



RURAL HEALTH ADVISORY COMMISSION

NEBRASKA OFFICE OF RURAL HEALTH
P.O. BOX 95026 • LINCOLN, NE 68509-5026 • PHONE (402) 471-2337 • FAX (402) 471-0180

DRAFT MINUTES of the

Rural Health Advisory Commission (RHAC)

Friday, March 6, 2026
1:00 p.m. – 3:33 p.m.
NSOB Lower Level Goldenrod Room
301 Centennial Mall South
Lincoln, Nebraska

And Webex

1. Call Meeting to Order; Open Meetings Act and Agenda Posted; Adopt Agenda.

Chairperson Jeffrey Harrison, M.D. called the meeting to order at 1:31 p.m. with the following members present: Makayla Brockhaus, M.D. (remote); April Dexter, N.P.; Jeffrey Harrison, M.D.; Kate Hesser, M.D.; Thomas Janousek, PsyD; Kate Kusek, D.D.S. (remote); Rebecca Schroeder, Ph.D.; Myra Stoney; Timothy Tesmer, M.D.; Jim Ulrich; Roger Wells, PA-C; Diva Wilson, M.D. (remote); Tracy Zamora (remote).

Dr. Harrison announced that the meeting notice had been posted to the DHHS website and sent out via email and USPS on February 20th 2026.* Additionally, the Open Meetings Act and meeting agenda are posted outside the meeting room and on the commission webpage.

Roger Wells, PA-C moved to approve the March 6, 2026, meeting agenda and Kate Hesser, M.D. seconded the motion. Deb Stoltenberg initiated roll call vote. YES: Brockhaus, Dexter, Harrison, Hesser, Janousek, Kusek, Schroeder, Stoney, Tesmer, Ulrich, Wells, Wilson, Zamora. ABSTAIN: None. EXCUSED: None.

Rebecca Schroeder, Ph.D. moved to approve the November 7, 2025 meeting minutes and April Dexter, N.P. seconded the motion. Deb Stoltenberg initiated roll call vote. YES: Brockhaus, Dexter, Harrison, Hesser, Janousek, Kusek, Schroeder, Stoney, Tesmer, Ulrich, Wells, Wilson, Zamora. ABSTAIN: None. EXCUSED: None.

Kate Hesser, M.D. moved to approve the February 13, 2026 meeting minutes and Jim Ulrich seconded the motion. Deb Stoltenberg initiated roll call vote. YES: Brockhaus, Dexter, Harrison, Hesser, Janousek, Kusek, Schroeder, Stoney, Tesmer, Ulrich, Wells, Wilson, Zamora. ABSTAIN: None. EXCUSED: None.

2. Administrative Items

Rachael Wolfe explained that Accountability and Disclosure Forms for the period through December 2025 were due March 2nd and that student loan form 1098s had been completed as usual.

**Sent as usual to: NE Rural Hospital CEOs, NE Certified Rural Health Clinic Directors, NE Local Public Health Departments, NE Community Action Partners, NE Community Health Centers/FQHCs, NE Professional Associations/ Organizations, NE State Senators, the Offices of the Governor and Lt. Governor, and other rural interested parties and groups.*

New members Jim Ulrich, Rural Hospital Administrator (York); and Makayla Brockhaus, M.D., Family Medicine Resident Physician (originally from Creighton) were welcomed. Members due for reappointment in September include Jeffrey Harrison, M.D.; Rebecca Schroeder, PhD.; Diva Wilson, M.D.; and Roger Wells, PA-C.

Members were invited to request additional training on legislative processes or the Open Meetings Act.

3. Rural Health Transformation Program (RHTP) Update

Presenters: Tim Tesmer, M.D.; Sara Morgan

Key points:

- RHTP is a \$50 billion federal initiative; Nebraska was awarded \$218.5 million for Year 1 (of 5). Funds for Year 1 must be obligated by October 30, 2026; expenditures may continue through October 2027.
- Stakeholder participation remains critical
- Advisory regions are being developed.
- Several Requests for Applications (RFAs) have been released; no funds have been disbursed yet.
- RHAC's role is advisory - providing input, raising concerns, and requesting updates.
- Draft RHAC–RHTP operating framework is open for member feedback.
- Clarification provided on obligations, expenditures, and liquidation requirements.
- RFA deadlines vary by initiative; additional RFAs forthcoming.
- Initiative 7 is envisioned as a public/private partnership, led by Medicaid.

Members discussed application processes, sustainability requirements, cross-state collaboration, timelines for obligation, and expectations for future RHAC involvement.

The next RHAC meeting, planned in Kearney during the Rural Health Conference, should include updates on funded projects. Members asked that a Rural Health Transformation Program Update be added as a standing item to the agenda.

4. Office of Rural Health Update (ORH)

Heidi Peirce welcomed newest ORH staff member Edith Titamoh – Primary Care Office (PCO).

Ms. Peirce remarked that the grant application for the federally funded NE State Loan Repayment Program (SLRP) was submitted last year and ORH is anticipating a notice of award this spring. Notice of funding opportunity for ORH grant will arrive soon and will be submitted then.

She then gave an overview of the RHTP Rural Healthcare Workforce Incentive Program (3.1).

Key Points:

- Incentives are available to providers practicing in rural areas (full-time or part-time).
- Proposed Medicaid-patient thresholds are: 25% primary care, 15% behavioral health, 10% dental.
- Telehealth is eligible if a certain percent of services are to rural residents.
- Prioritization planned if applications exceed available funds.
- Four salary tiers (\$15,000–\$75,000 annually - taxable).
- Potentially recruitment bonus - candidates eligible for maximum award if being recruited to a new or additional rural site.
- Flexible employer match of 10%, including monetary or in-kind support.
- Contract period: 5 years; repayment required if the provider leaves rural practice.
- EMS volunteers are eligible.
- Current state loan-repayment participants are not eligible.
- Application expected to open in May.

Discussion included telehealth requirements, Medicaid percentage flexibility, combining Medicaid and uninsured counts, outreach strategies, and measurement issues in various facility types. Members commended staff efforts in building the program.

5. Rural Health Systems and Professional Incentive Act Program

LB 1071 Update

Amendment 2162 was introduced, which would decrease funds by less than the original proposal. This decrease would allow current contracts to continue, and new applications to be funded. The final bill will not likely be passed until late March or early April.

Shortage Area Requests

Nemaha County requested re-assessment as a shortage area for Family Medicine. Upon review by ORH (verified by HPTS), they DO qualify.

Kate Hesser, M.D. moved to approve the designation of Nemaha County as a shortage area for Family Medicine and Roger Wells, PA-C seconded the motion. Deb Stoltenberg initiated roll call vote. YES: Brockhaus, Dexter, Harrison, Hesser, Janousek, Kusek, Schroeder, Stoney, Tesmer, Ulrich, Wells, Wilson, Zamora. ABSTAIN: None. EXCUSED: None.

CRNA Shortage Area Guidelines

At the last meeting, members discussed opening up CRNA shortage area guidelines for discussion. Rachael Wolfe provided members with a map of the current shortage areas including location of CRNAs according to the Health Professions Tracking Service (HPTS), current loan repayment recipients, and new applicants. Members reviewed the map but no further discussion took place.

Budget Update

Fiscal Year 2025-26; July 1, 2025-June 30, 2026 – first year of new biennium:
Total allocation = \$2,180,723

General Funds Obligated FY25-26 (total):

\$1.8 million

New applications will add about \$75,000 to the budget for FY25-26.

General Funds Remaining for FY25-26:

\$367,000 (just under \$300,000 with new applications).

This amount can be carried over.

If the budget decrease proposed by LB1071 goes through as initially written, allocation next year will drop from \$2,180,723 to \$680,723 and existing contracts will need to be cancelled. Additional awards will not be made for at least 2-3 years. If it goes through with AM2162, it would not have the same impact.

Members emphasized contacting state representatives regarding the program's demonstrated success.

6. Review Current Federal & State Legislative Activities Impacting Rural Health

Roger Wells, PA-C reported highlights from a recent national rural health meeting:

- Rural Emergency Hospital (REH) reimbursement and rural hospital viability remain major issues; 60% of Nebraska hospitals currently “in the red.”
- Expects Nebraska’s workforce incentive design to be a national example.
- Healthcare education in Kearney is also a great example of what can be done.
- Coding practices may obscure true patient acuity in rural communities.

7. Public Comment

Michael Dwyer, Arlington, Nebraska, firefighter/EMT, commended Commission members and DHHS staff he's spoken with for their hard work. He raised the issue of sustainability challenges for EMS within RHTP due to reliance on volunteers, lack of billing, difficulty regionalizing, and technology limitations. Discussed LB1069 on EMS billing requirements.

Bob Rauner, M.D., Partnership for Healthy Nebraska, remarked that the best news he'd heard today was "it has to be obligated, not spent by October". He highlighted opportunities in youth fitness, food-as-medicine programs, and community health worker models, stating that the best community health workers speak the community's language and spend time with the community.

Amy Reynoldson, Nebraska Medical Association, discussed Medicaid reimbursement increases under LB527, gaps in loan-repayment availability in frontier areas, and concerns about narrow application windows for RHTP workforce incentives compared to neighboring states.

Members discussed recruiting opportunities and recent progress on crisis stabilization centers statewide.

8. Closed Session

Kate Hesser, M.D. moved to go to closed session for the purpose of review and discussion of accounts receivable, loan repayment program applications, and other confidential information; and for the prevention of needless injury to the reputation of the individuals and April Dexter, N.P. seconded the motion. Deb Stoltenberg initiated roll call vote. YES: Brockhaus, Dexter, Harrison, Hesser, Janousek, Kusek, Schroeder, Stoney, Tesmer, Ulrich, Wells, Wilson, Zamora. ABSTAIN: None. EXCUSED: None.

Jeffrey Harrison, M.D. announced that the Commission would go into Closed Session at 3:15p.m.

9. Open Session

Kate Hesser, M.D. moved to approve the loan repayment applications with estimated loan repayment start dates and loan repayment amounts as indicated or as determined by Office of Rural Health staff, based on issuance of license and/or loan documentation, practice time in the shortage area, and the availability of funds for the state match (see Closed Session Agenda Item 8A) and Kate Kusek, D.D.S. seconded the motion. Deb Stoltenberg initiated roll call vote. YES: Brockhaus, Dexter, Harrison, Hesser, Janousek, Kusek, Schroeder, Stoney, Tesmer, Ulrich, Wilson, Zamora. ABSTAIN: Wells. EXCUSED: None.

