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About the Conference

As approximately 20% of United States residents live in rural communities, healthcare leaders face the urgent challenge of addressing persistent disparities in access, outcomes and resources. Rural populations experience higher mortality rates than their urban counterparts, with only 13 physicians available per 10,000 people compared to 31 in urban areas, and face significant barriers including workforce shortages, limited specialized services, lower income levels and higher uninsured rates that compound health inequities.

Business Research Intelligence Network presents the Rural Healthcare Innovation Summit, bringing together healthcare executives, rural health leaders, nurses, community health professionals and policymakers to explore innovative strategies for transforming rural healthcare delivery and improving outcomes for the nearly 60 million Americans living in rural areas.

The summit aims to equip healthcare organizations with the knowledge and tools needed to develop sustainable rural health programs that improve access to care, enhance clinical outcomes and drive health equity. Our speakers will share practical strategies for overcoming workforce shortages, implementing telehealth and mobile health solutions, building community partnerships and navigating the unique regulatory and reimbursement landscape of rural healthcare.

Join us as we chart the course for the future of rural healthcare delivery and explore innovative approaches to meeting the growing demand for high-quality healthcare services in America's rural communities. This is an essential event for healthcare leaders who are serious about closing the rural-urban health gap and staying ahead of industry trends.

Agenda

Day One – Thursday, June 11, 2026

7:15am – 8:00am
Conference Registration & Networking Breakfast

8:00am – 8:15am
Chairperson's Opening Remarks

8:15am – 9:00am

The State of Rural Healthcare: Understanding Disparities, Barriers and Opportunities

Rural healthcare faces unique challenges that distinguish it from urban healthcare delivery, including geographic isolation, lower population density, workforce shortages and socioeconomic barriers that create significant health disparities. This session examines the current landscape of rural healthcare including key demographic characteristics, the scope of health disparities affecting rural populations, factors contributing to higher mortality rates in rural areas, and the persistent gap in access to primary care and specialized services. Learn about the economic and social barriers rural residents face including lower income levels averaging $45,000 per capita versus $53,000 in urban areas, higher poverty rates particularly among children, and elevated rates of uninsured individuals that limit healthcare access and create financial strain on rural healthcare facilities.

Dr. Oralia Dominic
Founder and President
National Institute of Rural and Minority Health (NIRMH)

9:00am – 9:45am

Addressing Workforce Shortages: Recruitment, Retention and Rural Pipeline Development

The most critical challenge facing rural healthcare is the severe shortage of physicians, nurses, specialists and other healthcare professionals willing to practice in rural communities. This session examines root causes of workforce shortages including student debt load, spousal satisfaction, medical education, and the isolation that many rural practitioners experience. Learn creative strategies for recruiting healthcare professionals to rural areas including loan repayment programs, grassroots career development, and quality-of-life benefits. Discover approaches for retaining qualified staff through mentorship programs, isolation reduction, continuing education access, and creating positive workplace cultures.

Beth O'Connor, M. Ed.
Executive Director
Virginia Rural Health Association

9:45am – 10:15am

Networking & Refreshments Break

10:15am – 11:00am

Telehealth Solutions: Expanding Access to Specialized Care in Rural Communities

Telehealth has emerged as one of the most promising solutions for addressing rural healthcare access barriers, enabling rural patients to receive specialized care without traveling long distances and supporting rural healthcare providers through virtual consultations and decision support. This session explores successful telehealth implementation models including remote patient monitoring for chronic disease management, virtual specialty consultations that connect rural patients with urban specialists, telepsychiatry and telebehavioral health services addressing critical mental health gaps, and store-and-forward telemedicine for dermatology and radiology services. Learn practical strategies for overcoming common telehealth barriers including limited broadband infrastructure in rural areas, technology literacy challenges among older rural populations, reimbursement complexities across state lines and payer policies, and regulatory

requirements that vary by state and specialty.

Ron Stewart
Rural Health Advisor
State of Nebraska

11:00am – 11:45am
Artificial Intelligence, Aging, and the Future of Rural Healthcare: From Workforce Shortages to Continuous Care
Rural communities are aging faster than urban areas while facing severe healthcare workforce shortages. Older adults in rural regions often encounter long travel distances for care, limited specialty services, and fewer opportunities for support. At the same time, healthcare organizations must expand access to care without increasing already strained clinical workforces. Artificial intelligence is emerging as a practical tool to extend healthcare capacity, improve patient engagement, and support older adults living independently. This session explores how AI tools—including conversational agents, remote monitoring, and digital companions—can strengthen rural healthcare systems and improve care for older adults.

Karen L. Fortuna, PhD, LICSW
Assistant Professor of Community and Family Medicine and of Health Policy and Clinical Practice
Research Health Science Specialist, Veterans Affairs, White River Junction Healthcare System

11:45am – 12:30pm
How Managed Care Organizations Use Value Added Benefits to Improve Rural Health Outcomes
Health insurers invest millions in value-added services that go beyond what traditional Medicaid covers. These are designed to improve health outcomes through addressing Social Drivers of Health, improving access to care with enhanced virtual services, as well as enhanced transportation to both medical and non-medical use cases.
Some examples from Oklahoma include fresh produce delivery to members' homes, YMCA memberships, rides to job interviews, diaper club, rewards for healthy behaviors such as annual checkups, as well as standing up specialty telehealth vendors in critical rural access shortage areas like maternal health with Pomelo. Additionally, MCO's can provide microgrants to augment existing programs to include rural hospital tele-stroke and school telehealth.
By investing in members' non-medical barriers as well as increasing the capacity of services in rural areas, we are able to drive better health outcomes.

Douglas Olivo
Director, Rural Health and Community Engagement
Oklahoma Complete Health

12:30pm – 1:30pm
Luncheon

1:30pm – 2:15pm
Grow Your Own: Strengthening the Rural Health Workforce
NEW Health University's "Grow Your Own" workforce program, launched in 2021, helps address rural healthcare shortages by training local community members for careers in healthcare, finance, and IT. The program combines paid pre-apprenticeships, coursework, and on-the-job experience at clinics, creating clear career pathways while strengthening rural health systems.

The innovative model has received national recognition, including a Certificate of Congressional Recognition for Workforce Innovation, White House recognition in 2023, and features in Washington State's Rural Health Workforce Grow Your Own Toolkit, while also being presented at national forums such as the National Association of Community Health Centers and the National Rural Health Association.

Jacquelin Maycumber
Chief Strategy Officer
National Rural Health Association WA

2:15pm – 3:15pm
Panel: Innovative Models Transforming Rural Healthcare Delivery
This panel brings together leaders who are implementing innovative care delivery models specifically designed to address rural healthcare challenges and improve outcomes. Panelists will discuss diverse approaches including critical access hospital optimization strategies, rural health clinic expansion and sustainability, federally qualified health center growth in underserved areas, hospital-at-home programs adapted for rural populations, and integrated care models that combine primary care, behavioral health and social services. The discussion will address financial sustainability challenges, quality outcome achievements, patient and community acceptance, workforce implications and scalability considerations. Panelists will share lessons learned from implementation, strategies for overcoming rural-specific barriers, and advice for organizations considering similar innovative models in their rural service areas.

Douglas Olivo
Director, Rural Health and Community Engagement
Oklahoma Complete Health

JW Randolph, MPH
Deputy Commissioner for Health Infrastructure
TN Department of Health

Beth O'Connor, M. Ed.
Executive Director
Virginia Rural Health Association

3:15pm – 3:45pm
Networking & Refreshments Break

3:45pm – 4:30pm
Community Partnerships and Population Health Strategies
Improving health outcomes in rural communities requires moving beyond traditional healthcare delivery to address social determinants of health through partnerships with local organizations, schools, faith communities, businesses and government agencies. This session explores how healthcare organizations are building effective community partnerships to screen for and address social needs including food insecurity, housing instability, transportation barriers and social isolation.

Elise Bur
Director

Center For Rural Health at Northern Michigan University

4:30pm – 5:15pm
Strengthening Rural Care Through Clinically Integrated Networks: Innovative Models for Local Access and Better Outcomes
Rural health systems face unique challenges—limited specialty access, transportation barriers, small patient panels, and increasing clinical complexity. This session highlights how Clinically Integrated Networks (CINs) and community partnerships expand capacity for rural providers while keeping care local. Through real-world examples, we will explore behavioral health consult models, Project ECHO, care management, shared-risk structures, and scalable quality-improvement resources. Attendees will learn how shared expertise, data, and coordinated support can remove barriers, elevate quality, and sustain independent community-based practices. Discover actionable tools and partnerships that support both patients and providers in rural communities.

Mallory Yoder, MS
Assistant Director, Growth & Product Strategy
Vanderbilt Health

5:15pm
End of Day One

Day Two – Friday, June 12, 2026

7:15am – 8:00am
Networking Breakfast

8:00am – 8:15am
Chairperson's Remarks

8:15am – 9:00am
A Local Look at Rural Health Transformation
Communities across the country are leveraging federal and state programs to move beyond fragmented interventions and toward coordinated, statewide strategies that align funding, workforce, and care delivery. These initiatives focus on optimizing rural healthcare infrastructure, strengthening emergency and last-mile care teams, and building modern health-tech systems that connect communities to care.
Paired with these investments are workforce pipelines designed to grow local talent and sustain rural health systems long after initial funding ends. Rather than imposing a top-down redesign, this approach is community-anchored, empowering counties, hospitals, and local partners to lead transformation.
The result is a scalable, outcomes-driven model that aims to improve access, lower costs, and make rural communities not just viable—but thriving.

JW Randolph, MPH
Deputy Commissioner for Health Infrastructure
TN Department of Health

9:00am – 9:45am

Emergency and Trauma Care in Rural Settings
Rural residents face significantly longer emergency response times and transport distances to trauma centers, contributing to higher mortality rates from traumatic injuries, strokes, heart attacks and other time-sensitive medical emergencies. This session explores strategies for improving rural emergency and trauma care, and how rural hospitals are enhancing emergency department capabilities, implementing telehealth consultations with specialists during critical moments, and building regional trauma systems that coordinate care across facilities to ensure optimal outcomes despite geographic challenges.

Kristina Thomas DNP, RN, NE-BC, NYSAFE
Director of Emergency, Urgent Care, and Behavioral Health Services
St. Mary's Healthcare

9:45am – 10:15am
Networking & Refreshments Break

10:15am – 11:00am
Rural Health Equity: Serving Vulnerable and Underserved Populations
Rural communities include diverse populations with unique healthcare needs including low-income individuals, racial and ethnic minorities, migrant and seasonal agricultural workers, Native American communities, older adults and people with disabilities who may face compounded barriers to healthcare access. This session explores strategies for advancing health equity in rural settings, and how healthcare organizations are collecting and analyzing health equity data, engaging community members in program design, and measuring progress toward reducing disparities.

Jonathan Dayton, DrPH(c), MS, CNE, NREMT
Maryland Rural Health Association, CEO
Community Relations Specialist, Maryland Wellness

11:00am – 11:45am
Chronic Disease Management and Prevention in Rural Populations
Rural residents experience higher rates of chronic diseases including diabetes, heart disease, chronic obstructive pulmonary disease and obesity, often compounded by limited access to specialty care, health education resources and preventive services. This session examines approaches to chronic disease management in rural settings. Learn how rural health organizations are partnering with public health departments, cooperative extension services and community organizations to implement population-level interventions.

Sharlene D. Newman, Ph.D.
Executive Director
Alabama Life Research Institute

11:45am – 12:30pm
Critical Access Hospitals and Rural Hospital Sustainability: Financial Strategies and Quality Excellence
Critical access hospitals serve as essential safety nets for rural communities, yet many face significant financial pressures that threaten their viability including low patient volumes, high uninsured rates, reimbursement challenges and difficulty recruiting specialty providers. This

session examines the critical access hospital designation and its cost-based reimbursement model, along with strategies rural hospitals are using to achieve financial sustainability while maintaining quality care. Learn approaches for optimizing revenue cycle management in low-volume settings, implementing cost reduction strategies without compromising patient safety, developing profitable service lines appropriate for rural markets, and building effective referral networks with urban tertiary care centers.

Sherri Young, DO, MBA, FAAFP, DHL
Physician Director WVU Family Medicine Advocacy and Policy Fellowship
WVU Medicine

12:45pm – 2:45pm
Workshop: Staffing Shortages Are a System Condition: Diagnosing & Treating Rural Workforce 'HR Comorbidities™.
This topic recognizes that rural healthcare organizations are grappling with far more than just recruitment challenges. They're navigating a complex system with a limited local candidate pool, ongoing clinician maldistribution, and the added hurdles of professional isolation, restricted training capacity, and burnout-prone work environments. Rather than simply adding another incentive program, this workshop is designed for leaders seeking a repeatable, high-impact approach to stabilize staffing, build a sustainable rural pipeline, and reduce unnecessary turnover.

By applying an HR Comorbidities™ framework, which uses system-wide diagnostics, participants will learn to pinpoint the interconnected drivers behind persistent vacancies, such as pipeline constraints, role and scheduling design, supervision and culture, support infrastructure, and community integration. The session will guide leaders in rural settings on how to triage which issues to address first based on potential impact and feasibility.

Rather than compiling an exhaustive list of best practices, attendees will gain a clear diagnostic perspective and leave with a practical "treatment plan" that's tailored for rural realities, enhancing recruitment, retention, and pipeline effectiveness simultaneously.

Here's what attendees can expect to take away and use right away:

- Introduction to a rapid scan diagnostic tool for identifying local root causes of vacancy and turnover;
- a straightforward triage method to prioritize the interventions that will have the fastest impact;
- a 90-day Workforce Stabilization Plan with an emphasis on retaining current staff through improved work design, mentorship, culture, and support;
- targeted pipeline actions to boost rural training-to-hire outcomes, such as clinical placement strategies, education partnerships, and "grow your own" pathways;
- and pragmatic strategies to reduce professional isolation and foster clinician sustainability, including tele-support, peer networks, and greater access to continuing education.

Yolánda L Chase, SHRM-SCP, CPM, CM
Founder & CEO
Intersect Global Leadership Institute™ [A Subsidiary of Diversity Way-Maker® Consulting, LLC]

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