



## North Carolina Office of Rural Health

2025 Profile (Data from State Fiscal Year 2025)

### Grant Facts

**\$110M**

Available grant funding  
(federal, state)

**227**

Jobs (full-time and part-time) supported in local communities

**656**

Contracts to support communities

#### Overview

In 1973, the North Carolina Office of Rural Health (ORH) became the first State Office of Rural Health in the Nation. Created to focus on the needs of rural and underserved communities, ORH continues to empower communities and populations by developing strategies to improve quality and cost-effectiveness of health care for all. While ORH does not provide direct care, its programs support numerous health care safety net organizations throughout the state. Continued support and recurring funding for ORH strengthened North Carolina's health care safety net infrastructure to ensure that all of the state's medically vulnerable residents (Uninsured, Underinsured, Medicare and Medicaid) have access to affordable and appropriate high quality primary care. It is a conservative estimate that the State's primary care safety net system served 927,893 vulnerable, uninsured residents in 2024 (American Community Survey, US Census Bureau)

#### Special Appropriations

In SFY 2025, ORH was directed to administer \$8.5 million in special appropriations from the NC General Assembly to disperse funds for specific projects or to specific health care organizations in North Carolina.

### Office of Rural Health Programs:



#### Rural Hospital

Support operational improvement projects for the benefit of all critical access hospitals and eligible small rural hospitals



#### Medication Assistance

Provide free and low-cost medications donated by pharmaceutical manufacturers to patients who cannot afford them



#### Telehealth Infrastructure Grant

Provide technical assistance to improve the use of health information technology and adoption of telehealth.



#### Analytics & Innovations

Support data analytics, community health initiatives, and demonstration projects that benefit vulnerable populations



#### Placement and HPSA Services

Recruit providers and designate health professional shortage areas



#### Rural Health Operations

Support state designated rural health centers that serve the entire community



#### Community Health Grants

Support the primary care safety net system with increasing access to health care for vulnerable populations



#### NC Farmworker Health

Support medical, dental and educational services for members of the North Carolina agricultural labor force and their families

### Direct Services

**358,424**

Total Patients served

**89%**

Of ORH funding is spent directly on communities

**\$106**

Average annual contribution of state funds per patient



**72%**

Patients with well-controlled diabetes, as evidenced by A1c levels < 9



**74%**

Patients with well-controlled hypertension, as evidenced by blood pressure levels < 140/90



**67%**

Patients screened for obesity through Body Mass Index (BMI) testing



**80%**

Patients screened for tobacco cessation and treatment

### Return On Investment and Economic Impact

Source: IMPLAN

ORH Expenditures	+	Created Economic Impact	=	Total Impact
<b>\$38,005,921</b>		<b>\$37,367,346</b>		<b>\$75,373,267</b>
Generates		<b>\$2,538,619</b>		<b>\$30,244,884</b>
<b>189</b> additional jobs from the economic impact		Generated in state and local taxes which goes back into the local and state economy		In employee compensation impacted by the grants

Each ORH dollar has a total economic impact of

**\$1.98**

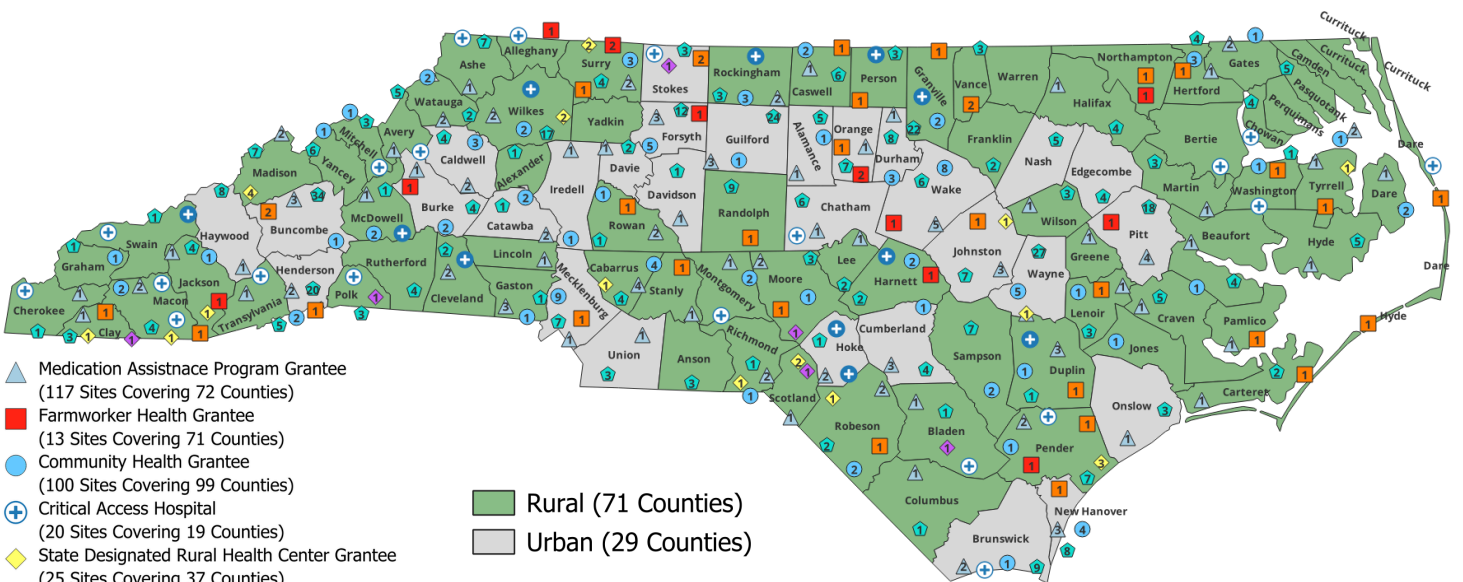
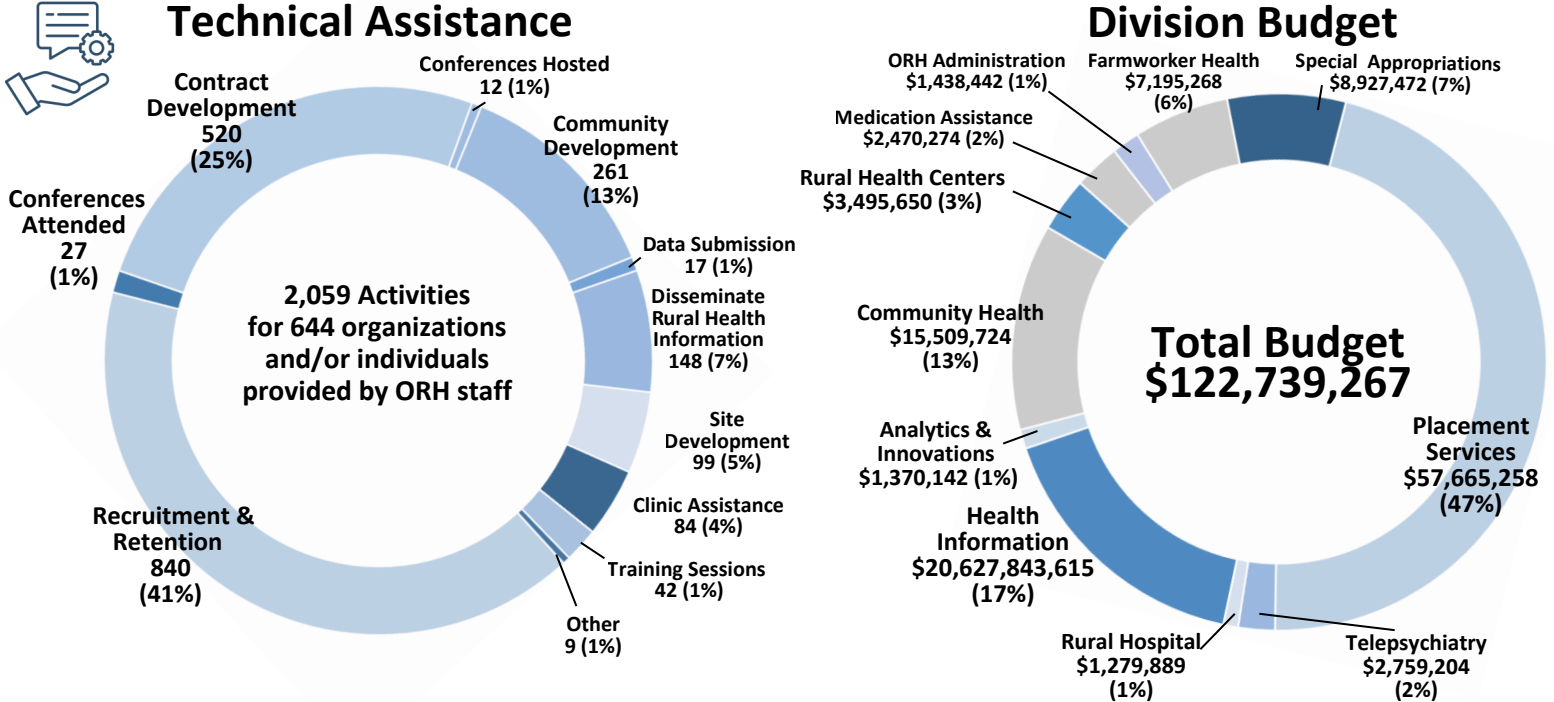
**98%**  
ROI

\*Economic impact is estimated to be much greater because improved health outcomes can lead to fewer missed work days, reduced health care costs, and reduced premature morbidity and mortality. Some expenses such as out of state purchases, overhead, and rollover payments are not captured for ROI and economic impact.



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**If you have further questions, please contact:**  
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