Delta Health Systems Implementation Program

Opportunity number: HRSA-25-032

Contents

Before you begin

If you believe you are a good candidate for this funding opportunity, secure your SAM.gov and Grants.gov registrations now. If you are already registered, make sure your registrations are active and up-to-date.

SAM.gov registration (this can take several weeks)

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI).

See Step 2: Get Ready to Apply

Grants.gov registration (this can take several days)

You must have an active Grants.gov registration. Doing so requires a Login.gov registration as well.

See Step 2: Get Ready to Apply

Apply by the application due date

Applications are due by 11:59 p.m. Eastern Time on March 20, 2025.

> To help you find what you need, this NOFO uses internal links. In Adobe Reader, you can go back to where you were by pressing Alt + Left Arrow (Windows) or Command + Left Arrow (Mac) on your keyboard.

Step 1:
Review the Opportunity

In this step

Basic information

Health Resources and Services Administration

Federal Office of Rural Health Policy

Strengthening healthcare delivery in rural areas of the Delta region by implementing projects to improve financial sustainability.

Summary

Funding under this program seeks to improve healthcare delivery in rural areas by implementing projects that will improve the financial sustainability of rural healthcare organizations and allow for increased access to care in rural communities of the Delta region.

Funding details

Application type: New

Expected total available funding in FY 2025: $2,000,000

Expected number and type of awards: 5 grants

Funding range per award: Up to $400,000 per grant

We plan to fully fund awards in Year 1 for use over the period of performance of September 1, 2025 to August 31, 2027.

The program and awards depend on the appropriation of funds and are subject to change based on the availability and amount of appropriations.

Have questions?
Go to Contacts & Support.

Key facts

Opportunity name: Delta Health Systems Implementation Program

Opportunity number: HRSA-25-032

Announcement version: New

Federal assistance listing: 93.912

Statutory authority: 42 U.S.C. 912(b) (§ 711(b) of the Social Security Act)

Key dates

NOFO issue date: December 20, 2024

Informational webinar: January 8, 2025

Application deadline: March 20, 2025, at 11:59 p.m. Eastern Time (ET)

Expected award date is by: August 1, 2025

Expected start date: September 1, 2025

See other submissions for other time frames that may apply to this NOFO.

Eligibility

Who can apply

You can apply if your organization is located in a rural county or parish in the Delta region and is one of the below eligible organization types.

The Delta region is the region served by the Delta Regional Authority, which includes 252 counties and parishes located across eight states - Alabama, Arkansas, Illinois, Kentucky, Louisiana, Mississippi, Missouri, and Tennessee. To view maps of the counties and parishes in each state that are in the Delta region, visit https://dra.gov/about-dra/map-room/. To determine if a county or parish in the Delta region is rural visit HRSA's Rural Health Grants Eligibility Analyzer at https://data.hrsa.gov/tools/rural-health.

Types of eligible organizations

These types of domestic* organizations may apply:

- Public institutions of higher education
- Private institutions of higher education
- Non-profits with or without a 501(c)(3) IRS status
- For-profit organizations, including small businesses
- State, county, city, township, and special district governments, including the District of Columbia, domestic territories, and the freely associated states
- Independent school districts
- Native American tribal governments
- Native American tribal organizations

* "Domestic" means the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Northern Mariana Islands, American Samoa, Guam, the U.S. Virgin Islands, the Federated States of Micronesia, the Republic of the Marshall Islands, or the Republic of Palau.

Individuals are not eligible applicants under this NOFO.

Other eligibility criteria

- Successful applications must propose a project in a rural healthcare organization located within a rural county or parish in the Delta region.
- For purposes of this notice of funding opportunity, "rural healthcare organization" is a healthcare organization located in a rural county or parish in the Delta Region,

including critical access hospitals, small rural hospitals, rural health clinics, tribal healthcare facilities, and other healthcare organizations.

- Applicants shall not have previously received a Delta Health Systems Implementation Program (DSIP) award for the same project(s), unless the entity is proposing a new project for the rural target area that will be served by the project.

Completeness and responsiveness criteria

We will review your application to make sure it meets these basic requirements to move forward in the competition. We will not consider an application that:

- Is from an organization that does not meet all eligibility criteria.
- Requests funding above the award ceiling shown in the funding range.
- Is submitted after the deadline.
- Fails to propose a project in a rural healthcare organization located within a rural county or parish in the Delta region.

Application limits

You may not submit more than one application. If you submit more than one application, we will only accept the last on-time submission.

Cost sharing

This program has no cost-sharing requirement. If you choose to share in the costs of the project, we will not consider it during merit review. We will hold you accountable for any funds you add, including through reporting.

Program description

Purpose

The purpose of the Delta Health Systems Implementation Program (DSIP) is to improve healthcare delivery in rural areas by implementing projects that will improve the financial sustainability of rural healthcare organizations and allow for increased access to care in rural communities. These projects focus on financial and operational improvement, quality improvement, telehealth, and workforce development in rural healthcare organizations in the rural counties and parishes of the Delta region.

The Delta region includes 252 counties and parishes located across eight states: Alabama, Arkansas, Illinois, Kentucky, Louisiana, Mississippi, Missouri, and Tennessee. To view maps of the counties and parishes in each state that are in the Delta region, visit the Delta Regional Authority Service Area Map. To determine if a county or parish in the Delta region is rural, visit Rural Health Grants Eligibility Analyzer .

This program supports projects in rural healthcare organizations (as defined in Other Eligibility Criteria) in the Delta region that have received previous technical assistance (TA) through the Delta Region Community Health Systems Development Program (DRCHSD) or another similar TA program within the last five years. The DRCHSD Program provides intensive, multi-year TA to rural healthcare organizations located in the Delta region for free. DSIP is an extension of the DRCHSD Program and is designed to help rural healthcare organizations that previously received TA, from DRCHSD or another similar TA program, to implement projects based on the recommendations from their TA consultations.

Program Objective

The objective of DSIP is to improve health care in rural areas through projects in these focus areas:

- Financial and operational improvements.
- Implementation of quality improvement initiatives.
- Expansion of telehealth services and financial/operational systems enhancements.
- Workforce recruitment and retention initiatives.

Implementation project activities could include, but are not limited to:

- **Financial and Operational**: developing new service lines, increasing inpatient and swing bed volume, increasing outpatient services, implementing revenue

cycle best practices to increase point of service collections, and optimizing emergency department operations.

- **Quality**: reducing readmissions, improving transitions of care and discharge planning, implementing performance measurement systems, clinical documentation integrity training, and utilizing data analytics.

- **Telehealth**: expanding telehealth services and enhancing cybersecurity.

- **Workforce**: recruitment initiatives, implementing new technology to increase clinical efficiency, simulation training for clinicians, and leadership training such as rounding to improve patient and employee satisfaction.

Background

This program supports HRSA's collaboration with the [Delta Regional Authority (DRA)](#) to enhance healthcare delivery in the rural counties and parishes of the Delta region. This collaboration began in 2017 when HRSA funded the DRCHSD Program under a cooperative agreement to provide free intensive, multi-year technical assistance to rural healthcare organizations located in the Delta region. The TA services are focused on financial and operational efficiency, quality improvement, telehealth, community care coordination, population health, emergency medical services, and workforce recruitment and retention.

The DRCHSD Program is available to rural healthcare organizations located in the rural counties and parishes of the Delta region. As rural healthcare organizations completed the multi-year TA of the DRCHSD Program, there was a need for support to continue the implementation of projects recommended during TA consultations. DSIP was developed in 2023 to meet this need as an extension of the DRCHSD Program. Currently, DSIP provides funding directly to 13 rural healthcare organizations to implement projects based on recommendations from the DRCHSD Program or another similar TA program.

If you have not received TA or would like more information on the DRCHSD Program, you can reach out to drchsd-program@ruralcenter.org.

Program requirements and expectations

1. You must implement a project based on previous TA consultation recommendations in one or more of the program focus areas (financial and operational improvement, quality improvement, telehealth, and workforce development) in a rural healthcare organization located in a rural county or parish in the Delta region.

2. If you are not a rural healthcare organization implementing a project within your own organization, you must maintain a strong working relationship with the rural healthcare organization to meet the intended goals of the program.

3. You must adhere to all listed budget requirements. See [Budget & budget narrative](#) for more details.

4. You must work with HRSA to identify appropriate measures to show improvement in financial sustainability and the impact of your specific implementation project.

Award information

Funding policies & limitations

Policies

- We will only make awards if this program receives funding. If Congress appropriates funds for this purpose, we will move forward with the review and award process.

- If we receive more funding for this program, we may:

    ◦ Fund more applicants from the rank order list

    ◦ Extend the period of performance

    ◦ Award supplemental funding

General limitations

- For guidance on some types of costs we do not allow or restrict, see Project Budget Information in Section 3.1.4 of the [Application Guide](#). You can also see 45 CFR part 75, or any superseding regulation, [General Provisions for Selected Items of Cost](#).

- You cannot earn profit from the federal award. See [45 CFR 75.400(g)](#).

- Congress's current appropriations act includes a salary limitation, which applies to this program. As of January 2024, the salary rate limitation is $221,900. This limitation may be updated.

See [Manage Your Grant](#) for other information on costs and financial management.

Indirect costs

Indirect costs are costs you charge across more than one project that cannot be easily separated by project. For example, this could include utilities for a building that supports multiple projects).

To charge indirect costs you can select one of two methods:

Method 1 – Approved rate. You currently have an indirect cost rate approved by your cognizant federal agency.

Method 2 – *De minimis rate*. Per 2 CFR 200.414(f), if you have never received a negotiated indirect cost rate, you may elect to charge a *de minimis* rate. If you choose this method, costs included in the indirect cost pool must not be charged as direct costs.

This rate is 15% of modified total direct costs (MTDC). See 2 CFR 200.1 for the definition of MTDC. You can use this rate indefinitely.

Program income

Program income is money earned as a result of your award-supported project activities. You must use any program income you generate from awarded funds for approved project-related activities. Find more about program income at 45 CFR 75.307.

Step 2:
Get Ready to Apply

In this step

Get registered

SAM.gov

You must have an active account with SAM.gov to apply. This includes having a Unique Entity Identifier (UEI). SAM.gov registration can take several weeks. Begin that process today.

To register, go to SAM.gov Entity Registration and select Get Started. From the same page, you can also select the Entity Registration Checklist to find out what you'll need to register.

When you register or update your SAM.gov registration, you must agree to the financial assistance general certifications and representations. You must agree to those for grants specifically, as opposed to contracts, because the two sets of agreements are different. You will have to maintain your registration throughout the life of any award.

Grants.gov

You must also have an active account with Grants.gov. You can see step-by-step instructions at the Grants.gov Quick Start Guide for Applicants.

Find the application package

The application package has all the forms you need to apply. You can find it online. Go to Grants Search at Grants.gov and search for opportunity number HRSA-25-032.

Application writing help

Visit HHS Tips for Preparing Grant Proposals.

Visit HRSA's How to Prepare Your Application page for more guidance.

See Apply for a Grant for other help and resources.

Join the webinar

For more information about this opportunity, **join the webinar on Wednesday, January 8, 2025, at 1-2 p.m. ET.**

If you are not able to join through your computer, you can call in:

- **Phone number**: 1-833-568-8864
- **Meeting ID:** 1604374049
- **Passcode**: 37183891

We will record the webinar. If you are not able to join live, you can contact RuralHospitals@hrsa.gov.

Have questions? Go to Contacts and Support

Step 3:
Prepare Your Application

In this step

Application contents and format

Applications include 5 main components. This section includes guidance on each.

Application page limit: 40 pages

Submit your information in English and express whole number budget figures using U.S. dollars.

Make sure you include each of these:

Components	Submission format
Project abstract	Use the Project Abstract Summary form
Project narrative	Use the Project Narrative Attachment form
Budget narrative	Use the Budget Narrative Attachment form
Attachments	Insert each in the Attachments form
Other required forms	Upload using each required form

Required format

You must format your narratives and attachments using our required formats for fonts, size, color, format, and margins. See the formatting guidelines in Section 3.2 of the Application Guide.

Project abstract

Complete the information in the Project Abstract Summary form. Include a short description of your proposed project. Include the needs you plan to address, the proposed services, and the population groups you plan to serve. For more information, see Section 3.1.2 of the Application Guide.

Project narrative

In this section, you will describe all aspects of your project. Project activities must comply with the nondiscrimination requirements.

Use the section headers and the order listed.

Introduction

See merit review criterion 1: [Need](#)

- Briefly describe the purpose of your project.

- Identify the rural healthcare organization in which the project will be implemented and indicate its location in a rural county or parish in the Delta region. Include proof of location in a rural county or parish in the Delta region in [Attachment 3](#).

Need

See merit review criterion 1: [Need](#)

This section will help reviewers understand whom you will serve with the proposed project.

Community and Healthcare Organization Demographics

- Describe the rural population to be served and any rural underserved communities including those who suffer from poorer health outcomes, health disparities, and other inequalities.

- Describe the larger health care delivery system beyond the rural healthcare organization, including other providers in the community or distance from the rural healthcare organization to other providers.

- Describe the community health status and challenges that affect health care in the service area (e.g., poverty, uninsured or underinsured, chronic disease burdens, social determinants of health).

- Use and cite recent demographic data to support the information.

Healthcare Organization Improvement Opportunities

- Discuss completed technical assistance the rural healthcare organization has received from the Delta Region Community Health Systems Development Program, or another similar TA program within the last 5 years. Include proof of previous technical assistance as [Attachment 4](#).

- Describe the recommendations suggested for areas for improvement that meets one of the [program focus areas](#).

Approach

See merit review criterion 2: [Response](#)

- Tell us how you propose to serve the target population and service area based on the technical assistance recommendations as aligned with [DSIP program objectives](#).

- Outline your implementation plan based on recommendations from technical assistance consultations. State which [program focus area(s)](#) your plan will address.

- Describe your plan for continuing the project when federal funding ends. We expect you to keep up key strategies or services and actions which have led to improved practices and outcomes for the target population.

High-level work plan

See merit review criteria 2: [Response](#) & 4: [Impact](#)

- Describe how you'll achieve the program objectives during the period of performance.

- Provide a timeline for the entire period of performance that includes each activity and identifies who is responsible for each. As needed, identify how key stakeholders and/or consultants will help plan, design, and carry out all activities, including the application.

Resolving challenges

See merit review criterion 2: [Response](#)

Discuss challenges that you are likely to encounter in your work plan and explain approaches that you'll use to resolve them.

Performance reporting and evaluation

See merit review criteria 3: [Performance reporting and evaluation](#) & 5: [Resources and capabilities](#)

- Describe the expected short-term and long-term outcomes (desired results) of the funded activities on the rural healthcare organization, target population, and service area.

- Describe how you will collect, analyze, and track data to measure progress and outcomes.

Organizational information

See merit review criterion 5: [Resources and capabilities](#)

- Briefly describe your mission, structure, and the scope of your current activities. Explain how they support your ability to carry out the program requirements.

- Discuss your ability to implement the proposed improvements based on recommendations from the rural healthcare organization's technical assistance consultations. Include evidence of successful implementation of previous technical assistance recommendations.

- Discuss how you'll follow the approved plan, account for federal funds, and record all costs to avoid audit findings.

- Include a staffing plan and job descriptions for key personnel as [Attachment 1](). HRSA recommends including a project director of **at least 0.25 FTE** capable of overseeing the program's administrative, fiscal, and business operations for the entirety of the project. You'll include a project organizational chart as [Attachment 2]().

- Include a Letter of Commitment indicating your organization's Board of Directors' understanding of and commitment to the requirements of this grant for the entire two-year period of performance. In the case that you do not have a Board of Directors, this should be signed by your organization's CEO. Include the Letter of Commitment as [Attachment 5]().

- You must provide the following information if you are not a rural healthcare organization proposing to implement a project within your own organization:

  - Include a Letter of Commitment as [Attachment 5]() from the rural healthcare organization's Board of Directors indicating their understanding of and commitment to the requirements of this grant for the entire two-year period of performance. In the case that the rural healthcare organization does not have a Board of Directors, this should be signed by the rural healthcare organization's CEO.

  - Include a signed MOU between you and the rural healthcare organization as [Attachment 6]() that describes a strong working relationship and outline how you will support the rural healthcare organization to meet the goals of this program.

Budget and budget narrative

See merit review criterion 6: [Support Requested]()

Your budget should follow the instructions in Section 3.1.4. Project Budget Information - Non-Construction Programs (SF-424A) of the [Application Guide]() and the instructions listed in this section. Your budget should show a well-organized plan.

Travel: You must allocate travel funds for up to two (2) hospital staff to attend at least one 2-3 day national or regional rural health care conference focused on innovative approaches and solutions for rural healthcare organizations and rural health care leadership. Examples include but are not limited to the National Rural Health Association (NRHA) Annual Rural Health Conference, NRHA Critical Access Hospital/ Rural Health Clinic Conference, the American Hospital Association (AHA) Rural Health Care Leadership Conference, and the Delta Region Community Health Systems Development Program annual summit. To determine estimated travel costs, rates should refer to the U.S. General Services Administration (GSA) per diem rates for FY

2024. Per diem rates can be found on the GSA's website: https://www.gsa.gov/travel. See Appendix for an example of how to include this in the budget.

Equipment: You may allocate **no more than $150,000** to equipment purchases to include financial system enhancements or telehealth systems. Include a list and description of how equipment purchases meet the goals of your proposed project.

Personnel: HRSA recommends allocating funds for a project director with **at least 0.25 FTE** to the program. Ideally, the allocated time of the project director role should be filled by one individual, and not split amongst multiple project staff.

Contractual: You are responsible for ensuring that your organization or institution has in place an established and adequate procurement system with fully developed written procedures for awarding and monitoring all contracts. Consistent with 45 CFR part 75, you must provide a clear explanation of the purpose of each contract, how the costs were estimated, and the specific contract deliverables.

The total project or program costs are all allowable (direct and indirect) costs incurred for the HRSA award activity or project. This includes costs charged to the award and non-federal funds used to satisfy a matching or cost-sharing requirement (which may include maintenance of effort, if applicable).

The budget narrative supports the information you provide in Standard Form 424-A. See other required forms. It includes an itemized breakdown and a clear justification of the requested costs. The merit review committee reviews both.

As you develop your budget, consider:

- If the costs are reasonable and consistent with your project's purpose and activities.
- The restrictions on spending funds, including the following program-specific limitations.
  - Acquiring or building real property.
  - Construction.
  - Equipment costs not directly related to the purposes of this award.
  - See Funding policies & limitations.

To create your budget narrative, see detailed instructions in Section 3.1.5 of the Application Guide.

Attachments

Place your attachments in order in the Attachments form. See the [application checklist](#) to determine if they count toward the page limit.

Attachment 1: Staffing plan and job descriptions

See Section 4.1.vi of the [Application Guide](#).

Include a staffing plan that shows the staff positions that will support the project and key information about each. Justify your staffing choices, including education and experience qualifications, and your reasons for time requested for each staff position. When creating the staffing plan, HRSA recommends including a project director of **at least 0.25 FTE** capable of overseeing the program's administrative, fiscal, and business operations for the entirety of the project. For the purposes of this application, key personnel are individuals who are funded by this award, or person(s) conducting activities central to this program.

For key personnel, attach a one-page job description. It must include the role, responsibilities, and qualifications.

Attachment 2: Project organizational chart

Provide a one-page diagram that shows the project's organizational structure.

Attachment 3: Proof of Location in a rural county or parish in the Delta region

Include a printout of your location in a rural county or parish in the Delta region from the [Rural Health Grants Eligibility Analyzer](#). This webpage allows you to search by street address to determine rural eligibility. If you are not a rural healthcare organization proposing to implement a project within your own organization, you must also include a printout of the rural healthcare organization's location in a rural county or parish in the Delta region. Printout should be legible and in black and white.

Attachment 4: Proof of Previous Technical Assistance

Provide documentation of previous TA. Documentation should be from the past five years and be one of the following items: recommendations from TA consultations, a recommendations report, or a letter from the Delta Region Community Health Systems Development Program confirming previous participation in TA. Reach out to the HRSA program contact if you have questions on what documentation would be appropriate.

Attachment 5: Board of Directors Letter of Commitment

Include a Letter of Commitment indicating your organization's Board of Directors' understanding of, and commitment to, the requirements of this grant for the two-year period of performance. The Letter of Commitment must be dated and signed by the Board Chair. In the case that you do not have a Board of Directors, this should be signed by your organization's CEO. If you are not a rural healthcare organization proposing to implement a project within your own organization, include a signed Letter of Commitment indicating the rural healthcare organization's Board of Director's understanding of and commitment to the requirements of this grant for the two-year period of performance. In the case that the rural healthcare organization does not have a Board of Directors, this should be signed by the rural healthcare organization's CEO.

Attachment 6: Memorandum of Understanding (if applicable)

If you are not a rural healthcare organization proposing to implement a project within your own organization, include a signed Memorandum of Understanding (MOU) between you and the rural healthcare organization that represents a strong working relationship and how you will support the rural healthcare organization to meet the intended goals of this program. MOUs should be no longer than 2 pages.

Attachment 7-15: Other Relevant Documents

Include any other documents that are relevant to the application (e.g., proof of non-profit status, indirect cost rate agreements, letters of support, and contracts). Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable. Letters of support must be dated and show a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.).

Other required forms

You will need to complete some other forms. Upload the following forms at Grants.gov. You can find them in the NOFO application package or review them and any available instructions at Grants.gov Forms.

Forms	Submission Requirement
Application for Federal Assistance (SF-424)	With application
Budget Information for Non-Construction Programs (SF-424A)	With application
Disclosure of Lobbying Activities (SF-LLL)	If applicable, with the application or before award.
Budget Narrative Attachment Form	With application

Step 4:
Learn About Review & Award

In this step

Application review

Initial review

We will review your application to make sure that it meets eligibility criteria, including the completeness and responsiveness criteria. If your application does not meet these criteria, it will not be funded.

We will not review any pages that exceed the page limit.

Merit review

A panel reviews all applications that pass the initial review. The members use these criteria.

Criterion	Total number of points = 100
1. Need	20 points
2. Response	25 points
3. Performance reporting and evaluation	10 points
4. Impact	15 points
5. Resources and capabilities	20 points
6. Support requested	10 points

Criterion 1: Need (20 points)

See Project Narrative Introduction and Need sections.

Introduction (10 points)

The panel will review your application for how well it:

- Describes the purpose of the proposed project.
- Clearly proposes a project in a rural healthcare organization in a rural county or parish in the Delta region, as documented in Attachment 3.

Need (10 points)

Community and Healthcare Organization Demographics

The panel will review your application for how well it:

- Clearly identifies the target population(s) to be serviced, including any rural underserved communities and those who suffer from poorer health outcomes, health disparities, and other inequalities.
- Clearly identifies the health care structure and systems beyond the rural healthcare organization, including other providers in the community or distance from the rural healthcare organization to other providers.
- Clearly identifies the health care needs of the service area (e.g., poverty status, uninsured or underinsured, chronic disease burdens, social determinants of health) using demographic data from reliable and recent data sources.

Healthcare Organization Improvement Opportunities

The panel will review your application for how well it:

- Clearly discusses completed technical assistance received from the Delta Region Community Health Systems Development Program, or another similar TA program within the past 5 years.
- Discusses the resulting technical assistance recommendations for areas of improvement that meets one of the DSIP program focus areas.

Criterion 2: Response (25 points)

See Project Narrative [Approach](#), [High-level work plan](#), and [Resolving challenges](#) sections.

Approach: 10 points

The panel will review your application for:

- How well it responds to the identified needs of the target population and service area based on technical assistance recommendations as aligned with the program's [Purpose](#).
- How well the application outlines the implementation plan based on technical assistance consultation recommendations, including the focus area(s) it will address.
- The strength of the proposed plan for sustaining the project's key strategies or services beyond federal funding and actions which will lead to improved practices and outcomes for the target population.

High-level Work plan: 10 points

The panel will review your application for:

- How well the application describes how the applicant will achieve the program objectives during the period of performance.
- How well the application presents a clear timeline of activities with connected goals and objectives and corresponding responsible staff.
- The strength of the proposed goals and objectives and how well they relate to the project.
- How well the application identifies meaningful support with stakeholders and/or consultants in planning, designing, and implementing activities, as needed.

Resolving Challenges: 5 points

The panel will review your application for:

- How well the application discusses likely challenges and corresponding resolutions in designing and carrying out the activities in the work plan.

Criterion 3: Performance reporting and evaluation (10 points)

See Project Narrative [performance reporting and evaluation](#) section.

The panel will review your application for:

- The strength of the discussion on the short-term and long-term outcomes of the funded activities.
- How strong and effective the data collection strategy is to track data and measure progress and outcomes.

Criterion 4: Impact (15 points)

See Project Narrative [High-level work plan](#) section.

The panel will review your application for:

- How impactful the proposed project is likely to be on the rural healthcare organization, target population, and service area.

Criterion 5: Resources and capabilities (20 points)

See Project Narrative [Organizational information](#) and [Evaluation](#) sections.

The panel will review your application to determine the extent to which:

- It describes the organization's current mission, structure, and scope of current activities.
- You demonstrate the capabilities to fulfill the DSIP requirements and expectations.

- You provide evidence that you will successfully implement the proposed improvements based on technical assistance consultation recommendations and previous successful implementation of technical assistance recommendations. If you are not the rural healthcare organization where this project will be implemented, you must demonstrate within the MOU ([Attachment 6](#)) a strong working relationship with the rural healthcare organization and how you will support the rural healthcare organization in meeting the intended goals of this program.

- You demonstrate your organization's ability to properly account for the federal funds and document all costs.

- The staffing plan identifies all key personnel conducting activities central to this program, including a project director with adequate time to oversee the program's administrative, fiscal, and business operations for the entirety of the project.

- The Letter of Commitment demonstrates the organization's Board of Directors' or CEO's understanding of, and commitment to the requirements of this grant for the two-year period of performance, if awarded.

Criterion 6: Support requested (10 points)

See **[Budget & budget narrative](#)** section.

The panel will review your application to determine the extent to which:

- The costs, as outlined in the budget and required resources sections, are reasonable and align with the project's scope.

- The required travel allocations are included in the budget.

- All included equipment costs align with the project objectives.

- Key staff have adequate time devoted to the project to achieve project objectives.

- The subawards/contracts are connected to the project objectives, clearly outlined the services they will perform and total estimated costs, if applicable.

We do not consider **voluntary** cost sharing during merit review.

Risk review

Before making an award, we review your award history to assess risk. We need to ensure all prior awards were managed well and demonstrated sound business practices. We:

- Review any applicable past performance
- Review audit reports and findings
- Analyze the budget
- Assess your management systems

- Ensure you continue to be eligible
- Make sure you comply with any public policies

We may ask you to submit additional information.

As part of this review, we use SAM.gov Entity Information [Responsibility / Qualification](#) to check your history for all awards likely to be more than $250,000 over the period of performance. You can comment on your organization's information in SAM.gov. We'll consider your comments before making a decision about your level of risk.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see [45 CFR 75.205](#).

Selection process

When making funding decisions, we consider:

- The amount of available funds.
- Assessed risk.
- Merit review results. These are key in making decisions but are not the only factor.
- The larger portfolio of HRSA-funded projects, including the diversity of project types and geographic distribution.

We may:

- Fund out of rank order.
- Fund applications in whole or in part.
- Fund applications at a lower amount than requested.
- Decide not to allow a recipient to subaward if they may not be able to monitor and manage subrecipients properly.
- Choose to fund no applications under this NOFO.

Award notices

We issue Notices of Award (NOA) on or around the [start date](#) listed in the NOFO. See Section 4 of the [Application Guide](#) for more information.

By drawing down funds, you accept the terms and conditions of the award.

Step 5:
Submit Your Application

In this step

Application submission and deadlines

Your organization's authorized official must certify your application. See the section on [finding the application package](#) to make sure you have everything you need.

Make sure you are current with SAM.gov and UEI requirements. When you register or update your SAM.gov registration, you must agree to the [financial assistance general certifications and representations](#), and specifically with regard to grants.

Make sure that your SAM.gov registration is accurate for both contracts and grants, as these registrations differ. [See information on getting registered](#). You will have to maintain your registration throughout the life of any award.

Deadlines

Application

You must submit your application by March 20, 2025, at 11:59 p.m. ET.

Grants.gov creates a date and time record when it receives the application.

Submission method

Grants.gov

You must submit your application through Grants.gov. You may do so using Grants.gov Workspace. This is the preferred method. For alternative online methods, see [Applicant System-to-System](#).

For instructions on how to submit in Grants.gov, see the [Quick Start Guide for Applicants](#). Make sure that your application passes the Grants.gov validation checks, or we may not get it. Do not encrypt, zip, or password protect any files.

Have questions? Go to [Contacts and Support](#).

Other submissions

Intergovernmental review

If your state has a process, you will need to submit application information for intergovernmental review under [Executive Order 12372](#). Under this order, states may design their own processes for obtaining, reviewing, and commenting on some applications. Some states have this process and others do not.

To find out your state's approach, see the list of state single points of contact. If you find a contact on the list for your state, contact them as soon as you can to learn their process. If you do not find a contact for your state, you do not need to do anything further.

This requirement never applies to American Indian and Alaska Native tribes or tribal organizations.

Application checklist

Make sure that you have everything you need to apply:

Component	How to Upload	Included in page limit?
☐ **Project abstract**	Use the Project Abstract Summary Form.	No
☐ **Project narrative**	Use the Project Narrative Attachment form.	Yes
☐ **Budget narrative**	Use the Budget Narrative Attachment form.	Yes
Attachments	Insert each in a single Other Attachments form.	
1. Staffing plan & job descriptions		Yes
2. Project organizational chart		Yes
3. Proof of Location in a rural county or parish in the Delta region		No
4. Proof of Previous Technical Assistance		No
5. Board of Directors Letter of Commitment		Yes
6. Memorandum of Understanding (if applicable)		Yes
7 -15. Other Relevant Documents		Yes
Other required forms *	Upload using each required form.	
Application for Federal Assistance (SF-424)		No
Budget Information for Non-Construction Programs (SF-424A)		No
Project/Performance Site Location(s)		No
Grants.gov Lobbying Form		No
Key Contacts		No

* Only what you attach in these forms counts towards the page limit. The forms themselves do not count.

Step 6:
Learn What Happens After Award

In this step

Post-award requirements and administration   [36](#)

Post-award requirements and administration

Administrative and national policy requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the Notice of Award (NOA). We incorporate this NOFO by reference.

- The regulations at 45 CFR part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, and any superseding regulations. Effective October 1, 2024, HHS adopted the following superseding provisions:

  - 2 CFR 200.1, Definitions, Modified Total Direct Cost.

  - 2 CFR 200.1, Definitions, Equipment.

  - 2 CFR 200.1, Definitions, Supply.

  - 2 CFR 200.313(e), Equipment, Disposition.

  - 2 CFR 200.314(a), Supplies.

  - 2 CFR 200.320, Methods of procurement to be followed.

  - 2 CFR 200.333, Fixed amount subawards.

  - 2 CFR 200.344, Closeout.

  - 2 CFR 200.414(f), Indirect (F&A) costs.

  - 2 CFR 200.501, Audit requirements.

- The HHS Grants Policy Statement (GPS). Your NOA will reference this document. If there are any exceptions to the GPS, they'll be listed in your NOA.

- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in HHS Administrative and National Policy Requirements.

- The requirements for performance management in 2 CFR 200.301.

Health information technology interoperability

If you receive an award, you must agree to the following conditions when implementing, acquiring, or upgrading health IT. These conditions also apply to all subrecipients.

Compliance with 45 CFR part 170, subpart B. Make sure your activities meet these standards if they support the activity.

Certified Health IT for Eligible Clinicians and Hospitals. Use only health IT certified by the ONC Health IT Certification Program for activities related to Sections 4101, 4102, and 4201 of the HITECH Act.

If 45 CFR part 170, subpart B standards cannot support the activity, we encourage you to:

- Use health IT that meets non-proprietary standards.
- Follow specifications from consensus-based standards development organizations.
- Consider standards identified in the ONC Interoperability Standards Advisory.

Non-discrimination legal requirements

If you receive an award, you must follow all applicable nondiscrimination laws. You agree to this when you register in SAM.gov. You must also submit an Assurance of Compliance (HHS-690). To learn more, see the Laws and Regulations Enforced by the HHS Office for Civil Rights.

Contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws or call 1-800-368-1019 or TDD 1-800-537-7697.

The HRSA Office of Civil Rights, Diversity, and Inclusion (OCRDI) offers technical assistance, individual consultations, trainings, and plain language materials to supplement OCR guidance. Visit OCRDI's website to learn more about how federal civil rights laws and accessibility requirements apply to your programs, or contact OCRDI directly at HRSACivilRights@hrsa.gov.

Executive order on worker organizing and empowerment

[Executive Order on Worker Organizing and Empowerment (E.O. 14025)](#) encourages worker organizing and collective bargaining to promote equality of bargaining power between employers and employees.

You can support these goals by developing policies and practices that you could use to promote worker power.

Cybersecurity

You must create a cybersecurity plan if your project involves both of the following conditions:

- You have ongoing access to HHS information or technology systems.
- You handle personal identifiable information (PII) or personal health information (PHI) from HHS.
- You must base the plan based on the [NIST Cybersecurity Framework](#). Your plan should include the following steps:

Identify:

- List all assets and accounts with access to HHS systems or PII/PHI.

Protect:

- Limit access to only those who need it for award activities.
- Ensure all staff complete annual cybersecurity and privacy training. Free training is available at 405(d): [Knowledge on Demand (hhs.gov)](#).
- Use multi-factor authentication for all users accessing HHS systems.
- Regularly backup and test sensitive data.

Detect:

- Install antivirus or anti-malware software on all devices connected to HHS systems.

Respond:

- Create an incident response plan. See [Incident-Response-Plan-Basics_508c.pdf (cisa.gov)](#) for guidance.
- Have procedures to report cybersecurity incidents to HHS within 48 hours. A cybersecurity incident is:
- Any unplanned interruption or reduction of quality, or

- An event that could actually or potentially jeopardize confidentiality, integrity, or availability of the system and its information.

Recover:

- Investigate and fix security gaps after any incident.

Reporting

If you are funded, you will have to follow the reporting requirements in Section 4 of the Application Guide. The NOA will provide specific details.

You must also follow these program-specific reporting requirements:

- Progress Reports quarterly.
- Annual performance reports through Electronic Handbooks.

Contacts and Support

In this step

Agency contacts

Program and eligibility

Suzanne Snyder
Public Health Analyst, Hospital State Division
Attn: Delta Health Systems Implementation Program
Federal Office of Rural Health Policy
Health Resources and Services Administration
Email your questions to: RuralHospitals@hrsa.gov
Call: 301-443-0178

Financial and budget

Eric Brown
Grants Management Specialist
Division of Grants Management Operations, OFAAM
Health Resources and Services Administration
Email your questions to: ebrown@hrsa.gov
Call: 301-945-9844

HRSA Contact Center

Open Monday – Friday, 7 a.m. – 8 p.m. ET, except for federal holidays.
Call: 877-464-4772 / 877-Go4-HRSA
TTY: 877-897-9910
Electronic Handbooks Contact Center

Grants.gov

Grants.gov provides 24/7 support. You can call 800-518-4726, search the Grants.gov Knowledge Base, or email Grants.gov for support. Hold on to your ticket number.

SAM.gov

If you need help, you can call 866-606-8220 or live chat with the Federal Service Desk.

Helpful websites

- [HRSA's How to Prepare Your Application page](#)

- [HRSA Application Guide](#)

- [HRSA Grants page](#)

- [HHS Tips for Preparing Grant Proposals](#)

Appendix: Sample Budget Narrative

This is an example of how you can put together a Budget Narrative. You do not need to copy this exactly, but you should include all the budget categories. A detailed budget justification is required for all items within each category for which funds are requested.

BUDGET JUSTIFICATION	Federal Funds Requested
EXPENSES: Object class totals should be consistent with those presented in the Federal Object Class Categories form.	
PERSONNEL – For staff positions supported in whole or in part by federal grant funds, include the information as shown in the Federally Supported Personnel Justification Table. We are requesting personnel funding for one (1) staff member to manage and support the implementation of this grant at_ FTE. This staff member will be responsible for the overall management of the award and ensuring that we complete our activities in a timely manner.	
Project Director @ _ FTE	$_____.__
TOTAL PERSONNEL	**$_____.__**
FRINGE BENEFITS Our fringe benefits include health insurance and Workman's Compensation insurance and is calculated at __% of salary costs. This cost element supports personnel resources for the implementation of the grant project	
FICA @ __%	$_____.__
Medical @ __%	$_____.__
Unemployment & Workers Compensation @ X%	$_____.__
TOTAL FRINGE @ __%	**$_____.__**
TRAVEL – The grant program requires attendance to one 2-3 day national or regional rural health conference.	
NRHA Annual Rural Health Conference, Atlanta, GA May 20-23, 2025	$_____.__

2 Hospital Staff Attending
Airfare: $____ x 2 = $_____
Lodging: $____ x 2 per day x 4 days = $_____
Meals: $____ x 2 per day x 5 days = $_____
Registration: $____ X 2 = $_____

Delta Region Community Health Systems Development Program Summit, Memphis, TN September 13-14, 2025 2 Hospital Staff Attending Airfare: $____ x 2 = $____ Lodging: $____ x 2 per day x 4 days = $_____ Meals: $____ x 2 per day x 5 days = $_____	$_____.__
TOTAL TRAVEL	**$_____.__**

EQUIPMENT – Equipment is tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or $10,000. (Uniform Guidance 2 CFR 200.1Definitions). All tangible personal property other than those described as equipment items with an acquisition cost per unit less than the capitalization threshold are considered supplies. If a non-Federal entity chooses to define equipment using a lower threshold, it will appear as supplies for Federal purposes but as equipment in the non-federal entity records.

We are requesting funding to purchase _____ to support the implementation of our new tele-psych service line addition. This cost will ensure we have the equipment necessary to implement this service line successfully by _____.

_____ @ $____ each	$_____.__
TOTAL EQUIPMENT	**$_____.__**

SUPPLIES

We are requesting funding for the purchase of _____ to support staff in _____ aspect of the implementation of this project.

Printing Costs ($____ per brochure x __ brochures)	
TOTAL SUPPLIES	**$_____.__**

CONTRACTUAL – Include sufficient detail to justify costs.

We are requesting funding to contract with _____ to advise us on the implementation of our new tele-psych service line addition. This will support the completion of project activities by _____.

_____ contractual services	$_____.__
TOTAL CONTRACTUAL	**$_____.__**

OTHER – Include sufficient detail to justify each item.

We are requesting funding to provide training opportunities for our staff. These costs will also cover printing of educational materials and _____. It will also cover administrative charges related to the personnel assigned to manage this grant program, including telephone and internet service charges.

Training Materials	$_____.__
TOTAL OTHER	**$_____.__**
TOTAL DIRECT CHARGES (Sum of all TOTAL Expenses rows above)	**$_____.__**

INDIRECT CHARGES – Include approved indirect cost rate. (If indirect costs are included in the budget, you must include a copy of your federal negotiated indirect cost rate agreement. If you do not have an indirect cost rate agreement, but wish to include indirect costs, then you may use a rate of no more than 15 percent of modified total direct costs (MTDC).)

___% indirect rate (includes utilities and accounting services)	$_____.__
TOTALS (Total of TOTAL DIRECT CHARGES and INDIRECT CHARGES above)	**$_____.__**

Additional Budget Narrative:

See the table below for an example of the information required for staff positions supported in whole or in part by federal grant funds.

Federally-Supported Personnel Justification Table

Name	Position Title	% of FTE	Base Salary	Adjusted Annual Salary	Federal Amount Requested
J. Smith	Project Director	__	$_____	$_____	$_____