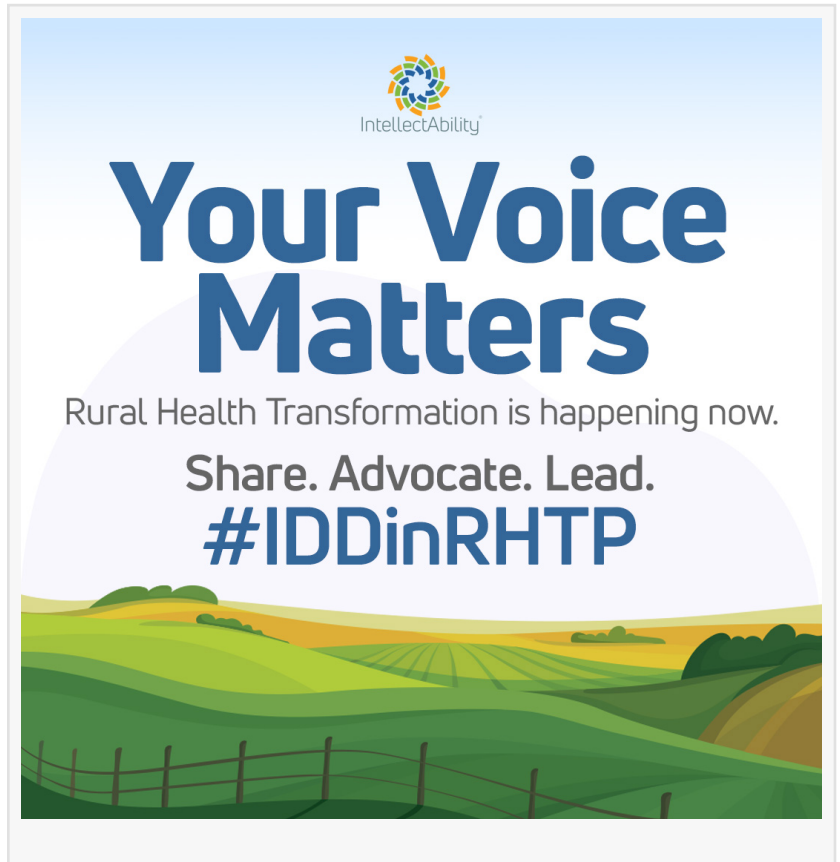


A \$50B Opportunity: Why the Rural Health Transformation Program Must Include People with IDD

States are beginning to allocate \$50B in rural health funding. The question now: will people with intellectual and developmental disabilities be included?

CLEARWATER, FL, UNITED STATES, March 23, 2026 /EINPresswire.com/ -- Across the United States, rural communities face growing healthcare challenges. Hospital closures, provider shortages, limited access to specialists, and transportation barriers have left many residents struggling to receive timely, quality care. In response, the federal government has launched the [Rural Health Transformation Program \(RHTP\)](#), a five-year, \$50 billion investment aimed at redesigning and strengthening rural health systems.



States are now receiving award amounts and beginning to determine how these funds will be used. The decisions made in the coming months will shape rural healthcare delivery for years to come.

But there is an urgent question that must be asked: Will people with intellectual and developmental disabilities (IDD) be intentionally included?

Intellectual and developmental disabilities, often referred to as IDD, include conditions such as autism, Down syndrome, cerebral palsy, and other lifelong disabilities that affect cognitive functioning and adaptive skills. Approximately 2 to 3 percent of the U.S. population lives with IDD.

This population already experiences significant health disparities. Research shows higher rates

of chronic illness, increased emergency room utilization, and reduced life expectancy compared to the general population. Studies have estimated that thousands of people with IDD die each year from preventable or treatable conditions, often due to delayed diagnosis, inadequate provider training, and limited access to appropriate care. Those risks are amplified in rural areas where specialty services may be hours away, and workforce shortages are common.

“The Rural Health Transformation Program presents a once-in-a-generation opportunity,” said Dr. Craig Escudé, physician and nationally recognized expert in IDD health. “If states intentionally include people with intellectual and developmental disabilities in their redesign efforts, we can close longstanding gaps in care. If we fail to consider this population, we risk widening disparities that are already costing lives.”

Julie Foster Hagan, Executive Director for the Rural Health Transformation Program at the Louisiana Department of Health, emphasized the importance of inclusive system design. “Rural health transformation is about building systems that work for the full community,” she said. “When states engage stakeholders across sectors and intentionally consider populations that have historically faced barriers to care, including people with intellectual and developmental disabilities, the result is stronger, more sustainable healthcare delivery for everyone.”

“People with intellectual and developmental disabilities face significant barriers to accessing long-term supports and health care services—and that’s especially true in rural areas. Limited availability of service providers, a lack of reliable transportation options, and even a dearth of access to broadband can all complicate the ability of rural Americans with disabilities to get the care they need,” said Barbara Merrill, chief executive officer for ANCOR. “Including initiatives that support access to home- and community-based support in the rural health transformation program will be vital to ensuring people with IDD and their families can continue to contribute to and thrive in their rural communities.”

Rural providers on the ground are already seeing the consequences of systemic gaps.

“Our organization has been concerned about the status of our rural hospitals for some time now,” said Kristy Dominy, BAS, CESP, DSP, Executive Director and CEO of a rural Georgia support agency. “Funding cuts and financial instability pose a serious risk to our communities and the people we support.”

In southern Georgia, limited access to specialists remains one of the most significant challenges. People with IDD often require providers with specific expertise, yet many specialty services are located hours away. Local clinicians may lack training in complex medical and behavioral conditions, and mental health providers with IDD experience are extremely limited. While telehealth offers some relief, it is not always effective for people who struggle with virtual communication or who require more hands-on support. Transportation barriers further complicate access to care.

“These gaps collectively contribute to unmet healthcare needs and increased strain on families and local systems,” Dominy added. “Rural health transformation efforts must intentionally address specialist access, behavioral health workforce shortages, transportation barriers, and the limitations of telehealth for people with IDD to ensure they are not left behind.”

IntellectAbility, an organization solely focused on improving health outcomes for people with IDD, is actively working with states, provider agencies, and advocacy organizations to ensure that RHTP planning efforts include this often-overlooked population. The organization supports states through health risk identification tools, clinical education, and system-level strategies designed to reduce preventable health risks and improve quality of care.

With states now aware of their first-year award allocations, the window for advocacy is open but narrowing. Healthcare leaders, disability organizations, providers, and families can play a critical role by asking how RHTP funds will address:

- Access to specialty care for people with complex needs
- Workforce training specific to IDD health
- Behavioral health shortages in rural areas
- Transportation barriers
- Limitations of telehealth for certain populations

The Rural Health Transformation Program could reshape rural healthcare delivery for decades. Whether it reduces or reinforces existing disparities for people with intellectual and developmental disabilities depends on the actions taken now.

“When we design rural health systems that work for people with the most complex needs,” Dr. Escudé added, “we create systems that work better for everyone.”

About IntellectAbility

IntellectAbility improves the health, safety, and quality of life for people with intellectual and developmental disabilities through evidence-based tools, training, and person-centered practices. To learn more, visit www.replacingrisk.com.

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