million has been invested in RCORP and funding has reached approximately 1,800 counties across 47 states and two territories
- FY 2020 RCORP grant recipients provided direct SUD prevention, treatment, and recovery services to 2,079,373 rural residents, and ensured that 70,869 rural individuals received medication-assisted treatment for SUD.

### EXPANDING RURAL HEALTH WORKFORCE

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The need for a well-trained, quality health workforce that reflects the diversity of communities in which health professionals practice is greater than ever. Yet the historical challenges in recruiting and retaining primary care providers, nurses and other essential health care workers has been exacerbated by the COVID-19 pandemic. Over

the past year, HRSA has made historic investments in the health workforce to begin to turn the tide and better support the health workforce and promote health equity.

**Through the National Health Service Corps program HRSA supports more than 7,400 providers serving in a rural community, which includes:**

- Nearly 3,100 rural primary care clinicians
- More than 3,700 rural mental/behavioral health clinicians
- More than 600 rural dental clinicians

**HRSA-supported SUD Providers**

- More than 7,200 (this figure includes awardees of the Substance Use Disorder Treatment and Recovery Loan Repayment Program (STAR LRP), with 2,666, or more than 1 in 3, providing care in rural communities.

**HRSA-supported Nurse Corps Providers**

- More than 3,900, Rural Nurse Corps - More than 800 (or 21% percent of)

**FUNDING: \$9.7 million through the third cohort of the Rural Residency Planning and Development (RRPD) Program**

- **Program Activities:** Expand the physician workforce in rural areas through the development of new rural residency programs or Rural Track Programs in family medicine, internal medicine, general surgery, preventive medicine, psychiatry, or obstetrics and gynecology.

■ **Impact:**

- Through achieving accreditation under the RRPD program, 22 grant recipients participated in the 2022 National Resident Matching Program and matriculated 94 residents for the 2022 Academic Year.
- Ten RRPD grant recipients achieved program accreditation for over 100 residency positions in family medicine, psychiatry, and general surgery.

**FUNDING: \$47.2 million through the [Rural Public Health Workforce Training Network \(RPHWTN\) Program](#) to 32 awardees**

- **Program Activities:** Expand public health capacity by supporting culturally competent and inclusive healthcare job development, training, and placement in rural and tribal communities through the establishment of formal networks addressing the four (4) workforce training tracks.

**FUNDING: \$2.3 million through the Delta Region Rural Health Workforce Training Program**

- **Program Activities:** Enhance healthcare delivery by creating training programs for administrative support professionals in rural healthcare facilities in the Delta Region

**FUNDING: \$2.5 million through the Rural Behavioral Health Workforce Centers**

- **Program Activities:** Awarded 4 awards (including 1 new) to improve behavioral health care services in rural areas through educating and training future and current health professionals in treatment and interventions for behavioral health disorders, including substance use disorder (SUD).

**FUNDING: \$1 million through the Rural Telementoring Training Center Program**

- **Program Activities:** Train academic medical centers and other centers of excellence to create telementoring learning for providers in rural and underserved areas
- **Impact:** Release of the telementoring quality measure toolkit to aid in the evaluation of telementoring programs

## **RESPONDING TO COVID-19**

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Building off the valuable partnership with Rural Health Clinics developed during the pandemic, [HRSA partnered with the CDC](#) to distribute COVID-19 vaccines directly to RHCs to increase the availability of these vaccines and other supplies in rural communities at no cost, including the COVID-19 bivalent booster.

- **Equitable Distribution of COVID-19 Vaccines, Testing Supplies, and Therapeutics**
  - There are over 1,800 RHCs participating in the COVID-19 distribution programs.

- [The Rural Health Clinic Vaccine Distribution Program](#) distributes COVID-19 vaccines directly to RHCs to increase the availability of COVID-19 vaccines in rural communities.
- [The Rural Health Clinic COVID-19 Testing Supply Program](#) provides RHCs with direct shipments of COVID-19 testing supplies, such as at-home self-test kits and point of care testing supplies.
- [The Rural Health Clinic COVID-19 Therapeutics Program](#) provides access to increase the overall availability of COVID-19 therapeutics in rural communities and especially to those disproportionately affected by COVID-19.

■ **Impact:**

- Participating RHCs conducted 11,388,063 COVID-19 tests from October 2021 through September 2022
- Participating hospitals reported conducting almost 9 million COVID-19 tests from January 2021 to September 2022.
- **FORHP-funded COVID-19 Program Activities:**
  - \$460 million to support approximately 4,600 Rural Health Clinics (RHCs) for COVID-19 testing and mitigation activities. Funding distributed in June 2021 and available until December 2022.
  - \$398 million to support approximately 1,540 small rural hospitals for COVID-19 testing and mitigation activities. Funding was distributed in July 2021 and is available until December 2022.
- **COVID-19 Funding Outside of FORHP**
  - Support ARP payment allocation for **\$8.5 billion for health care providers serving rural residents.**

## SUPPORTING RURAL HOSPITALS

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### FUNDING: \$49.4 million to support small rural hospitals across the country with funding to states

- **Program Activities:**
  - \$28.7 million through the Medicare Rural Hospital Flexibility (Flex) Program to work with states to assist Critical Access Hospitals (CAHs) improve financial and quality performance.
  - Within Flex, there is a \$2 million initiative for six states to improve quality rural emergency medical service agencies over two years.

■ **Impact:**

- Through the Flex Medicare Beneficiary Quality Improvement Project, 61.1% of CAHs improved in at least one quality measure.
- **Program Activities:**
  - \$20.7 million through the Small Rural Hospital Improvement Grant Program to enable states to support small, rural hospitals through investments in hardware, software, and training.

### FUNDING: \$12.3 million to build capacity for small, rural hospitals to provide high quality, efficient care

- **Program Activities:** Help hospitals and improve health care delivery located within the Mississippi Delta Region, as well as hospitals nationally to strengthen operations

### FUNDING: \$5 million to support technical assistance around the new Rural Emergency Hospital (REH) provider type

- **Program Activities:** Help hospitals explore REH to see if it's a feasible option for a rural community that cannot support inpatient services.

## INCREASING ACCESS TO CARE

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HRSA works to increase access to high quality healthcare for rural populations through grants to community-based providers

- **Federally Qualified Health Centers**
  - More than 30 million people rely on HRSA-funded health centers for care, including 1 in 5 rural residents

### FUNDING: \$79 million through [Rural Health Outreach programs](#) to increase access to high quality health care and expand the delivery of services in rural areas

■ **Impact:**

- Outreach grants provided direct services to over 400,000 unique individuals in the most recent data collection year (2020)

- Over 50% of grantees reported health status improvement in at least one clinical measure

**FUNDING: \$24.5 million to improve access to quality care in the Mississippi Delta Region**

- **Program Activities:** \$12.5 million through the Delta States Rural Development Network Program to provide direct health care services and technical assistance to address health disparities in rural Delta communities
- **Program Activities:** \$10.7 million as cited above to the Delta Region Community Health Systems Development Program
- **Program Activities:** \$2.3 million to the Delta Region Rural Health Workforce Training Program

**FUNDING: \$11.5 million through the Black Lung Clinics Program**

- **Program Activities:** Reduce the morbidity and mortality of active and retired coal miners associated with occupationally related lung disease through the delivery of quality medical, outreach, educational, and benefits counseling services; includes \$125,000 in funding for the Black Lung Center for Excellence Program

**FUNDING: \$2.1 million to increase capacity and improve access to quality care in the Norther Border Regional Commission (NBRC) area**

- **Program Activities:** \$1.36 million to help underserved rural NBRC communities identify and better address their health care needs
- **Program Activities:** \$760,000 to improve behavioral health care workforce education and training

**FUNDING: \$10.5 million through the Rural Maternity and Obstetrics Management Strategies (RMOMS) Program**

- **Program Activities:** Through collaboration with the Maternal Child Health Bureau, improve maternal obstetrics care in rural communities

**FUNDING: \$1.8 million through the Radiation Exposure Screening and Education Program**

- **Program Activities:** Develop and support screening and education for individuals affected by uranium mining

**SUPPORTING RURAL RESEARCH, POLICY ANALYSIS, AND INFORMATION DISSEMINATION**

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**FUNDING: \$7.4 million the [Rural Health Research Program](#)**

- **Program Activities:** Support policy-oriented health services research to increase the amount of publicly available, high quality, rural focused research
  - HRSA continues to track access to care, rural hospital financial viability, and [rural hospital closures](#).
- **Impact:**
  - 77 rural research products were released in FY 2022, and 25 published in peer-reviewed journals.

**FUNDING: \$11 million to the [50 State Offices of Rural Health](#)**

- **Program Activities:** To link communities with state and federal resources, funding, and information.

**RESOURCES**

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- [Federal Office of Rural Health Policy](#)
- [Federal Office of Rural Health Policy Funding Opportunities](#)
- [Rural Health Information Hub](#)
- [Rural Health Research Gateway](#)
- [FORHP Rural Eligibility](#)
- [HRSA Data Warehouse for Rural Health Investments and Grants](#)