MONTANA STATE UNIVERSITY

Office of Rural Health

Area Health Education Center

State of Rural Health in Montana: Current Landscape and Challenges

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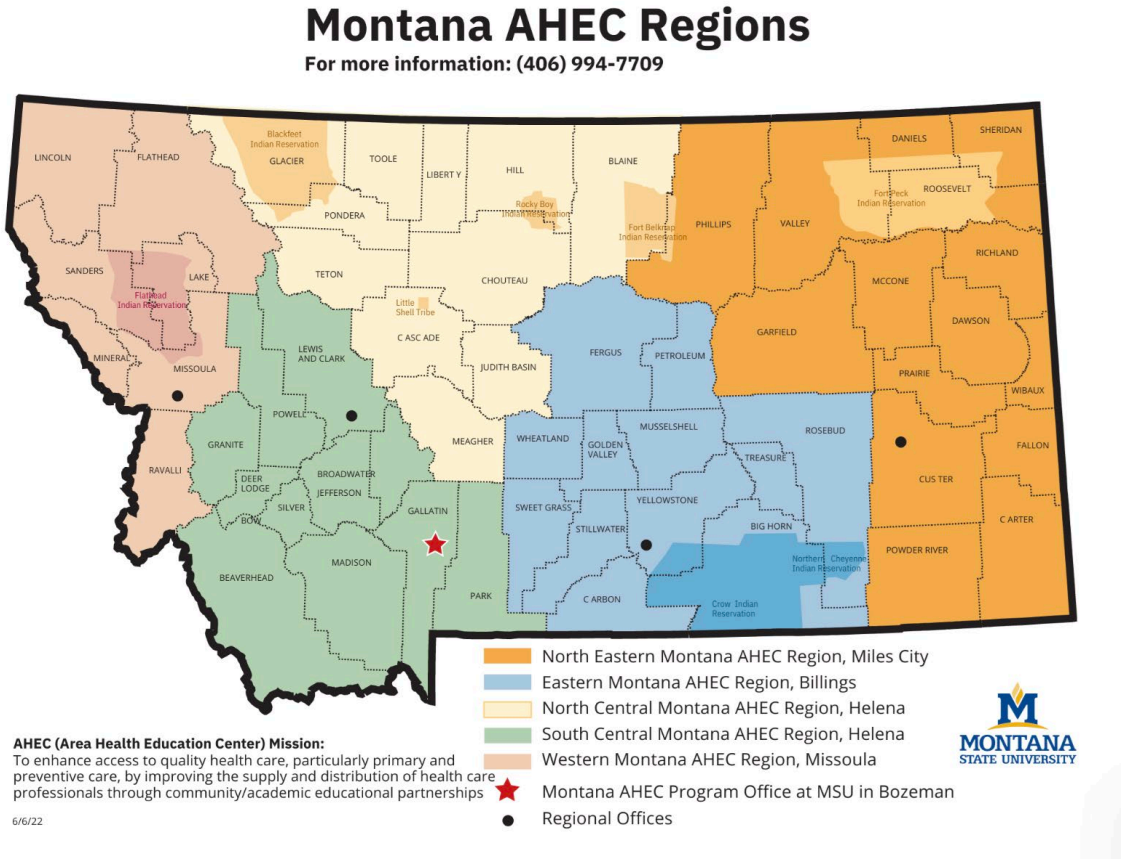
Montana's Rural Health Landscape

- 51 of 56 counties are rural.
- More than one-third of Montana's population lives in rural communities.
- Long travel distances to routine, behavioral, emergency, and specialty care.
- Chronic disease rates are 30–40% higher in rural Montana than in urban areas.



Top Statewide Health Concerns

MORH/AHEC Community Health Needs Assessments, 43 Critical Access Hospitals (2000–2025)

- Alcohol & substance use
- Chronic diseases (cancer, diabetes, obesity)
- Mental health issues (depression, anxiety)

How Montanans Define a Healthy Community

- Access to healthcare services
- Good jobs & a healthy economy
- Healthy behaviors & lifestyles
- Affordable housing
- Access to affordable health insurance
- Strong family life

How Montanans Learn About Health Services

- Word of mouth & reputation
- Friends and family
- Newspapers
- Healthcare providers or clinic/hospital staff

MORH/AHEC Community Health Needs Assessments, 43 CAHs (2000–2025)

How Montanans Would Improve Access to Healthcare

- Additional primary care providers
- Additional specialists
- Improved quality of care
- More information about available services
- Payment assistance & lower cost of care
- More telemedicine options

MORH/AHEC Community Health Needs Assessments, 43 CAHs (2000–2025)

Workforce Development Challenges

Increasing Demand on Montana's Clinical Training System

- Rural health facilities are already stretched thin.
- Multiple disciplines (nursing, medical, dental, pharmacy, etc.) depend on a limited number of rural clinical placements.
- Preceptors are balancing patient care, teaching responsibilities, and high workloads.

Preceptors: Essential to Montana's Workforce Pipeline

- Health professions students must complete supervised clinical hours.
- Healthcare organizations that support a culture of learning are better positioned to recruit staff and lower workforce-related costs.

Rural Health Transformation Program

State of Montana – Department of Public Health & Human Services

1. Workforce Development: Strengthen recruitment, training, and retention of a high-skilled rural health workforce across Montana.
2. Sustainable Access: Improve the long-term viability of rural providers as access points for care through operational and financial support.
3. Innovative Care Models: Implement and scale flexible, patient-centered care models that improve outcomes and care coordination.
4. Community Health and Prevention: Promote prevention and address root causes of disease through expanded access and community-based interventions.
5. Technology Innovation: Expand the use of secure, efficient digital health tools to improve care delivery and access for rural patients and providers.

Total budget amount: $200 million per year for 5 years starting in 2026; $1 billion total.

Montana DPHHS, *Rural Health Transformation Project Summary.*

Partnership Opportunities

MUS Collaboration with Clinical Partners

Academic programs and centers are expanding clinical site relationships, preceptor support, and rural training pathways.

- Expand clinical capacity
- Support rural preceptors
- Strengthen pipelines
- Innovative training programs - including mobile clinics and simulation
- Graduate more students into the workforce

MONTANA STATE UNIVERSITY | Office of Rural Health
Area Health Education Center

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Sign up for weekly rural health newsletter.

College of Health

Montana's Leader in Healthcare Education, Research, Access, and Innovation

Dean Matt Fete, College of Health

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College of Health & Health Across UM

A Community of Interdisciplinary Teachers, Researchers, and Learners

- Family Medicine Residency of Western Montana
- Integrative Physiology and Athletic Training
- Pharmacy
- Physical Therapy and Rehabilitation Science
- Physician Associate Studies
- Public and Community Health Sciences
- Social Work
- Speech, Language, Hearing, and Occupational Sciences
- Nursing
- Paramedicine
- Radiologic Technology
- Respiratory Care
- Psychology
- Surgical Technology

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College of Health Degrees

School of Public and Community Health Sciences

- ✓ *BS Public Health*
- ✓ *MPH Master of Public Health*
- ✓ *MPH/CHPS - MPH with Community Health and Prevention Science*
- ✓ *MPH/MPA - Joint MPH and Master of Public Administration*
- ✓ *PhD Public Health*

School of Integrative Physiology and Athletic Training

- ✓ *BS Integrative Physiology – Health and Exercise Science*
- ✓ *MS Integrative Physiology*
- ✓ *Master of Athletic Training*
- ✓ *PhD in Integrative Physiology and Rehabilitation Sciences*

School of Physical Therapy & Rehabilitation Sciences

- ✓ *DPT Doctor of Physical Therapy*
- ✓ *DPT/MPH*
- ✓ *DPT/MBA*

School of Physician Associate Studies

- ✓ *Master of Physician Associate/Assistant Studies (starting fall 2026)*

Skaggs School of Pharmacy

- ✓ *BS Pharmaceutical Sciences*
- ✓ *PharmD*
- ✓ *PharmD/MS*
- ✓ *PharmD/MBA*
- ✓ *PharmD/MPH*
- ✓ *MS/PhD Pharmaceutical Sciences and Drug Design*
- ✓ *MS/PhD Toxicology*

School of Speech, Language, Hearing & Occupational Sciences

- ✓ *BA Communicative Sciences and Disorders*
- ✓ *Speech-Language Pathology-Assistant Certificate Program*
- ✓ *MS Speech Language Pathology*
- ✓ *PhD Speech, Language, and Hearing Sciences*
- ✓ *OTD Occupational Therapy Doctorate*

School of Social Work

- ✓ *BSW Bachelor of Social Work*
- ✓ *MSW Master of Social Work*
- ✓ *LAC Licensed Addiction Counselor add-on to BSW or MSW*

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College of Health Centers, Institutes, & Clinics

- Center for Population Health Research
- Neural Injury Center
- UMPT Clinic
- DeWit SLH Clinic
- Montana Youth Sports Safety Institute
- Center for Work Physiology & Exercise Metabolism
- New Directions Wellness Center
- Montana Clinical and Translational Research Center
- IPHARM Pharmacy (Improving Health Among Rural Montanans)
- Health Services Pharmacy
- Center for Children, Families, and Workforce Development
- Native American Center of Excellence
- Center for Translational Medicine
- LS Skaggs Institute for Health Innovation
- Center for Environmental Health Sciences
- Montana Biotechnology Center
- Montana Public Health Training Center

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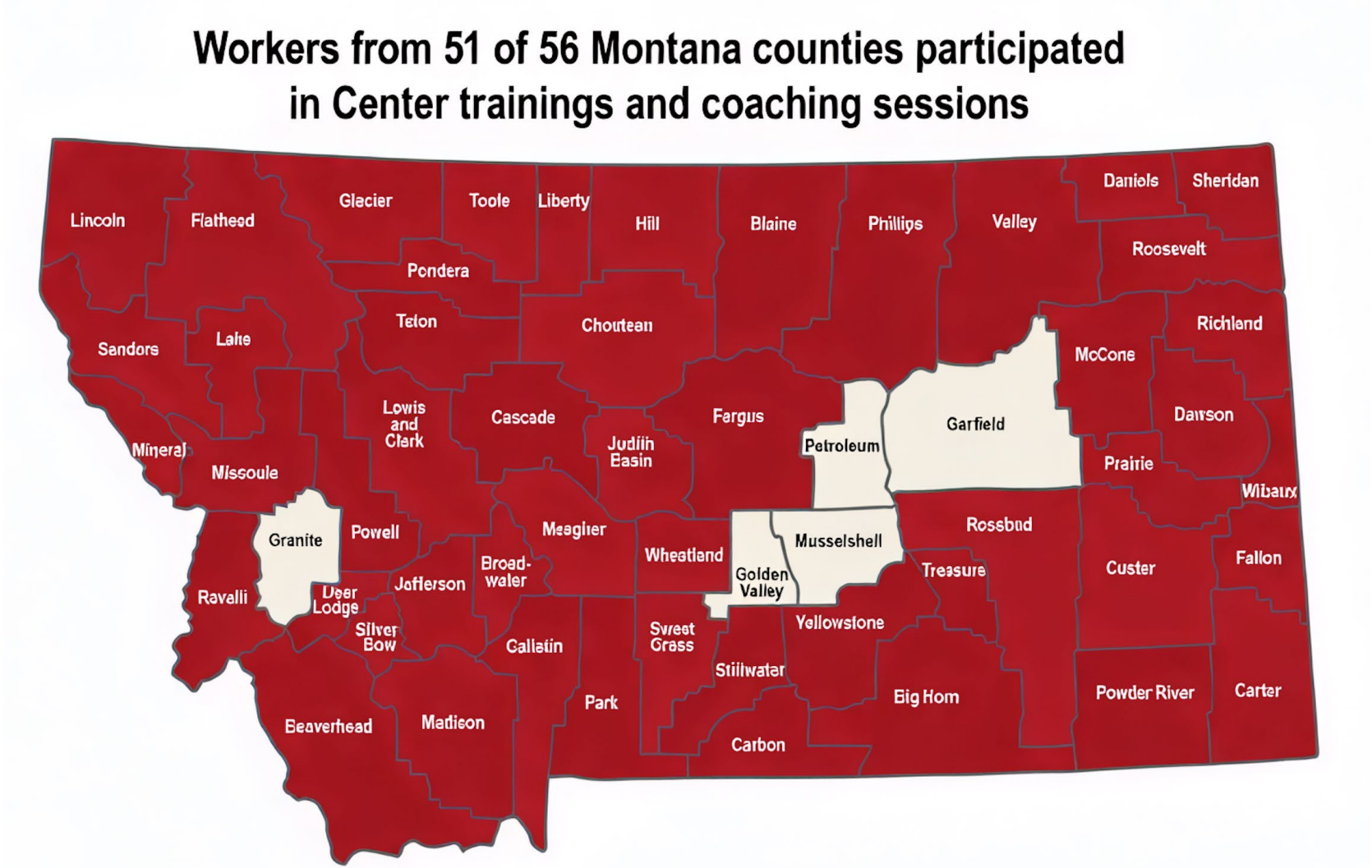
Statewide Partnerships & Impact



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CCFWD

Providence Health Partnership

Partnering to Educate Montana's Healthcare Workforce

Experiential Rotations

Physical Therapy; Social Work; Pharmacy; Integrative Physiology and Athletic Training; Speech, Language, Hearing, and Occupational Sciences; Physician Associate Studies

Family Medicine Residency of Western Montana

Residents serve on inpatient adult medicine, ER, and ICU teams and rotate through specialist electives.

Residents engage in rural rotations at Providence St. Joseph, Polson each year.

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Providence Health Partnership

A New Model for Rural Health Research

University of Montana

- Carnegie R1 healthcare research
- Home to over a dozen centers and institutes
- Strong history of effective participatory community research with Indigenous, rural, and underserved populations

Providence Healthcare System

- Seven-state region, from Alaska to Texas
- One of the largest hospital systems serving rural communities,
- Biggest single instance of the largest electronic medical record system in the United States (EPIC)

Partnership Focus

- Activate a dedicated rural research engine
- Ensure access to health innovation for rural communities
- Support rural-led innovation

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RESOLVE: A Providence/University of Montana Rural Health Collaborative

Using research to solve rural health challenges, and building our collective resolve to improve rural health care

RESOLVE: History

Beginning of Collaborative

There is a long history of University of Montana and Providence trying to work together to improve health in Missoula and beyond. Reed Humphrey (former Dean of College of Health) and Daniel Spoon (Interventional Cardiologist at Providence St. Patrick) worked for years to formalize relationship to support rural health research.

Enterprise-level Involvement

Dr. Spoon involved Bill Wright from the Providence Research Network to support the collaboration. Assigning a project manager and project lead from the enterprise-level research team (Health Research Accelerator), we started to get to work building formal collaboration focused on rural health research in Montana and across the Providence Health System.

Our Model

- Extensive clinical capacity with 125,000 caregivers, 51 hospitals, 1014 clinics
- 7-state footprint serving over 6 million people per year, including 880,000 rural patients
- Top-tier data infrastructure: EMR and cloud data ecosystem
- Prestigious R1 public research institution
- Among the fastest-growing research universities in the U.S.
- Interdisciplinary College of Health building the next generation of clinicians and scientists
- Established rural outreach programs across multiple disciplines

RESOLVE: Mission and Vision

MISSION: Become the national leader in the delivery of modern, scientifically based care that advances science and addresses health care disparities in rural and underserved populations.

VISION: Be the leading innovators in improving rural health outcomes. This vision is feasible by leveraging the extensive clinical capacity of Providence and the research infrastructure of UM to activate and engage communities as partners in health care innovation through collaborative research and strategies designed to tangibly improve both access and outcomes for rural populations.

The mission of RESOLVE is threefold:

- Facilitate collaborative research opportunities that contribute to the existing body of knowledge;
- Translate both our work and that of others to strategies that improve health outcomes, particularly in the rural and underserved communities in the regions where Providence provides care, and;
- Leverage the work of the partnership, particularly in telehealth and remote care strategies to improve the recruitment and retention of caregivers across the range of health care providers in the Providence system.

Providence

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Why RESOLVE?

Using collaboration, research & innovation to transform rural care & outcomes

- Partnering with communities, providers and researchers
- Igniting and investing in research and innovation
- Connecting rural and Indigenous providers and patients with the latest clinical research
- Translating research-backed ideas into better care
- Combining the collective strengths of two healthcare & research leaders, each with 100+ years of experience

RESOLVE: What we've built

Program Overview

Key contributors from Providence and the University of Montana have built a rural health research collaborative with governance, scientific, operational, and financial structures. A startup team has been formed and is operational; this team is managing the startup phase to ensure key deliverables are met and facilitate readiness for public launch.

Deliverables

The endpoint of this project is a structured collaboration between Providence and U of M that allows each institution to support a share of the work using its own departments or programs and organizes resources from those respective departments/programs for the common work.

- **Master Collaborative Agreement**
- **Joint Project(s)**
- **Operating Model**
- **Funding Strategy:** $1.78 million raised in private donation
- **Governance and Approval Pathway**
- **Communication Plan and Public Go-Live (Launch)**

Alaska
- Providence of Alaska

Montana
- Providence Montana Health

Western Washington
- Swedish
- Providence General
- Providence Snohomish
- Providence St. Vincent
- Providence St. Peter
- Providence Marianwood
- Providence Hospice Seattle
- Providence Special Events
- Providence Healthcare Centralia
- ISB

Eastern Washington
- Providence Eastern Washington
- Kadlec
- Providence St. Mary

Providence

Oregon
- Providence Seaside
- Providence Portland
- Providence St. Vincent
- Providence Willamette
- Providence Children's Health
- Providence Milwaukie
- Providence Hood River
- Providence Newberg
- Providence Benedictine
- Providence Medford

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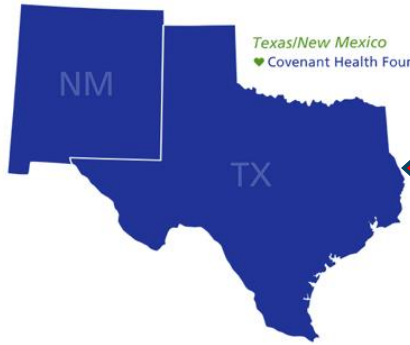
Northern California
- Queen Valley Medical Center
- Santa Rosa Memorial Hospital
- St. Joseph Eureka & Redwood

Southern California
- Providence St. John's Health Center
- Providence San Fernando Valley
- Providence Little Company of Mary
- Providence St. Jude Medical Center
- Mission Hospital
- St. Mary Medical Center
- St. Joseph Orange
- Providence Trinity



Texas/New Mexico
- Covenant Health Foundation

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RESOLVE: *A Rural Health Collaborative*

RESOLVE: Conclusions

- No one is coming to save rural health care.
- Because of our background, we have a different level of passion for our communities and the people of Montana.
- Improving the quality of life and health of Montanans remains the priority.
- Creating a unique program(s) takes thinking differently….
- Open to all health systems, hospitals and universities
- If not Us…….