

Rural Health Appropriations

It is crucial that Congress support programs that seek to address growing health care crises in rural America. Relief is needed to address the unique needs of rural America through the FY2026 appropriations bills. Rural health discretionary spending is a relatively small amount but is vitally important for maintaining access to care for individuals living in rural America. NRHA urges Congress to support the following priority requests to significantly improve rural health care access and affordability.

- Devote resources towards struggling rural hospitals. As of February 2025, nearly half of all rural hospitals are operating with negative margins. In the last 15 years, over 180 rural hospitals have either closed or discontinued inpatient care, representing approximately 10% of the nation's rural hospitals. For these communities, the loss of a rural hospital can trigger a downward spiral of economic hardship and community health status.
 - The Medicare Rural Hospital Flexibility (Flex) Grant Program improves hospital-based healthcare access for rural communities through working with Critical Access Hospitals (CAHs), emergency medical service (EMS), clinics, and health professionals. NRHA's request for the Flex line for FY26 is \$75 million.
 - The USDA Rural Hospital Technical Assistance Program is a pilot technical assistance program to improve rural hospitals' financial and operational performance, prevent closures, and strengthen the delivery of healthcare in rural communities. The program provides direct on-the-ground assistance and is flexible enough to meet the varied needs of rural hospitals under operational and financial stress. NRHA's request for FY26 is \$5 million.
- Increase rural physician training through the Rural Residency Planning and Development Program (RRPD). RRPD supports the development of new rural residency programs to address the ongoing workforce shortages faced by rural communities. Since 2019, this program has created 54 new accredited rural residency programs or rural track programs in family medicine, internal medicine, psychiatry, and general surgery and received approval for approximately 683 new residency positions in rural areas. NRHA urges Congress to increase funding to \$14 million for this essential program.
- Expand rural behavioral health and SUD treatments. The opioid and mental health crisis has hit rural communities hard. Barriers to treatment and prevention services limit access to care. The Rural Communities Opioid Response Program (RCORP) is a multi-year initiative that addresses barriers to treatment for substance use disorder (SUD), including opioid use disorder (OUD). NRHA urges robust funding for the RCORP programs at \$155 million.
- Invest in Rural Health Care Services. The Rural Health Outreach Services programs support rural, community-driven initiatives that promote improved access to care, enhance care coordination, and foster sustainable solutions for chronic disease prevention and management in rural areas. In FY 2023, over 522,000 individuals received direct services in 345 rural counties through these programs, with 100% of grant recipients demonstrating improvement in one or more clinical measures. For FY26, NRHA requests \$109 million, including funds to establish a Rural Network Initiative to help independent rural hospitals effectively compete in a health care environment in which size and scale are integral to succeed by fostering collaboration and equipping rural hospitals with the resources needed to remain open, expand service lines, and better meet patient needs.
- Support for the Centers for Disease Control and Prevention (CDC) Office of Rural Health (ORH). NRHA worked with Capitol Hill to create the CDC ORH in the FY 2023 appropriations bill. The office enhances implementation of CDC's rural public health portfolio, coordinates efforts across CDC programs, and has developed a strategic plan for rural public health that maps the way forward. NRHA urges Congress to increase funding to \$10 million for implementation of core rural public health functions.

Updated 7/31/2025 www.ruralhealth.us/advocate



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Rural Health Appropriations Requests & Allocations					
Discretionary Funding Program	NRHA FY 2026 Request	President's FY26 Budget	HAC FY 2026 Mark Up	SAC FY 2026 Mark Up	FY 2025 Continuing Resolution
Federal Office of Rural Health Policy Programs					
Rural Health Research & Policy Development	\$12.076M	\$11.076M	TBD	\$11.076M	\$11.076M
Rural Hospital Stabilization Pilot Program	\$15M	\$0	TBD	\$6M	\$4M
Rural Hospital Flexibility Grants	\$75M	\$0	TBD	\$66.27M	\$64.277M
State Offices of Rural Health	\$15M	\$0	TBD	\$13.5M	\$12.5M
Rural Health Care Services Outreach, Network & Quality Improvement Grants Within line: Rural Maternity & Obstetrics Management Strategies Program(s)	\$108.975M \$15M	\$100.975M TBD	TBD	\$103.975M \$13M	\$100.975M \$12M
Rural Residency Planning & Development	\$14M	\$12.7M	TBD	\$14M	\$12.7M
Rural Communities Opioid Response	\$155M	\$145M	TBD	\$145M	\$145M
Critical HRSA Safety Net Programs					
National Health Service Corps	\$160M ⁺ \$790M [~]	\$474M	TBD	\$128.6M ⁺	\$345M ^{+/~}
Area Health Education Centers	\$47M	\$0	TBD	\$47M	\$47M
Nursing Workforce Development	\$320M	TBD	TBD	\$303.472M	\$305.472M
Oral Health Training	\$43.673M	\$0	TBD	\$42.673M	\$41M
Behavioral Health Workforce Development Programs	\$261M	\$89.3M	TBD	\$113M	\$193M
Teaching Health Center GME	\$320M	\$175M			\$164M~
Telehealth	\$48M	\$42M	TBD	\$42.05M	\$42.05M
Community Health Centers	\$1.858B ⁺ \$6.340B [~]	\$6.11B	\$ TBD	\$1.85B+	\$4.26B ^{+/~}
340B Drug Pricing Program/Office of Pharmacy Affairs	\$12.238M	\$12.24M	TBD	\$12.238M	\$12.238M
Се	nters of Diseas	e Control and Pre	evention		
Office of Rural Public Health	\$10M	TBD	TBD	\$5M	\$5M
	USDA Rural De	evelopment Prog	rams		
Rural Hospital Technical Assistance	\$5M	\$0	\$2M	\$2M	\$0
Communities Facilities Loans and Grants	\$62M*	\$14M*	\$1.65B	\$1.9B	\$1.6B
Broadband ReConnect Program	\$112.4M	\$0	\$90.75M	\$35M	\$90M
Rural Partners Network + Discretionary request	\$10M	\$0	\$0	\$0	\$1.5M

⁺ Discretionary request

[~] Current/proposed law mandatory request

^{*} Not including Congressional Directed Spending amounts