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Quick Guide for State Policymakers

Leveraging the Rural Health Transformation Program for Behavioral Health

The **Rural Health Transformation Program (RHTP)** provides states **\$10 billion annually from FY25–FY30** to support rural health systems, which face greater shortages of mental health providers and higher barriers to care. State applications (due Nov. 5th) can prioritize behavioral health by investing in four key areas:

1. Build and Retain the Behavioral Health Workforce

- **Attract and retain** psychiatrists, psychologists, psychiatric nurses, social workers, MFTs, and LPCs through loan repayment, salary and housing supports, and travel stipends.
- Develop **paraprofessional pathways** (e.g., child behavioral health specialists, crisis response specialists, peer support specialists).
- Provide **startup or bridge funding** for behavioral health staff salaries until patient panels are sustainable.
- **Fund training initiatives** (e.g., Project ECHO, REACH) that upskill the existing workforce in managing mental health and substance use conditions.
- Cover participation in **interstate licensure compacts** to expand cross-state practice.

2. Expand Crisis Response and Continuity of Care

- Support **911–988 coordination** so people in crisis receive care, not jail.
- Equip crisis systems with **technology** (tablets, apps, dispatch platforms).
- Create non-law enforcement **transportation options** for people in crisis.
- Develop **crisis receiving and stabilization facilities** to relieve ERs and rural hospitals.
- Fund **intensive follow-up and care coordination** after discharge.

3. Strengthen Services and Supports

- Pilot or expand **Mobile Response & Stabilization Services (MRSS)**, which provide crisis response and in-home supports for 6-8 weeks.
- Scale **school tele-mental health programs** to support students and families.
- Adopt **suicide prevention programs**, like *Hope Squad*, which trains students to recognize signs of distress and connect peers to help.
- Invest in **intensive team-based mental health interventions** (Multi-System Therapy, Assertive Community Treatment, Treatment Foster Care Oregon) that address complex needs.
- Expand Medication-Assisted Treatment (MAT) through **“hub-and-spoke” networks** that provide addiction specialists to support rural providers.
- Support **telepsychiatry and tele-mental health for long-term care facilities** and homebound seniors.
- Adopt evidence-based programs to **treat late-life depression** in home or community settings, like the PEARLS program.

4. Modernize Rural Behavioral Health Systems

- Upgrade **EHRs, AI tools, and telehealth platforms** to cut admin burdens and improve care.
- Launch **integrated models of care** like the Collaborative Care Model (CoCM) and Certified Community Behavioral Health Clinics (CCBHCs).
- Fund **secure telehealth and tele-supervision platforms** for rural providers.
- Close **broadband gaps** through targeted infrastructure investments.

Act Now

Applications are due **Nov. 5th**. Lawmakers can ask their Governor and agencies to **ensure behavioral health is front and center** in state RHTP applications.