Kutztown University

Business Idea Competition

2025

Business Concept Title: Rural HealthLink

Team Members:

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Problem/Opportunity

Millions of Americans living in rural communities lack timely access to basic healthcare services. Rural hospitals are closing at alarming rates, leaving residents with long travel distances, limited transportation options, and delayed care.

This lack of access disproportionately affects elderly populations, low-income families, and individuals with chronic conditions. The result is higher rates of preventable illness and avoidable emergency visits. The pain point is clear: rural residents need a more affordable and accessible way to receive primary and preventive healthcare.

Solution and Value Proposition

Rural HealthLink is a mobile telehealth and community clinic service that combines a secure digital platform with traveling health vans. The vans, staffed by nurse practitioners, rotate across underserved areas on a weekly schedule, offering primary care, screenings, and referrals.

Patients who cannot visit in person use the telehealth app for follow-ups. By bridging digital and physical healthcare, Rural HealthLink ensures rural residents receive timely care, reducing costs and improving outcomes.

Market Analysis

Our target customers are rural households in Pennsylvania, West Virginia, and Ohio where hospital closures and provider shortages are most severe. According to the National Rural Health Association (NRHA, 2024), more than 60 million Americans live in rural areas, where access to timely, affordable healthcare remains a persistent challenge. This issue is especially pronounced in Pennsylvania, where the Center for Rural Pennsylvania reports that nearly 3.4 million residents live in rural communities, many of which face provider shortages, aging populations, and geographic barriers to health care.

Competition & Differentiation

Current competitors include standalone telehealth providers (e.g., Teladoc) and regional hospital outreach programs. However, telehealth alone cannot meet the needs of rural populations with poor internet access or complex health conditions, while hospital programs are limited in coverage.

Rural HealthLink is different because it combines mobile community clinics with telehealth, ensuring that even those with limited broadband access can get in-person care. Our rotating schedule and localized presence build trust in the community, setting us apart from purely digital competitors.

Marketing Strategy

We will partner with local churches, community centers, and county governments to spread awareness of clinic schedules. Outreach will also include flyers in grocery stores, local radio ads, and social media campaigns targeting rural ZIP codes. Additionally, we will work with employers and schools to promote preventive care visits for families and workers.

By using community-based marketing channels, we will build credibility and trust in populations that may be skeptical of outside providers.

Business Type

Rural HealthLink will operate as a partnership and this business model is chosen to leverage the complementary expertise of the two founding members: one with a background in healthcare delivery and the other in technology development. This structure allows the team to pool resources, share responsibilities, and maintain flexibility in decision-making while the business grows.

Revenue Model

Rural HealthLink will generate revenue through a subscription-based membership model ($30/month per household) that covers unlimited telehealth visits and discounted in-person care. Additional revenue comes from billing Medicaid/Medicare and private insurance for qualified services delivered by licensed providers.

Start-up costs include outfitting two mobile vans with medical equipment ($250,000 each) and developing the secure telehealth platform ($100,000).

We are requesting an initial investment of $500,000 to launch operations in three pilot counties in Pennsylvania (Berks, Schuylkill, and Lebanon). These counties were selected because they have large rural populations, limited access to primary care providers, and strong community networks that could support outreach and adoption. The funding will be allocated as follows: $250,000 to purchase and outfit two mobile vans with medical equipment, $100,000 for developing the secure telehealth platform, and $150,000 for initial staffing, outreach, and operating expenses during the first year.

References

National Rural Health Association. (2024). Impacts of telehealth on rural health care access. https://www.ruralhealth.us/nationalruralhealth/media/documents/nrha-impact-of-telehealth-policy-on-rural-health-access-2024.pdf