



Rural Healthcare Provider Transition Project (RHPTP) Project Eligibility

With the support of Health Resources Services Administration's [Federal Office of Rural Health Policy \(FORHP\)](#), the National Rural Health Resource Center provides selected small rural hospitals (SRH) and certified rural health clinics (RHC) technical assistance (TA) through The Rural Healthcare Provider Transition Project (RHPTP). This project is designed to help strengthen value-based care (VBC) for healthcare organizations by building recipients' foundation for VBC in efficiency, quality, patient experience, and safety of care.

RHPTP's goal is to guide SRH and certified RHC not currently participating in VBC to prepare for and position their organizations for future participation in alternative payment and care delivery models (APM).

Eligibility Requirements

Small rural hospitals must meet all three eligibility requirements listed below. Rural Health Clinics must be certified as a rural health clinic as described by [CMS](#), and meet the definition of rural, defined in eligibility requirement number two:

1. "eligible small rural hospital" is defined as a non-federal, short-term general acute care hospital that: (i) is located in a rural area as defined in 42 U.S.C. 1395ww(d) and (ii) has 49 available beds or less, as reported on the hospital's most recently filed Medicare Cost Report;
2. "rural area" is defined as either: (1) located outside of a Metropolitan Statistical Area (MSA); (2) located within a rural census tract of a MSA, as determined under the Goldsmith Modification or the Rural



Urban Commuting Areas (RUCAs) or (3) is being treated as if being located in a rural area pursuant to 42 U.S.C. 1395ww (d)(8)(E); and

3. Eligible hospitals may be for-profit or not-for-profit, including faith-based. Hospitals in U.S. territories as well as tribally operated hospitals under Titles I and V of P.L. 93-638 are eligible to the extent that such hospitals meet the above criteria.

Applicant organizations must:

- **Not** be currently participating in an [Advanced Alternative Payment Model](#) (Advanced [APM](#)) as defined by [CMS](#), or the Community Health Access and Rural Transformation ([CHART](#)) Model;
- **Be** financially stable. Applicants should consider their past and present performance as compared to national benchmarks on variables such as key performance indicators (days cash on hand, total margin, operating margin, patient revenue, days in net accounts receivable, payor mix, etc.) as well as non-measurable variables such as leadership stability and a succession planning for retiring primary care providers. Resources to assist you in determining include [Prediction of Financial Distress among Rural Hospitals](#), [CAHMPAS](#), and [Small Rural Hospital and Clinic Finance 101 – An Update](#).
- **Be** interested and motivated to become part of an APM
- **If a SRH, be meeting** quality data reporting requirements of Inpatient Quality Reporting (IQR), Outpatient Quality Reporting (OQR), or Medicare Beneficiary Quality Improvement Project (MBQIP)
- **Not** be a current participant in the Delta Region Community Health Systems Development (DRCHSD) Program, Vulnerable Rural Hospital Project, a 2019-2020 participant in Small Rural Hospital Transition (SRHT) Project or any program that is duplicative in services.

SRHs and certified RHCs are encouraged to apply under a single application.