

#	Initiative Name		
1	Rural Community Hubs for Chronic Care Innovations		
Narrative			
Chronic Care Innovation (CCi): Rural Community Hubs, Community Health Workers (CHW), and Data and Technology Strategy. Over the past 7 months, KYRHT made significant progress on all three components of the Chronic Care Innovation (CCi) Initiative. Teams were stood up, governance established, and the CCI initiative was launched with stakeholders engaged through meetings and advisory groups. The Foundation for a Healthy Kentucky was selected as the convening organization to lead the development of Rural Community Hubs. The first three pilot regions were selected: Purchase, Lake Cumberland, and Big Sandy Area Development Districts (ADDs). RFAs were published and RCH Lead Organizations were chosen for each ADD. Partnerships were established with 3 approved CHW training organizations to expand access to foundational CHW training in rural communities. A partnership was established with the Kentucky Area Health Education Center (AHEC) Regional Centers to expand pipeline programming for rural students pursuing health careers aligned with KyRHT programming, including the CHW profession. The Data and Technology Strategy saw the selection of a technology partner and launch of the Beta site for Vitality Signs, KYRHT’s digital front door. Two state-based systems were selected for community care coordination: KHIE for clinical information, kynect resources for social services information. Initial enhancements to these state-based systems began with business requirements gathering. The KYRHT approach to developing knowledge and insight infrastructure was refined to engage and educate stakeholders through a Learning Health System Collaborative rather than a presumptive list of capabilities. Discussions are occurring with the CDC Foundation and CMS regarding the possibility of creating a national Learning Health System Collaborative to explore these same issues with other interested states. Geographic Reach – see map on page 26 of Master Initiative Attachments PDF.			
Number of People Served			
Please provide the number of people served			0
Metrics			
#	Metric	Current Value	As of Date
1	Number of Area Development Districts (ADDs) with a Rural Community Hub (RCH).	0	6/30/2026
2	Number of committed partners in each RCH	0	6/30/2026
3	Number of chronic disease or rural health initiatives launched locally via RCHs with multi-stakeholder engagement	0	6/30/2026
4	Count of individuals impacted by an RCH-enabled program or intervention.	0	6/30/2026
5	Number of identified partner systems for which a standards-based, active exchange connection using modern data standards (for example, HL7 v2, API, etc.) has been established and validated.	0	6/30/2026
6	Percentage of referrals closed within 5 days using a care coordination tool	25.99%	6/30/2026
7	Percentage of certified CHWs who have completed state-approved specialized trainings.	0	6/30/2026

Stage 0 Planning			
Checkpoint		Yes/No	Attachment(s)
0.1	Establish governance	Yes	0.1 Evidentiary Documentation section in the Master I
0.2	Submit project plan to CMS	Yes	See uploaded Project Plan
Stage 1 Project Preparation			
Checkpoint		Yes/No	Attachment(s)
1.1	CMS approval of project plan	Yes	CMS email dated 8/22/2026 (not included)
1.2	Launch initiative	Yes	Initiative 1 CCI Checkpoint 1.2 Evidentiary Documentation section in the Master Initiative Attachments PDF
Stage 2 Early Implementation			
Checkpoint		Yes/No	Attachment(s)
2.1	Continue initiative activities	Yes	See CCI tab in uploaded Project Plan
2.2	Achieve at least one post-launch milestone	Yes	See CCI tab in uploaded Project Plan
2.3	Establish metric reporting methodology	No	
2.4	Submit updated project plan to CMS	No	
Stage 3 Midway Implementation			
Checkpoint		Yes/No	Attachment(s)
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 Preparation for Completion			
Checkpoint		Yes/No	Attachment(s)
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 Full Implementation			
Checkpoint		Yes/No	Attachment(s)
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	

#	Initiative Name		
2	PoWERing Rural Maternal and Infant Health: Community-Based Teams		
Narrative			
Over the past 7 months, KYRHT made significant progress advancing the PoWER Initiative. The initiative team, governance structures, and operating cadences have been established and key positions, including the PoWER Initiative Lead, PoWER Coordinator, and Lead Doula, have been onboarded. Stakeholders have been regularly engaged, including through the launch of Advisory, Champions, and Kentucky Doulas Workgroups. PoWER care model. Implementation of the PoWER integrated care model are underway. Phase 1 PoWER pilot organizations have been selected: Mountain Comprehensive Health Center (Harlan and Letcher Counties, Eastern Kentucky) and Baptist Deaconess Madisonville (Hopkins County, Western Kentucky). The PoWER Playbook, which will include PoWER care model design and document pilot site and program operations, is under development. The PoWER model has been expanded to include prenatal oral health testing, fetal ultrasonography, and maternal fetal medicine telehealth consultation. Electronic tools for pregnancy notification and perinatal risk assessment are in draft form and have been reviewed by an advisory workgroup. Workforce expansion. The Kentucky Perinatal Quality Collaborative was selected to co-develop a doula workforce expansion and strengthening strategy. Local health departments in nineteen counties have been identified for HANDS expansion, with partnership planning underway to support future expansion. The initiative designed a program to strengthen rural hospitals’ readiness for obstetrical emergencies in maternity care deserts. Requirements for a perinatal specialized certificate for Community Health Workers have been defined and training partner selection is underway. Workforce development partners have been selected (Area Health Education Centers through University of Kentucky and University of Louisville), and the first wave of pipeline activities have been defined. Geographic Reach – see map on page 41 of Master Initiative Attachments PDF.			
Number of People Served			
Please provide the number of people served			0
Metrics			
#	Metric	Current Value	As of Date
1	Percentage of pregnant patients in a PoWER site who complete a first prenatal visit within the first trimester	0	6/30/2026
2	Percentage of pregnant patients in a PoWER site who accept HANDS enrollment and complete a home visit	0	6/30/2026
3	Percentage of pregnant patients in a PoWER site who complete 8 antepartum visits (including telehealth)	0	6/30/2026
4	Percentage of pregnant patients in a PoWER site who complete 1 postpartum visit (including telehealth)	0	6/30/2026
5	Percentage of pregnant patients a PoWER site who are screened for behavioral health needs with a validated tool	0	6/30/2026
6	Percentage of postpartum patients in a PoWER site who are screened for behavioral health needs with a validated tool	0	6/30/2026

7	Percentage of pregnant patients in a PoWER site with positive behavioral screens referred to appropriate services	0	6/30/2006
8	Percentage of postpartum patients in a PoWER site with positive behavioral screens referred to appropriate services	0	6/30/2026
9	Percentage of infants with mothers in a PoWER site who have had 6 or more well-child visits in the first 15 months of life	0	6/30/2026

Stage 0 Planning			
Checkpoint		Yes/No	Attachment(s)
Stage 1 Project Preparation			
Checkpoint		Yes/No	Attachment(s)
	CMS approval of project plan	Yes	CMS email dated 8/22/2026 (not included)
	Launch initiative	Yes	Initiative 2 PoWER Checkpoint 1.2 Evidentiary Documentation section in the Master Initiative Attachments PDF
Stage 2 Early Implementation			
Checkpoint		Yes/No	Attachment(s)
Stage 3 Midway Implementation			
Checkpoint		Yes/No	Attachment(s)
Stage 4 Preparation for Completion			
Checkpoint		Yes/No	Attachment(s)
Stage 5 Full Implementation			
Checkpoint		Yes/No	Attachment(s)

#	Initiative Name		
Narrative			
Over the past 7 months, KYRHT made significant progress on the Rapid Response to Recovery (R3) Initiative. The team was stood up, governance established, and the R3 initiative was launched with stakeholders engaged through meetings and advisory groups. EmPATH. Two hospitals in Eastern Kentucky have been selected to implement EmPATH Units: Appalachian Regional Healthcare in Hazard and UK King’s Daughter in Ashland. (Contracts are pending signature and CMS approval of minor renovations.) The EmPATH Consortium was launched in July, bringing together key stakeholders for dedicated learning and workgroup development. Two Technologies to Improve the Behavioral Health Care Continuum. 1. Telebehavioral Hub A readiness assessment with Community Mental Health Centers (CMHCs) and Primary Care Providers shaped the delivery model and clinical service providers were awarded in July. Contracts with centralized hub partners (UK, UofL, and KPCA) and regional spoke partners (4 behavioral health providers) are completed or pending final signatures. 2. 988. A technology platform for 988 Crisis Response was selected and is in the final stages of contracting. CMHCs & CBCS. The first round of CMHCs (8 out of 14) were selected to participate in support services for Community-Based Crisis Support (CBCS) Programs. CMHCs were also selected for funding as key discharge and bridge-care partners to EmPATH units. Workforce. Workforce development partners have been selected (Area Health Education Centers through UK and UofL) and the first wave of pipeline activities have been defined. Geographic Reach – see map on page 54 of Master Initiative Attachments PDF.			
Number of People Served			
Metrics			
#	Metric	Current Value	As of Date
1	Number of behavioral health runs responded to by a trained EMS agency	0	6/30/2026
2	# of adult ED visits primarily for behavioral disorders	36,362	6/30/2025
3	Percentage of patients seen at EmPATH units who complete their first follow up appointment at a Community Mental Health Clinic within 7 days.	0	6/30/2026
4	Number of individuals enrolled in telehealth and collaborative care services delivered in primary care settings for behavioral health	0	6/30/2026
Stage 0 Planning			
Checkpoint		Yes/No	Attachment(s)
0.1	Establish governance	Yes	it 0.1 Evidentiary Documentation section in the Master Initiative Attachments PDF
0.2	Submit project plan to CMS	Yes	
Stage 1 Project Preparation			
Checkpoint		Yes/No	Attachment(s)
1.1	CMS approval of project plan	Yes	CMS email dated 8/22/2026 (not included)
1.2	Launch initiative	Yes	Initiative 3 R3 Checkpoint 1.2 Evidentiary Documentation section in the Master Initiative Attachments PDF
Stage 2 Early Implementation			
Checkpoint		Yes/No	Attachment(s)

2.1	Continue initiative activities	Yes	See R3 tab in uploaded Project Plan
2.2	Achieve at least one post-launch milestone	Yes	See R3 tab in uploaded Project Plan
2.3	Establish metric reporting methodology	No	
2.4	Submit updated project plan to CMS	No	
Stage 3 Midway Implementation			
Checkpoint		Yes/No	Attachment(s)
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 Preparation for Completion			
Checkpoint		Yes/No	Attachment(s)
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 Full Implementation			
Checkpoint		Yes/No	Attachment(s)
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	

#	Initiative Name		
4	Rooted in Health: Kentucky Rural Dental Access Program		
Narrative			
Over the past 7 months, KyRht made significant progress on the Rooted in Health (RiH) Initiative. The team was stood up, governance established, and the RiH initiative was launched with stakeholders engaged through meetings and an advisory group. Workforce. Expansion sites have been identified for new or expanded accredited dental hygiene programs (Campbellsville University-new, Ky State University-new, University of Ky [UK]-Hazard campus-new, and Bluegrass Community and Technical College-expanded), dental assistant training (Ky Primary Care Association [KPCA] and Kentucky Dental Association [KDA]), and advanced dental extraction training for rural dentists (KPCA and UK). Workforce development partners have been selected (Area Health Education Centers through UK and UofL) and the first wave of pipeline activities have been defined. Teledental Hubs. All three of Kentucky’s dental schools have agreed to participate in teledental hubs (UK, University of Louisville, and University of Pikeville). Public Health Dental Hygiene (PHDH) Services. New PHDH teams were selected and are standing up at 4 health departments: Bracken County, Greenup County, Ky River District, and Pennyryle District. Ten health departments with existing PHDH teams opted to expand their scope of practice to include teledentistry and Long-Term Care settings. Mobile Units for Definitive Dental Care Services. Seven applicants were selected to provide definitive mobile dental services and are in the final stages of contracting. Geographic Reach – see map on page 65 of Master Initiative Attachments PDF.			
Number of People Served			
Please provide the number of people served			0
Metrics			
#	Metric	Current Value	As of Date
1	Percent of ADDs with access to RHT-funded surgical extraction training for rural general dentists	0	6/30/2026
2	Percent of ADDs where ED providers have access to RIH rural outreach resources	0	6/30/2026
3	# of virtual consults with dentists and/or specialists through Medicaid	9	6/30/2025
4	Percent of ADDs with access to RHT-funded mobile dental units	0	6/30/2026
5	Percent of ADDs with access to RHT-funded dental assitant training	0	6/30/2026
6	Percent of RHT-funded rural outreach organizations (Public Health Dental Hygienist (PHDH) teams and mobile dental health units) with a Community Health Worker (CHW) position	0	6/30/2026
7	Number of metrics displayed in Rooted in Health (RIH) Data Dashboard to track oral health providers and resources	0	6/30/2026

Stage 0 Planning			
Checkpoint		Yes/No	Attachment(s)
0.1	Establish governance	Yes	ht 0.1 Evidentiary Documentation section in the Master In
0.2	Submit project plan to CMS	Yes	See uploaded Project Plan
Stage 1 Project Preparation			
Checkpoint		Yes/No	Attachment(s)
1.1	CMS approval of project plan	Yes	CMS email dated 8/22/2026 (not included)
1.2	Launch initiative	Yes	Initiative 4 RiH Checkpoint 1.2 Evidentiary Documentation section in the Master Initiative Attachments PDF
Stage 2 Early Implementation			
Checkpoint		Yes/No	Attachment(s)
2.1	Continue initiative activities	Yes	See RiH tab in uploaded Project Plan
2.2	Achieve at least one post-launch milestone	Yes	See RiH tab in uploaded Project Plan
2.3	Establish metric reporting methodology	No	
2.4	Submit updated project plan to CMS	No	
Stage 3 Midway Implementation			
Checkpoint		Yes/No	Attachment(s)
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 Preparation for Completion			
Checkpoint		Yes/No	Attachment(s)
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 Full Implementation			
Checkpoint		Yes/No	Attachment(s)
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	

#	Initiative Name		
5	From Crisis to Care: Integrated EMS and Trauma Response		
Narrative			
Over the past 7 months, KyRht made significant progress on the Crisis to Care (CTC) Initiative. The team was stood up, governance established, and the CTC initiative was launched with stakeholders engaged through meetings and advisory groups. Workforce. Thirty-five EMS agencies were selected for EMS Education & Training Modernization – 25 for fixed site equipment and 10 for mobile equipment. Workforce development partners have been selected (Area Health Education Centers through UK and UofL) and the first wave of pipeline activities have been defined. Community Paramedicine Programs. Sixteen EMS agencies were selected to establish or expand Community Paramedicine Programs. Treat No Transport (TNT) and Transport to Alternative Destination (TAD). Three EMS agencies were selected to pilot TNT/TAD programs. A consultant group was chosen to begin developing the roadmap to operationalize the Regional Medical Operations Coordination Centers (RMOCC). Business requirements for EMS integrated care communication technology to support RMOCCs were collected and a technology partner was selected for statewide implementation. Special Needs Tracking and Awareness Response System (STARS). A lead organization was selected to pilot the STARS program for children with special health care needs in Kentucky. Geographic Reach – see map on page 78 of Master Initiative Attachments PDF.			
Number of People Served			
Please provide the number of people served			0
Metrics			
#	Metric	Current Value	As of Date
1	Annual number of newly certified EMTs, AEMTs, paramedics	1,453	6/30/2025
2	Number of Training and Educational Institutions (TEIs) that increase their TEI-level using RHT funds	EMS TEI 2: 25 agencies EMS TEI 3: 82 agencies EMS TEI 4: 22 agencies	6/30/2025
3	Number of EMS agencies with approved protocols for Treat No Transport (TNT) or Triage to an Alternate Destination (TAD) processes	0	6/30/2026
4	Number of consultation calls routed through the Regional Medical Operation Coordination Centers (RMOCC)	0	6/30/2026
5	Number of calls that are routed through to an alternative destination	0	6/30/2026
6	Number of agencies providing community paramedicine to provide post-response and referral case management	10	6/30/2025
7	Number of patient contacts by Community Paramedicine Program	0	6/30/2026

8	Number of EMS agencies and hospitals utilizing statewide EMS-Integrated Care Communication technology	0	6/30/2026
9	Utilization of the Treat No Transport (TNT) Medicaid billing code (A0998)	110	6/30/2025

Stage 0 Planning			
Checkpoint		Yes/No	Attachment(s)
Stage 1 Project Preparation			
Checkpoint		Yes/No	Attachment(s)
	CMS approval of project plan	Yes	CMS email dated 8/22/2026 (not included)
	Launch initiative	Yes	Initiative 5 CTC Checkpoint 1.2 Evidentiary Documentation section in the Master Initiative Attachments PDF
Stage 2 Early Implementation			
Checkpoint		Yes/No	Attachment(s)
Stage 3 Midway Implementation			
Checkpoint		Yes/No	Attachment(s)
Stage 4 Preparation for Completion			
Checkpoint		Yes/No	Attachment(s)
Stage 5 Full Implementation			
Checkpoint		Yes/No	Attachment(s)