


State of Louisiana



EXECUTIVE DEPARTMENT
OFFICE OF THE GOVERNOR
EXECUTIVE ORDER NUMBER JML 26-032

LOUISIANA RURAL HEALTH TRANSFORMATION PROGRAM

WHEREAS, Louisiana ranks 50th in national health rankings, taking the spot as the “least healthy state” in the United States based on 49 measures across five categories of health, including social and economic factors, physical environment, clinical care, behaviors, and health outcomes;

WHEREAS, nearly 1.1 million Louisiana residents (23.8% of the population) live in rural parishes, with 37% covered by Medicaid and 22% covered by Medicare;

WHEREAS, residents in rural areas travel an average of 7 miles to hospitals, 20 miles to clinics, and 12 miles to pharmacies, compared to much shorter distances in non-rural areas, translating into 13.5 healthcare facilities per 100,000 rural residents;

WHEREAS, with 75% of rural hospitals not offering labor and delivery services, access gaps threaten both maternal and neonatal outcomes;

WHEREAS, compared to urban populations, residents of rural Louisiana experience disproportionately higher rates of chronic and adverse health conditions, including hypertension (44%), obesity (43%), heart disease (9.2%), diabetes (17%), chronic obstructive pulmonary disease (11%), and lung cancer prevalence (68%);

WHEREAS, rural residents face significantly elevated maternal health risks, including a maternal mortality rate of 37%, which is 14 percentage points higher than the national average, and with approximately 12% lacking access to a birthing hospital within 30 minutes of their residence, compared to roughly 10% nationwide;

WHEREAS, 42 USC 254c was enacted by the Federal Government to provide grants for expanded delivery of health care services in rural areas, for the planning and implementation of integrated health care networks in rural areas, and for the planning and implementation of small health care provider quality improvement activities;

WHEREAS, Louisiana Department of Health has applied for the Rural Health Transformation Program to the Centers for Medicare & Medicaid Services;

WHEREAS, a Louisiana Rural Health Transformation Program grounded in the core principles and strategic goals of the federal Rural Health Transformation Program, will support rural communities across Louisiana;

WHEREAS, the Louisiana Rural Health Transformation Program will focus on three key areas: improving population health outcomes; expanding access to care; and strengthening system capacity;

WHEREAS, these efforts will aim to reduce uncontrolled chronic diseases and support earlier detection and management of conditions such as diabetes, hypertension, and cancer; decrease emergency department visits and preventable hospitalizations while increasing preventive care and access to behavioral health services in underserved rural parishes; and strengthen the rural healthcare workforce and modernize care delivery through education partnerships, targeted recruitment, and expanded use of technology; and

WHEREAS, through these investments the Louisiana Rural Health Transformation Program will expand access, strengthen provider capacity and improve outcomes for Louisiana's 1.1 million rural residents;

NOW THEREFORE, I, JEFF LANDRY, Governor of the State of Louisiana, by virtue of the authority vested by the Constitution and laws of the State of Louisiana, order and direct as follows:

Section 1: The Office of Rural Health Transformation and Sustainability is hereby created within the Office of the Secretary in Louisiana Department of Health and shall, through the Louisiana Rural Health Transformation Program, prioritize and pursue the following initiatives:

1. Strengthen and sustain a stable rural healthcare workforce by partnering with educational institutions and the private sector to expand healthcare education, training, and career pathways.
2. Develop and implement a unified health technology ecosystem that enhances data sharing among healthcare providers, Medicaid, and public health systems to accelerate diagnosis, treatment, and improved health outcomes.

3. Promote and implement innovative, outcomes-driven care models for underserved and hard-to-reach populations through community-based partnerships.
4. Integrate nutrition into healthcare delivery by improving access to healthy foods and providing education on nutrition and chronic disease management, including conditions such as diabetes.
5. Align and coordinate fragmented healthcare services into an integrated delivery framework that ensures rural residents can access care through a consistent and cohesive model.
6. Advance capital improvement initiatives to modernize rural healthcare facilities and equipment, improving both health outcomes and long-term facility sustainability.

Section 2: The Louisiana Rural Health Transformation Program Advisory Council (“Council”) is established within the Office of Rural Health Transformation and Sustainability.

Section 3: The Council shall review quarterly and annual grant reports submitted to CMS and provide strategic guidance and stakeholder engagement on all reporting requirements. The Council will work to ensure that rural health transformation initiatives align with statewide priorities, reflect the needs of local communities, and advance sustainable, data-informed improvements in care delivery. The Council will support transparency, accountability, and coordination in the implementation of rural health initiatives and grant investments.

Section 4: The Council shall be composed of 11 members, who unless otherwise specified, shall be appointed by and serve at the pleasure of the Governor. The membership of the Council shall be as follows:

- A. The Secretary of the Louisiana Department of Health or their designee
- B. The Secretary of Louisiana Works or their designee
- C. The President of the Louisiana Community Technical College or their designee
- D. The executive director of the Louisiana Rural Hospital Coalition or their designee
- E. The executive director of the Louisiana Independent Pharmacist Association or their designee
- F. The Chair of the House Committee on Health and Welfare or their designee
- G. The Chair of the Senate Committee on Health and Welfare or their designee
- H. Four at-large members with demonstrated experience or active involvement in rural healthcare

Section 5: The chair of the Council shall be the Secretary of the Louisiana Department of Health or their designee.

Section 6: The Council shall meet at regularly scheduled intervals and at the call of the chair.

Section 7: Council members shall not receive additional compensation or a per diem from the Louisiana Department of Health for serving on the Council.

Council members who are employees or elected public officials of the State of Louisiana or a political subdivision thereof may seek reimbursement of travel expenses, in accordance with PPM 49, from their employing and/or elected department, agency and/or office.

Council members who are also members of the Louisiana Legislature may seek a per diem from the Louisiana State Senate or House of Representatives, as appropriate, for their attendance.

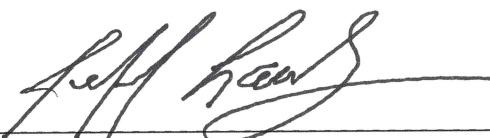
Section 8: Support staff, facilities, and resources for the Board shall be provided by the Louisiana Department of Health.

Section 9: All departments, commissions, boards, offices, entities, agencies, and officers of the State of Louisiana, or any political subdivision thereof, are authorized and directed to cooperate with the Louisiana Department of Health and the Office of Rural Health Transformation and Sustainability in implementing the provisions of this Order.

Section 10: This Order is effective upon signature and shall continue in effect until amended, modified, terminated or rescinded by the Governor, or terminated by operation of law.



IN WITNESS WHEREOF, I have set my hand officially and caused to be affixed the Great Seal of Louisiana, at the Capitol, in the City of Baton Rouge, on this 7th day of April, 2026.



Jeff Landry
GOVERNOR OF LOUISIANA

ATTEST BY
THE GOVERNOR



Nancy Landry
SECRETARY OF STATE