Congress of the United States

Washington, DC 20515

December 5, 2025

The Honorable Dr. Mehmet Oz Administrator Centers for Medicare & Medicaid Services 200 Independence Avenue SW Washington, DC 20201

Dear Dr. Oz:

We are writing in strong support of Texas's application for funding through the Rural Health Transformation Program, authorized by the One Big Beautiful Bill Act.

As you know, Congress approved a historic investment in rural health care earlier this year by creating this program and ensuring that states can work with CMS to determine how to use these funds most effectively to meet the needs of their rural communities.

Specifically, Congress provided \$50 billion for state grants, with half being distributed by CMS "equally among all states with approved application." Under this directive, each state could receive the same amount from the pool regardless of the number of rural hospitals and providers or the size of its rural population. For example, Connecticut, which has three rural hospitals, could receive the same amount as Texas, which has 155 rural hospitals. Texas hospitals and clinics will be clearly disadvantaged under this model, while facilities in more urban states will see an unearned windfall

For the remaining \$25 billion, CMS has broad discretion to consider a range of factors in allocating funds and is not required to distribute additional funding to all states that receive baseline awards. We respectfully ask CMS to carefully consider this dynamic and exercise this discretionary authority when determining the criteria and allocations for the second tranche so that the program's intent is preserved. We emphasize the following points:

- Texas has 4.3 million rural residents, more than any other state, while also being the second-largest state by geographic area. These residents are spread across 202 rural counties covering over 260,000 square miles of rural territory.²
- Texas has more rural hospitals and clinics than any other state, four times the national average.³
- Since 2005, Texas has had more rural hospital closures than any other state, ten times the national average, and continues to have more vulnerable rural hospitals than any other state. The financial crisis facing these facilities is severe with 77% of rural Texas

 $^{^{\}rm 1}$ H.R. 1, One Big Beautiful Bill Act. Public Law No: 119-21

² Rural Texas Strong - Project Narrative

³ https://www.chartis.com/sites/default/files/documents/CCRH%20WP%20-%202025%20Rural%20health%20state%20of%20the%20state 021125.pdf

⁴ https://www.shepscenter.unc.edu/programs-projects/rural-health/rural-hospital-closures/

hospitals having negative net income from patient services in 2025, while 40% are operating with negative margins and fewer than 20 days cash on hand. Additionally, 48 hospitals currently have fewer than 10 days cash on hand. In comparison, Delaware, Maryland, New Jersey, Rhode Island, and Utah have zero hospitals at risk of closure.⁵

- Over 500,000 Texas residents must travel an hour or more to reach urban areas for health care services, with rural residents averaging 59 miles to the nearest referral center and some West Texas patients having to travel up to 109 miles. Women may travel more than 70 miles to reach the nearest labor and delivery hospital, as 96 rural hospitals no longer provide obstetric services, creating maternal health deserts larger than the combined land mass of Connecticut, Delaware and Rhode Island.⁶
- Almost all rural Texas counties are designated as health provider shortage areas (HPSA) and every rural county in Texas is designated as a HPSA for mental health providers. Nearly one in five rural Texas counties lacks a licensed primary care physician, and rural areas have 60% fewer primary care physicians per capita than urban areas. The workforce crisis extends beyond physicians, as rural communities have nearly three times fewer community health workers per capita than urban areas, while one-third of the existing rural healthcare workforce is nearing retirement.⁷
- This rural health care crisis imposes a staggering economic burden, with excess medical spending and productivity loss due to preventable health conditions costing the Texas economy \$7 billion annually, while rural Texans continue to experience higher mortality rates and increased incidence of chronic diseases.⁸

Texas is ready and more than able to meet this critical moment for improving health care access and outcomes in our rural communities. Texas will collaborate with rural hospitals, Federally Qualified Health Centers, and other providers across the state, using the funding from this program "to reach residents in 100% of Texas's rural counties and make rural Texans healthy again." In its application, "Rural Texas Strong: Supporting Health and Wellness," Texas is prioritizing the following areas:

- Reducing chronic disease;
- Increasing remote patient monitoring;
- Deploying artificial intelligence and telehealth services to bridge service gaps;
- Recruiting and retaining rural health care workers;
- Improving cybersecurity to protect patient data; and
- Upgrading equipment in rural hospitals and clinics.

8 Ibid

⁵ https://www.beckershospitalreview.com/finance/760-hospitals-at-risk-of-closure-state-by-state/

⁶ Rural Texas Strong - Project Narrative

⁷ Ibid

⁹ Ibid

These are worthy and significant goals that closely align with the strategic goals laid out by CMS, and they can be achieved with the necessary funding.

As you consider state applications, we ask that you ensure an appropriate balance in funding distribution and consider the increased need of a large, rural state like Texas to ensure we can make critical improvements in health care for rural Texas communities. Thank you for your careful attention to these concerns.

Sincerely,

John Cornyn

United States Senator

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United States Senator

August Pfluger

Member of Congress

Jødey C. Arrington

Member of Congress

Pete Sessions

Member of Congress

Roger Williams

Member of Congress

Craig A. Goldman

Member of Congress

Dan Crenshaw

Member of Congress

Ronny L. Jackson

Member of Congress

Randy K. Weber, Sr.

Member of Congress



Beth Van Duyne Member of Congress

Keith Self Member of Congress



Windl I. W Carl

Nathaniel Moran Member of Congress

Michael T. McCaul Member of Congress

Member of Congress

John R. Carter Member of Congress

Jake Ellzey Member of Congress

Michael Cloud Member of Congress

Lance Gooden Member of Congress

Brian Babin, D.D.S. Member of Congress

Morgan Luttrell
Member of Congress

Member of Congress

Tony Gonzales Member of Congress