

Healthy Hometowns

Iowa's Rural Health Transformation Program

November 7, 2025



Health and
Human Services

Healthy Hometowns



Hometown Connections

Centers of Excellence
Best and Brightest
School-Based
Health Hubs



Combat Cancer: Prevent and Treat

Increased Screening Access
U of Iowa Cancer Analyses
Cancer Hubs
Radon Testing and Mitigation



Communities of Care

Co-Location Projects
Coordinated Service Provision
Chronic Disease Prevention
Teledentistry Equipment



Health Information Exchange

Vendor Contract
Provider Expansion
RHT Initiative Connections



EMS Community Care Mobile

ImageTrend QI Dashboards
OB and Neonatal Transport
Mobile Integrated Health Assessment

Goals



Iowans will be able to get health care within their rural communities at the most appropriate locations for type and level of care thanks to support from newly developed partnerships, more rural primary care physicians and specialists, and upgraded equipment.



Iowans living in rural areas will have improved health outcomes with similar rates of morbidity and premature mortality to those living in Iowa's more populous areas.



Iowa will invest in the development and utilization of innovative technology and data infrastructures to support sustainable care options close to home, seamless care partnerships, and data sharing throughout the state.

Performance Objectives

Significant reduction in ED hospital visits for ambulatory care sensitive conditions (ACSCs) in rural areas.

Increase in the number of rural residents receiving care locally through new or expanded service lines.

Increase provider to population ratios in rural Iowa.

Increase in the number of telehealth consultations delivered to rural residents.

Increase in the number of rural providers or facilities participating in HIE with active data exchange.

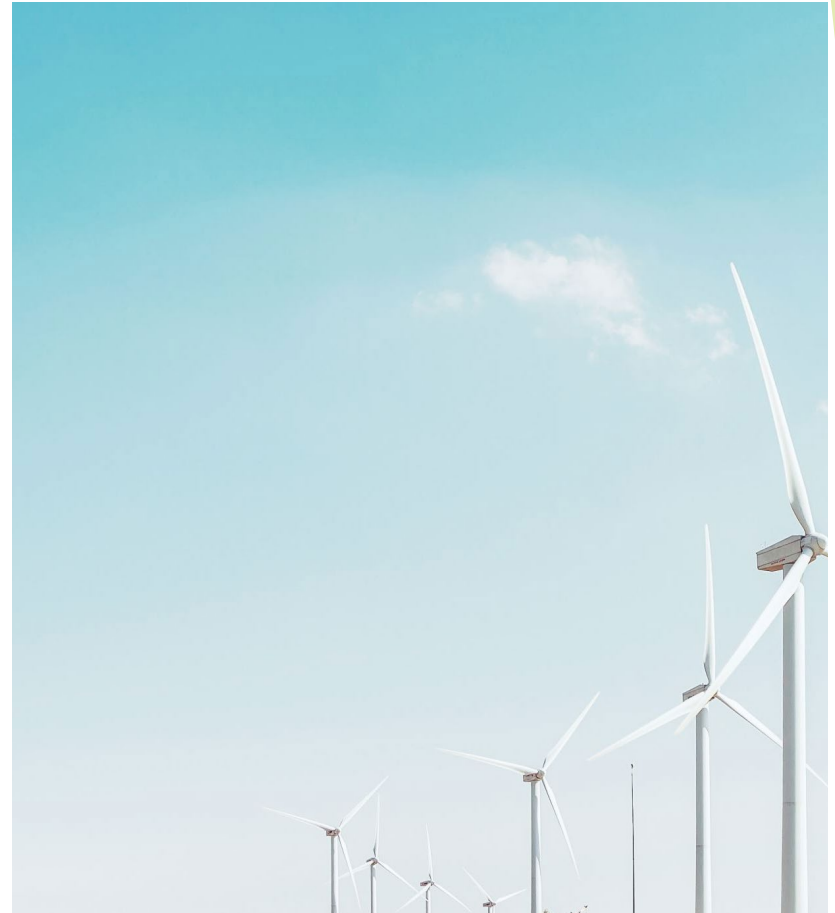
Strategic Goals Alignment

- ▶ Make Rural America Healthy Again – develop new and support existing access points for care
- ▶ Sustainable Access – Allow rural health providers to be long-term access points
- ▶ Workforce Development – Recruitment and retention, support practicing at top of license
- ▶ Innovative Care – Innovative models of care
- ▶ Tech Innovation – foster innovative technologies



Initiative Based Factors

- Population Health Clinical Infrastructure
- Health and lifestyle
- Rural Provider Strategic Partnerships
- EMS
- Talent Recruitment
- Individuals Dually Eligible for Medicare and Medicaid
- Remote Care Services
- Data Infrastructure
- Consumer Facing Technology



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Hometown Connections

Amend existing Centers of Excellence Contracts Up to 10 new Centers of Excellence Contracts

Formalized referral agreements, community investment strategies, enhanced outreach, integration of wrap-around social services

Increase coordination among existing rural community providers

Eligible services: maternal/child health, cancer, cardiovascular health, mental/behavioral health, chronic disease prevention and management

Hometown Connections

Health Hubs Technical Assistance Provider

Partnership building, agreement negotiation, payment model development, business planning

Assessing needs, personalized technical assistance to providers, drafting legal agreements, stakeholder engagement

Help rural facilities navigate grant application process

Hometown Connections

Best and Brightest – Provider Recruitment

One time recruitment and retention incentives

Relocation assistance and bonuses

5-year service commitment

No non-compete agreements allowed

208 total expected awards over 5 years

Best and Brightest – Equipment Installation

Procure and install advanced medical technologies

Expecting approx. \$3.32 million per award

53 total expected awards over 5 years

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Health Hubs

Substantial start up funds for large scale service delivery change

Workforce, Equipment, Telehealth Integration

Agreements – provider service agreements, telehealth service agreements, shared quality metrics, evaluations of needs

Infrastructure upgrades and equipment

Talent recruitment, training

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Heavy subsidization of start-up costs can free up internal cash flows to allow rural facilities to expand capacity, right size care delivery

Eligible services: maternal/child health, cancer, cardiovascular health, mental/behavioral health, chronic disease prevention and management

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School-based Services Strategy

Contracts for hospitals, rural health centers, FQHCs, local public health, community health centers to establish partnerships with rural schools for services.

Staffing, mobile health units, telehealth, training, medical equipment, supplies, tools for parental engagement

Incentives for school participation – health equipment
Must incorporate nutrition and physical activity

Combat Cancer: Prevent and Treat

Combat Cancer: Prevent and Treat

Cancer-Specific Health Hubs

Substantial start up funds for large scale service delivery change

Workforce, Equipment, Telehealth Integration

Agreements – provider service agreements, telehealth service agreements, shared quality metrics, evaluations of needs

Infrastructure upgrades and equipment

Talent recruitment, training

Combat Cancer: Prevent and Treat

Cancer Health Hub Technical Assistance Provider

Partnership building, agreement negotiation, payment model development, business planning

Assessing needs, personalized technical assistance to providers, drafting legal agreements, stakeholder engagement

Help rural facilities navigate grant application process

Combat Cancer: Prevent and Treat

Cancer Screenings and Prevention

Radon testing (30,000/yr), home mitigation (500/yr),
professional certification

FIT testing and colonoscopies, dermatoscopes

Appointment scheduling and screening test ordering
via tablets in libraries and pharmacies

Combat Cancer: Prevent and Treat

University of Iowa Cancer Partnership

Research and assessment

I-CAN Expansion

County Cluster Intensive Cancer Prevention and
Control

Communities of Care

Communities of Care

Co-location Technical Assistance Provider

Partnership building, agreement negotiation, payment model development, business planning

Up to 7 Co-location Sites with CHWs and Chronic Disease Programming

Local public health, FQHC, hospitals, behavioral health, substance use, pharmacists, oral health providers, aging and disability, social care

Communities of Care

Up to 7 Co-location Sites with CHWs and Chronic Disease Programming

Shared technology infrastructure (e.g., telehealth equipment, scheduling systems, data-sharing tools)

Consumer-facing tools (e.g., blood pressure monitors, glucose monitors, fitness trackers)

Workforce costs, care for uninsured, preventive screening, patient engagement incentives, transportation vouchers

Partnership development and coordination, stakeholder convenings, outreach materials, sustainability planning

Health Information Exchange

Community Care Mobile

Community Care Mobile

EMS System Assessment

Up to 7 Mobile Integrated Health Pilot Projects

Home visits and community-based services using EMS providers and existing vehicles

Post-discharge follow-up, acute care, preventive services, chronic disease

Up to 3 high-risk OB and neonatal transport project

Telehealth capabilities in existing transport

Specialty training

Questions

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