HRSA
Health Resources & Services Administration

Office for the Advancement of Telehealth
Telehealth Innovation and Services Division

Regional Telehealth Resource Centers (HRSA-25-042) and National Telehealth Resource Centers (HRSA-25-043) Telehealth Resource Center Program

Opportunity number: HRSA-25-042 and HRSA-25-043

Modified on 1/14

Updates include Table 1 & Webinar Information

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 April 14, 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 (HRSA)

Office for the Advancement of Telehealth

Telehealth Innovation and Services Division

Providing telehealth technical assistance across the country to support medically underserved areas and people.

Key facts

Opportunity name: Regional Telehealth Resource Centers (HRSA-25-042) and National Telehealth Resource Centers (HRSA-25-043) Telehealth Resource Center Program

Opportunity number: HRSA-25-042 and HRSA-25-043

Announcement version: New

Federal assistance listing: 93.211

Statutory authority: 42 U.S.C. § 254c-14(d)(2) (§330I(d)(2) of the Public Health Service Act

Summary

The Health Resources and Services Administration (HRSA) is accepting applications for the following related telehealth programs in FY2025:

- **Regional Telehealth Resource Center program (HRSA-25-042)**
- **National Telehealth Resource Center program (HRSA-25-043)**

> Telehealth is defined as the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, health administration, and public health.

With this funding, recipients will provide expert and customized telehealth technical assistance across the country. These telehealth resource centers will provide training and support, disseminate information and research findings, promote effective collaboration, and foster the use of telehealth technologies to provide health care information and education for health care providers who serve rural areas, frontier communities[1], and medically underserved areas, and medically underserved populations[2].

It is expected that these centers will share expertise through individual consultations, training, webinars, conference presentations, and a significant web presence.

We will fund:

12 organizations under the Regional Telehealth Resource Center (RTRC) announcement **(HRSA-25-042).** Regional TRCs are geographically located to facilitate activities at the local level and to make sure resources are distributed evenly.

2 organizations under the National Telehealth Resource Center (NTRC) announcement **(HRSA-25-043).** National TRCs help provide telehealth support and technical assistance to organizations that receive funding as a regional center as well as providing support

to health care providers across the country. One award will focus on telehealth policy and the other will focus on telehealth technology.

We expect that the recipients of these awards will support effective collaboration across both programs.

You must apply to the correct announcement number.

You may not apply to both announcement numbers, and you may not apply to more than one region for the Regional TRC (HRSA-25-042). See regions.

Funding details

Application type: New, Competing Continuation

Expected total available funding in FY 2025:

- $3,900,000 for Regional TRCs (HRSA-25-042)
- $650,000 for National TRCs (HRSA-25-043)

Expected number and type of awards:

- 12 cooperative agreements for Regional TRCs (HRSA-25-042)
- 2 cooperative agreements for National TRCs (HRSA-25-043)

Funding range per award: Up to $325,000 each budget period.

We plan to fund awards in four 12-month budget periods, for a total 4-year period of performance from September 1, 2025, to August 31, 2029.

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

Key dates

NOFO issue date: January 13, 2025

Informational webinar: See Webinar Section

Application deadline: April 14, 2025

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 you are a domestic public or private, non-profit or for-profit entity.

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 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, and the Republic of Palau.

Individuals are not eligible applicants under this NOFO.

Other eligibility criteria

You must target populations located in rural areas, frontier communities, and medically underserved areas, and medically underserved populations. You must demonstrate experience providing technical assistance and understanding telehealth services.

You must submit proof of consultation with the appropriate State Office of Rural Health, state offices concerning primary care, or another appropriate state government entity. You must submit proof of this consultation in Attachment 5.

> **Consortium applications**
>
> Telehealth Resource Centers can be operated by a consortium of organizations, but only one organization can apply on behalf of the consortium (and will be responsible for administration of the cooperative agreement). All other organizations may be members of the consortium.

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](#).

Application limits

- You must apply to the correct announcement number:
    - HRSA-25-042 for Regional Telehealth Resource Centers
    - HRSA-25-043 for National Telehealth Resource Centers
- Multiple applications from an organization are not allowable and an organization **cannot** apply as both a Regional TRC (HRSA-25-042) and as a National TRC (HRSA-25-043). 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

We welcome eligible organizations to apply for funding under the Regional Telehealth Resource Center (RTRC) program and the National Telehealth Resource Center (NTRC) program.

These telehealth resource centers will support healthcare organizations, networks, and providers with telehealth implementation and training for rural areas, frontier communities, and medically underserved areas, as well as for medically underserved populations.

Regional centers (HRSA-25-042)

We will support 12 regional telehealth resource centers that focus on statewide and regional telehealth activities.

Regional TRCs provide expert technical assistance in the development of telehealth services and leverage the experience of mature telehealth programs. These regional centers will provide training and support, disseminate information and research findings, promote effective collaboration, and foster the use of telehealth technologies to provide health care information and education for health care providers.

They are located regionally to facilitate award activities at the local level and to ensure that resources are geographically distributed.

Table 1: Regions

Northeast Region	Southeast Region	Upper Midwest Region	Northwest Region
• Connecticut • Maine • Massachusetts • New Hampshire • New York • Rhode Island • Vermont	• Alabama • Florida • Georgia • South Carolina • Puerto Rico • Virgin Islands	• Illinois • Indiana • Michigan • Ohio	• Alaska • Idaho • Montana • Oregon • Utah* • Washington • Wyoming
Mid-Atlantic Region	**South Region**	**North Central Region**	**West Region**
• Delaware • District of Columbia • Kentucky • Maryland • North Carolina • Pennsylvania • Virginia • West Virginia • New Jersey	• Arkansas • Mississippi • Tennessee	• Iowa • Minnesota • Nebraska • North Dakota • South Dakota • Wisconsin	• California
South Central Region	**West Central Region**	**Southwest Region***	**Pacific Region**
• Kansas • Missouri • Oklahoma	• Louisiana • Texas	• Arizona • Colorado • Nevada • New Mexico	• American Samoa • Guam • Hawaii • Commonwealth of the Northern Mariana Islands • Federated States of Micronesia • Marshall Islands • Republic of Palau

*In this funding opportunity, Utah will be served by the Northwest TRC, except for the Four Corners Region, which will be served by the Southwest TRC. Upon award, the

Southwest recipients will need to develop a coordinated strategy for serving the shared region.

National centers (HRSA-25-043)

We will support 2 National TRCs, in which one award will focus on telehealth policy, and one will focus on telehealth technology.

These national centers will provide technology and policy training and support, disseminate information and research findings, support effective collaboration, and foster the use of telehealth technologies to improve access, timeliness, cost effectiveness, and quality of health care service delivery.

Objectives

For both funding opportunities you are expected to:

- Advance effective use of telehealth technologies in your respective service areas.
- Collaborate with other Telehealth Resource Center Program recipients and share and combine expertise and resources to create unified telehealth technical assistance capability with effective and efficient educational tools, consulting, and support capabilities.
- Meet the needs of telehealth networks, practitioners, or organizations in your service area including, but not limited to rural health clinics, federally qualified health centers, critical access hospitals, rural emergency hospitals, skilled nursing facilities, State Offices of Rural Health, state offices concerning primary care, and other appropriate state government entities.
- Ideally include populations that suffer from poor health outcomes, health disparities, and other inequities as compared to the national average when addressing telehealth technical assistance. Examples of these populations include, but are not limited to, people experiencing homelessness, pregnant people, disabled individuals, youth and adolescents, persons experiencing hypertension, and tribes and tribal organizations.

Background

This program is authorized by 42 U.S.C. § 254c-14(d)(2) (§330I(d)(2) of the Public Health Service Act. It is administered by the Office for the Advancement of Telehealth (OAT), located within HRSA's Office of the Administrator. View more information about OAT.

Program requirements and expectations

Core services

Awards are expected to be used for the following core services:

- **Providing technical assistance,** training, and support, and providing for travel expenses for health care providers and a range of health care entities that provide or will provide telehealth services.

- **Disseminating information** and research findings related to telehealth services.

- **Promoting effective collaboration** among Telehealth Resource Centers and the HRSA Office for the Advancement of Telehealth (OAT), as well as other OAT award recipients (such as Telehealth Centers of Excellence and technical assistance (TA) providers).

- **Conducting evaluations** to determine the best use of telehealth technologies to meet health care needs.

- **Promoting the integration of the technologies** used in clinical information systems with other telehealth technologies.

- **Fostering the use of telehealth** technologies to provide health care information and education for consumers in a more effective manner.

- **Implementing special projects** or studies in collaboration with OAT.

In providing services, you must collaborate, if feasible, with entities that provide telehealth services or related activities and are:

- Private or public organizations that receive Federal or State assistance.

- Public or private entities that operate centers, or carry out programs, that receive Federal or State assistance.

A Telehealth Resource Center can charge a reasonable fee for continuing assistance in excess of 10 hours of technical help. The 10-hour limit is to make sure everyone has fair access to assistance, since the TRCs are publicly funded. **Any fees received by TRCs must be used to supplement the HRSA award activities and must be reported to HRSA**. The report submission must include the hours and level of effort related to those fees and must be explained in progress and financial reports. Further information will be provided in the [award notice](#).

Award information

Cooperative agreement terms

Our responsibilities

Aside from monitoring and technical assistance, we also get involved in these ways:

- Participating in conference calls or meetings with recipients.
- Supporting effective collaboration among National and Regional TRCs.
- Identifying special projects or studies.
- Involvement and assistance with TRC contacts to other HRSA programs or other federal agencies involved with telehealth, relevant to the function of TRCs.
- Participating and planning as it relates to the strategic direction of the services provided by award recipients.
- Ongoing review of activities and suggestions on content, presentation approach, and selection of products or publications.
- Reviewing or commenting on products or publications.
- Providing input and background on current and future issues.

Your responsibilities

You must follow all relevant laws and policies. Your other responsibilities will include:

- Adhering to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds, per Section 5.1 of the Application Guide.
- Completing activities you've proposed and had reviewed by HRSA, except as modified in consultation with us through the appropriate prior approval processes.
- Maintaining knowledge of federal programs through HRSA, HHS, and other sources that can help link award recipients and stakeholders with appropriate resources and programs.
- Participating in conference calls or meetings with HRSA.
- Collaborating with HRSA in ongoing review of activities and budgets.
- Responding timely to requests for technical assistance to advance telehealth networks or programs.
- Providing most technical assistance at no charge.
- Coordinating with other TRC award recipients to avoid duplication of effort and provide a unified approach to advancing telehealth activity.

- Assessing the market to understand how to best identify and reach target audiences.

- Identifying appropriate professional meetings at which to exhibit each year.

- Participating in evaluation activities such as establishing evaluation metrics or tracking related data to assist in measuring the success of the cooperative agreement in advancing telehealth.

Funding policies and 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.

- Support beyond the first budget year will depend on:
    - Appropriation of funds.
    - Satisfactory progress in meeting the project's objectives.
    - A decision that continued funding is in the government's best interest.

- 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 2025, the salary rate limitation is $225,700. This limitation may be updated.

See Manage Your Grant for other information on costs and financial management.

Program-specific statutory or regulatory limitations

You cannot use funds:

- To acquire real property.

- For expenditures to purchase or lease equipment, to the extent that the expenditures would exceed 20 percent of the total grant funds.

- To pay for any equipment or transmission costs not directly related to the purposes for which the grant is awarded.

- To purchase or install general purpose voice telephone systems.

- For construction.

- For expenditures for indirect costs, to the extent that the expenditures would exceed 15 percent of the total grant funds.

See Manage Your Grant for other information on costs and financial management.

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-25-042** or **HRSA-25-043**.

After you go to the opportunity, we recommend that you click the Subscribe button to get updates.

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

More information about this opportunity, will be post on Grants.gov Related Documents tab.

HRSA-25-042 - https://grants.gov/search-results-detail/355857

HRSA-25-043 - https://grants.gov/search-results-detail/355858

We will record the webinar.

Have questions? See Contacts and Support.

Step 3:
Prepare Your Application

In this step

Application contents and format

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

Application page limit: 60 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. State whether or not you qualify for a funding preference described in Step 4 of this NOFO. If you do qualify for a funding preference, state which qualification you meet.

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 non-discrimination requirements.

Use the section headers and the order listed.

Introduction

> **Regional TRC: See** merit review criterion 1: Need (HRSA-25-042)
>
> **National TRC: See** merit review criterion 1: Need (HRSA-25-043)

Applicants to both the Regional TRC and the National TRC should:

- Briefly describe the purpose of your project.
- Clearly report how you propose to establish or operate a telehealth resource center that provides technical assistance to existing or developing healthcare organizations, networks, and providers.
- If you are proposing a consortium, explain why a consortium is necessary.

Regional TRC (HRSA-25-042) applicants should also:

- Identify the region and states to be served. Briefly describe the demand for technical assistance and provide a summary of the services proposed.

National TRC (HRSA-25-043) applicants should also:

- Clearly demonstrate what expertise you possess and how you will support Regional TRCs or other organizations by providing technical assistance in telehealth technology or policy issues.

Need

> **Regional TRC: See** merit review criterion 1: Need (HRSA-25-042)
>
> **National TRC: See** merit review criterion 1: Need (HRSA-25-043)

This section should help your reviewers understand the needs of the population groups/states that could be addressed through enhanced telehealth services in rural areas, frontier communities, and medically underserved areas, and for medically underserved populations. It should help reviewers understand the need for telehealth technical assistance to be addressed.

Applicants to both the Regional TRC and the National TRC should:

- Use and cite demographic data whenever possible to support the information provided.

  ◦ Describe and document the target population and their unmet health needs. Include populations that suffer from poor health outcomes, health disparities, and other inequities as compared to the national average when addressing telehealth technical assistance. Examples of these populations include, but are not limited to, people experiencing homelessness, pregnant people, disabled individuals, youth and adolescents, persons experiencing hypertension, and tribes and tribal organizations.

- Include information about other technical assistance services that may be available and how such services could be used or integrated, and not duplicated to advance telehealth.

Regional TRC (HRSA-25-042) applicants should also:

Clearly address how the Regional TRC will demonstrate how telehealth technologies could be used to:

- Meet the health care needs of rural or other populations to be served through the project, and improve the access to services of, and the quality of the services received by, those populations.

- Improve and expand the training of health care providers.

- Address the actual and potential relevant barriers that telehealth projects face in the region (for example, specific legislative or regulatory issues, specific reimbursement challenges, technical infrastructure challenges, sociocultural challenges, barriers to access, and organizational challenges).

National TRC (HRSA-25-043) applicants should also:

- Outline critical telehealth policy or technology barriers that exist and identify the demand for technical assistance as it relates to the respective telehealth policy or technology areas.

Approach

> **Regional TRC: See merit review criterion 2: Response (HRSA-25-042)**
>
> **National TRC: See merit review criterion 2: Response (HRSA-25-043)**

Applicants to both the Regional TRC and the National TRC should:

- Describe your plan to provide technical assistance to healthcare organizations, networks, and providers with telehealth implementation and training for rural areas, frontier communities, and medically underserved areas, as well as for medically underserved populations including how you will address the breadth of requests for services.
- Identify the mechanisms by which you will identify organizations in need of assistance.
- Identify the method of initial contact from communities and clients, (such as through the website, a toll-free number, or contact at a meeting or conference).
- Describe how you will clearly track the outcome of the technical assistance (for example, a new site or service was established).
- Tell us how you'll address your stated needs and meet the program requirements and expectations described in this NOFO.
- Include strategies for ongoing staff training, teamwork, and information sharing.
- Include strategies for outreach and collaboration efforts to involve patients, families, and communities. If it applies, include a plan to distribute reports, products, or project outputs to target audiences.
- Describe how you will coordinate with the State Office of Rural Health or other appropriate state entity.
- Propose a plan for continuing the project when federal funding ends. We expect you to keep up key strategies or services and actions that have led to improved practices and outcomes for the target population.
- Include a strategy to share information. Lessons learned and best practices should be included. Clearly indicate how you have and will collaborate and share expertise with new or existing providers of telehealth services at the national, regional, state and local levels. You should discuss your plan for the following core services:
  - **Providing technical assistance**, training, and support, and providing for travel expenses for health care providers and a range of health care entities that provide or will provide telehealth services.

- ◦ **Disseminating information** and research findings related to telehealth services.

- ◦ **Promoting effective collaboration** among telehealth resource centers and the HRSA Office for the Advancement of Telehealth (OAT), as well as other HRSA award recipients such as Telehealth Centers of Excellence and TA providers.

- ◦ **Conducting evaluations** to determine the best use of telehealth technologies to meet health care needs.

- ◦ **Promoting the integration of the technologies** used in clinical information systems with other telehealth technologies.

- ◦ **Fostering the use of telehealth** technologies to provide health care information and education for consumers in a more effective manner.

- ◦ **Implementing special projects** or studies under the direction of HRSA.

Delivery modes for sharing expertise

You must identify the means by which clients will contact your organization for technical assistance and the ways in which you will share expertise. Examples of potential delivery modes include:

- **One-to-one**: One or more telehealth resource center staff members interact directly with an individual or a group of individuals representing a single organization.

- **Peer-to-peer**: Arranging for an entity with a particular expertise to provide assistance to another organization or individual that requested technical assistance from the telehealth resource center.

- **One-to-many**: One or more telehealth resource center staff members interacting directly and simultaneously with a group of entities made up of people who represent different organizations or organizational units.

- **Broad public**: In cooperation with all telehealth resource centers, each center should also provide public programs and webinars, recorded and posted for later viewing (for example, on a public-facing website).

For each service you propose to provide, you must clearly specify the ways you plan to deliver the service and how you will track the volume of services provided, the products or output of the service, and, where appropriate, the outcome of the service.

Outreach tools

Describe the specific tools you have or will develop to share expertise (like webinars, toolkits, workshops, focus groups, and conferences) as well as tools developed for industry adoption and sale. Lists of clients may be included (with benefits gained from tools, especially if benefits take a year or more to develop after the service was delivered).

- Include a plan for sustaining the project after federal support for the project has ended. Such plans could include affiliation with a health care program, association, or company related to telehealth, or solicitation of other funding sources like private donations or non-federal awards.

- Refer to the types of services or products you will use to help a provider or a community with its strategic development or expansion of a telehealth program. The proposed services should be clearly linked to [identified needs](#) and must be consistent with the resources available.

- Detail the delivery modes to be used for your service (like one-to-one, peer-to-peer, one-to-many, broad public) and the outreach tools you will use.

- Explain, if you lack expertise in an area of need, how collaboration with other organizations (especially other Regional TRCs and National TRCs) might address those areas.

- Address how you may coordinate with, or avoid duplicating services from, other public resources that advance the practice of telehealth.

Regional TRC HRSA-25-042 applicants should also:

Address how you will collaborate with other HRSA-funded Regional and National Telehealth Resource Centers to leverage each other's expertise to provide telehealth technical assistance as efficiently as possible across the nation.

Regional TRCs have historically provided technical assistance to:

- Develop organizational capacity to build telehealth networks.

- Develop and implement telehealth programs including workflow operations and development, business models, return on investment (ROI), best practices, strategic planning, provider coordination, and working with communities to establish telehealth services.

- Expand the range of clinical services using telehealth beyond ambulatory care, including critical and emergency care, inpatient, nursing home, residential and home care, and chronic disease management.

- Integrate telehealth and health information systems.

- Support distance education and training, including creation or operation of technology-enabled collaborative learning and capacity models.
- Understand or select telecommunications and telehealth technologies.
- Use mobile devices, or mHealth.
- Share resources and information related to telehealth regulation, policy, licensure, credentialing or reimbursement.
- Evaluate telehealth programs and information collection.
- Maintain a public access map or registry of telehealth providers through contact or self-reporting of telehealth networks or providers.
- Focus on HRSA priorities while addressing technical assistance and training, including but not limited to these priority areas:
  - Maternal health
  - Hypertension
  - Heart disease
  - Cancer
  - COVID-19

National TRC HRSA-25-043 applicants should also:

- Address how you plan to track your activities and effectively provide technical assistance across the nation to address a myriad of policy or technology challenges.
- Explain how you will support the Regional TRCs.
- Examples of areas in which National TRCs could provide information and expertise include the following.

For Policy TRC:

- Telehealth reimbursement policy.
- State and national rules and issues pertaining to licensing, credentialing, and privileging of telehealth providers.
- Regulatory issues including tele-prescribing.
- Telecommunications and broadband policies and funding.
- Policies pertaining to telehealth and the Health Insurance Portability and Accountability Act (HIPAA).
- Regulatory issues pertaining to remote patient monitoring or direct-to-consumer telehealth.
- Regulatory issues concerning mobile health (mHealth).
- Telehealth service delivery standards and guidelines.

For Technology TRC:

- Telehealth system technology planning, selection, evaluating, operating, maintaining, or upgrading.
- Telecommunications and broadband technology and issues (terrestrial and wireless) relevant to telehealth.
- Technical issues of hardware interfacing or integration.
- Technical issues of system interfacing or integration, such as telehealth and health information, billing, scheduling, or administrative systems.
- Technology for remote patient monitoring.
- General technology problem-solving or referral (the TRC should not plan to perform technology troubleshooting, however).
- Cybersecurity issues relevant to telehealth.
- Technology alerts for telehealth equipment.
- Telehealth technology standards and guidelines.

Additional policy or technology areas you plan to address should be detailed and if topics above will not be addressed, explain why you are not addressing the sample topics.

High-level work plan

> **Regional TRC: See merit review criteria 2: Response (HRSA-25-042) and 4: Impact (HRSA-25-042)**
>
> **National TRC: See merit review criteria 2: Response (HRSA-25-043) and 4: Impact (HRSA-25-043)**

Applicants to both the Regional TRC and the National TRC should:

- Describe how you'll achieve each of the objectives during the period of performance.
- Provide a timeline that includes each activity and identifies who is responsible for each. As needed, identify how key stakeholders will help plan, design, and carry out all activities, including the application.
- Describe, in detail, the technical assistance services you will provide, to whom you intend to provide them, and the available tools and resources to be used in providing those services. This should include the core services listed under Approach.
- Clearly address how you will assess the demand for your services and track changes in this demand over time.

- Present an implementation schedule that identifies major project tasks and milestones, as well as impact.

- Demonstrate the ability to start implementing upon receipt of award.

- Describe in detail the technical approach employed in the project and how you will stay organized and work together.

- Explain how you will track use of your services, including the number of programs or providers that use specific TRC services and the outcomes of those services (additional telehealth sites or services, expansion or clarification of reimbursement or licensing issues, resolution of technology issues, or other evidence of advancing the state of telehealth and documenting how the TRC was involved).

- Describe the expertise, resources, and services currently available to meet the project's objectives of providing technical assistance on a wide range of telehealth issues.

- Demonstrate plans and capability for sharing best practices and lessons learned from successes and failures.

- Include goals in the work plan for the entire proposed three-year period of performance.

- Plan to comply with Section 508 of the Rehabilitation Act of 1973, as amended.

- Include your detailed work plan in [Attachment 1](#).

Regional TRC HRSA-25-042 applicants should also:

- Describe current experience, skills, and knowledge, including those of individuals on staff, in providing technical assistance to health care providers and entities, evaluation, telehealth policy activities in your region and state, educational outreach and information dissemination, and other relevant experience. Describe specific strengths that make you uniquely qualified to work with the regions or states identified in the application. You are encouraged to reference materials published and previous work of a similar nature.

- Demonstrate the experience necessary to provide an understanding of technological, clinical, educational, and administrative aspects of relevant telehealth services. You must provide specific strategies for sharing lessons learned and collaborating with providers of telehealth services. Demonstrated ability to solve difficult challenges at the health care provider or network level for both start-up and advanced programs should be detailed.

National TRC HRSA-25-043 applicants should also:

- Describe current experience, skills, and knowledge, including those of individuals on staff, in providing assistance to health care providers or others on telehealth

policy or technology and other relevant experience. You are encouraged to reference materials published and previous work of a similar nature.

- Demonstrate the experience necessary to provide an understanding of policy or technological aspects of relevant telehealth services.
- Provide specific strategies for sharing lessons learned and collaborating with Regional TRCs or telehealth programs.
- Include processes for improving telehealth access among identified vulnerable populations. You are encouraged to use the methods outlined in the National Culturally and Linguistically Appropriate Services Standards.
- Develop a common resource that can allow interested parties to draw on the collective information of Regional TRCs or direct inquiries to region or state-specific information. National TRCs focused on policy are also encouraged to maintain a calendar of telehealth training and events offered by all Telehealth Resource Centers in the program.

Resolving challenges

> For Regional TRC: See merit review criterion 2: Response (HRSA-25-042)
>
> For National TRC: See merit review criterion 2: Response (HRSA-25-043)

Applicants to both the Regional TRC and the National TRC should:

- Discuss possible challenges you may face in designing and carrying out the activities in the work plan. Explain how you'll resolve them.

Performance reporting and evaluation

> For Regional TRC: See merit review criteria 3: Performance reporting and evaluation and 5: Resources and capabilities
>
> For National TRC: See merit review criteria 3: Performance reporting and evaluation and 5: Resources and capabilities

Applicants to both the Regional TRC and the National TRC should:

- Evaluate the effectiveness of award fund use for project activities.
- You must conduct a self-assessment at the end of each project year as part of your annual progress report.
- The self-assessment will provide information to identify your project's strengths and areas for improvement.

- Specifically, the self-assessment **should include, but is not limited to**, the following elements:
  - **Outcomes-focused:** Ensure that the goals and objectives of the project are assessed.
  - **Data collection:** Illustrate accuracy and consistency of data collected, producing results that are as objective as possible. Ensure that data collection methods are feasible for the project and data are collected in a timely manner. Explain how data will be used to help inform quality improvement strategies and future efforts.
  - **Sustainability:** Identify progress on strategies that could lead to viability and sustainability after federal funding ends.
  - **Quality improvement:** Identify areas of improvement in your work plan based on the findings of the assessment.
- Describe how you will address the following in your self-assessment:
  - Provide **baseline numbers** (qualitative/quantitative) for your activities and performance measures.
  - Describe **how you will monitor TA** throughout the period of performance and, when necessary, make changes to improve quality and customer service.
  - Describe the **expected outcomes** (desired results) of the funded activities.
  - Describe how you will **collect and report** required performance data accurately and on time.
  - Describe how you will **manage and securely store data**.
  - Describe how you will **monitor and analyze performance data** to support continuous quality improvement.

See [Reporting](#) for more information.

Organizational information

> **For Regional TRC: See merit review criterion 5: Resources and capabilities**
>
> **For National TRC: See merit review criterion 5: Resources and capabilities**

Applicants to both the Regional TRC and the National TRC should:

- Briefly describe your mission, structure, and the scope of your current activities. Explain how they support your ability to carry out the program requirements. You'll include a [project organizational chart](#) in your attachments.
- Describe how these contribute to your ability to be a Telehealth Resource Center.

- Provide evidence of institutional commitment of the entity to the project.

- Clearly describe the extent to which you will involve representatives from the provider communities or populations in both the design and operation of the TRC.

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

- Describe how you'll assess the unique needs of the people who live in the areas you serve.

- Describe your organizational profile, budget, partners, key processes, and your key staff's experience, skills, and knowledge.

- If your parent organization also provides telehealth services, explain how you will ensure that you can provide technical assistance impartially and independently.

- Provide information that demonstrates your ability and experience managing multiple projects, while addressing the details necessary for projects to run smoothly. Given the spectrum and scope of work required, extensive organizational skills are considered an essential characteristic for a TRC. You must demonstrate your ability to track all technical assistance requests and document outcomes resulting from services provided.

Consortiums

If you are applying as part of a consortium, you must also provide information about how the various components will function, with the roles and responsibilities of all components specifically addressed in the application.

Consortium applicants must clearly demonstrate an ability to collaborate and be able to develop strong working relationships. You must also have standard protocols throughout the consortia or network for receiving, tracking, data collection, and follow-up for all technical assistance requests.

Clearly describe your partnerships as an ongoing and integral part of project planning and operation, as appropriate. (A list of partners should be included in Attachment 8). You are responsible for all fiscal, administrative, and programmatic aspects of the application and award.

Budget and budget narrative

> For Regional TRC: See merit review criterion 6: <u>Support Requested</u>
>
> For national TRC: See merit review criterion 6: <u>Support Requested</u>

The following applies to applicants to both the Regional TRC and the National TRC:

Your **budget** should follow the instructions in Section 3.1.4: Project Budget Information — Non Construction Programs (SF-424A) of the <u>Application Guide</u> and the instructions listed in this section. Your budget should show a well-organized plan.

HHS now uses the definitions for <u>equipment</u> and <u>supply</u> in 2 CFR 200.1. The new definitions change the threshold for equipment to the lesser of the recipient's capitalization level or $10,000 and the threshold for supplies to below that amount.

The total project or program costs are all allowable (direct and indirect) costs used 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 <u>other required forms</u>. It includes an itemized breakdown and a clear justification of the costs you request. 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. See <u>Funding policies and limitations</u>.

In addition, we require the following:

- Travel: Your travel budget should include funds for a maximum of two staff members to attend two annual recipient meetings in the Washington, DC area.
- Information on the source and amount of non-Federal funds that the entity will provide for the project.

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

Attachments

Place your attachments in this order in the Attachments Form. See application checklist to determine if they count toward the page limit.

Clearly label each attachment.

Attachment 1: Work plan

Attach the project's work plan. Make sure it includes everything required in the Project narrative section.

Attachment 2: Staffing plan and job descriptions

See Section 3.1.7 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 the amount of time you request for each staff position.

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

Attachment 3: Biographical sketches

Include biographical sketches for people who will hold the key positions you describe in Attachment *2*.

For key personnel, include no more than one-page biographical sketches per person. Do not include non-public, personally identifiable information. If you include someone you have not hired yet, provide a letter of commitment from that person with the biographical sketch.

Attachment 4: List of agreements with other entities

Provide a list of agreements with other entities and the agreed-upon deliverables for each entity. The list may include working relationships between your organization and others you refer to in the proposal.

Upon request: We may ask you at a later time to provide documents that confirm actual or pending contracts or agreements that clearly describe the roles of subrecipients and contractors and any deliverable. These must be signed and dated.

Consortiums

If you are applying on behalf of a consortium of entities to be involved in the telehealth resource center, list the members, key contact, and contact information.

Attach the detailed agreement among the participants signed by the appropriate authority (organization CEOs or equivalent authority). Highlight the organizational relationships within the consortium, the defined organizational role of each member in the proposed TRC, and the financial and personnel commitment of each member to the project.

Consortium members must have a proven history of collaboration together on common projects. The agreement must reflect clear organizational relationships within the consortium and the defined organizational role of each member in the proposed TRC.

Attachment 5: Proof of consultation with state partners

Provide proof of consultation with the State office of Rural Health, State offices concerning primary care, or other appropriate State government entities regarding your intent to apply for this program.

See eligibility.

To be eligible to receive an award, you must consult with the appropriate state office. For details, see 42 U.S.C. 254c-14(g) of the Public Health Service Act.

Attachment 6: Documentation for funding preference

Provide documents that prove you qualify for one of the three funding preferences described more fully in Step 4 of this NOFO:

- Provision of services
- Collaboration and sharing of expertise
- Broad range of telehealth services

To receive a funding preference, you must include a statement that you qualify for a funding preference in your abstract, and identify the qualification you meet.

Include documentation of this qualification. Not scored during the objective review.

Attachment 7: Project organizational chart

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

Attachment 8: List of partners (if applicable)

Identify and describe the agencies, organizations, or groups that are part of the project (including consortia members).

Identify and define the work to be done by each of those agencies, organizations, or groups.

Attachment 9: Progress report for competing continuation applications (not scored during merit review)

If your application is to request continued funding for a project that is in the final budget period of a period of performance, you can include your progress report as an attachment. If you do not receive an award under this NOFO, you will need to submit the final progress report through the usual processes.

Your progress report should briefly present your accomplishments related to the program objectives during the current period of performance. Include:

- The period covered
- Specific project objectives
- The program activities conducted for each objective
- Positive or negative results or technical problems

Attachment 10-15: other relevant documents

You may use attachments 10 through 15 to add other relevant documents.

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.
Project/Performance Site Location(s)	With application.
Grants.gov Lobbying Form	With application.
Key Contacts	With application.

Step 4:
Learn About Review and Award

In this step

Application review

Initial review

We review each application to make sure 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	10 points
2. Response	30 points
3. Performance reporting and evaluation	15 points
4. Impact	15 points
5. Resources and capabilities	25 points
6. Support requested	5 points

Jump to sections:
- HRSA-25-042: Regional Telehealth Resource Centers
- HRSA-25-043: National Telehealth Resource Centers

HRSA-25-042: Regional Telehealth Resource Centers

Criterion 1: Need (HRSA-25-042) (10 points)

See Project Narrative Introduction and Need sections.

The panel will review your application for how well it:
- Displays a clear understanding of the needs for telehealth technical assistance services.
- States the purpose of the proposed project.

- Describes how the applicant proposes to establish or operate a TRC that provides technical assistance to existing or developing healthcare providers, networks, and a range of health care entities that provide or will provide telehealth services.
- Demonstrates knowledge of the availability and state of telehealth services in the proposed region.
- Provides sufficient evidence including quantitative data demonstrating the demand for the proposed RTRC technical assistance services from the community, end users, and potential beneficiaries in the proposed region.
- Adequately addresses the actual and potential relevant barriers that telehealth projects face in the region (like specific legislative or regulatory issues, specific reimbursement challenges, technical infrastructure challenges, sociocultural challenges, barriers to access for vulnerable populations, and organizational challenges).
- Demonstrates how you will track the regional changes in the demand for TRC services.
- If you are proposing a consortium, explain why a consortium is necessary and show that the consortium has a history of working together.

Criterion 2: Response (HRSA-25-042) (30 points)

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

The panel will review your application for:

Approach (14 points)

- How well it addresses the [core services](#).
- How well it describes its response to the needs identified and the strategy to be used to provide technical assistance to health care providers and other health care entities that provide or will provide telehealth services.
- How well the application addresses HRSA priorities listed (pg. 18).
- The clarity and completeness of the description of a realistic, feasible approach to providing technical assistance, training, and support for health care providers that are planning or implementing telehealth services.
- The quality of your organization's experience and proposed strategies for sharing and disseminating lessons learned from the experience of existing or emerging telehealth programs and services.
- The extent to which the application describes a strategy to share lessons learned and best practices with new or existing telehealth programs and stakeholders.

- The quality of the strategy proposed to identify and proactively target communities in need of technical assistance.

- The strength of the description of the outreach tools to provide technical assistance including webinars, toolkits, workshop, focus groups, conferences, and other tools.

- The strength, relevance, and appropriateness of the data to document your unique qualifications to meet the challenges to helping advance telehealth services in the region, including how you will address such challenges in consideration of current telehealth programs in the region.

- The extent to which you have provided proof of consultation with State Offices of Rural Health, state offices of primary care, or other appropriate state government entities.

Work plan (12 points)

- The appropriateness of activities proposed considering the technical assistance needs in the region and the specificity with which you identify and propose to address those needs. Illustrations should be given of ability to solve difficult challenges at the health care provider or network level. Assistance plans for both start-up and advanced programs should be detailed.

- The ability of the proposed RTRC, their proposed services, and products to assist providers and organizations to establish or expand telehealth programs and serve as a resource for existing telehealth programs regarding changes in technology, policies or other issues affecting telehealth services.

- The specificity with which you identify partners and their qualifications, experience, and roles and responsibilities in the project.

- The clarity of the work plan that will be used to achieve each of the activities proposed, including all seven core services, including the timeline, activity, goals and responsible staff.

- The quality of your past experience in the seven core services or areas of need you identified.

Resolution of challenges (4 points)

- The extent to which you have clearly and effectively identified the challenges you are likely to encounter in designing and implementing the activities described in the work plan.

- The extent to which you have described the approaches you will use to resolve identified challenges.

- The extent to which you have described previous experience in the design and implementation of telehealth activities.

- How well your proposed project responds to the program's [purpose](#).
- The strength of the proposed goals and objectives and how well they relate to the project.
- How well the activities described will address the problem and meet project objectives.

Criterion 3: Performance Reporting and Evaluation (HRSA-25-042) (15 points)

See **[Approach](#), [High-level work plan](#), and [Performance Reporting and Evaluation](#)** sections.

The panel will review your application for:

- The extent to which project staff have the training and experience to carry out performance reporting and program evaluations
- The extent to which you have demonstrated specific objectives to be achieved and measures by which the achievement can be assessed.
- The extent to which you have provided evidence that evaluation data will be routinely monitored, evaluated, and communicated.
- The extent to which the applicant provides evidence that if evaluation targets are not met, there is a procedure in place to realign program activities or try new approaches necessary to get the desired data outcomes needed to achieve program goals and objectives.
- The degree to which you have described obstacles and solutions to implementing the program assessment.
- The extent and creativity of your organization in tracking:
  - The method of initial contact from communities and clients.
  - The volume of services.
  - The demand for services.
  - Use of services.
  - The outcome of their services and determining if new telehealth sites or services are established due to their activities.

Criterion 4: Impact (HRSA-25-042) (15 points)

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

The panel will review your application for:

- How effective the proposed project is likely to be.
- How strong of a public health impact it is likely to have.

- How effective your plans are for sharing project results.
- The likely impact on the community or target population.
- How likely the project results could be national in scope.
- How easy it will be to replicate project activities.
- How likely the program is to continue beyond the federal funding.

Criterion 5: Resources and capabilities (HRSA-25-042) (25 point)

See Project Narrative Organizational information and High-Level Work Plan Performance Reporting and Evaluation sections.

The panel will review your application for:

Organizational information (20 points)

- Your resources and capabilities to support the proposed services.
- The extent to which project personnel are qualified by training and experience to provide telehealth technical service.
- The extent to which you have demonstrated your ability to provide telehealth technical assistance.
- The extent to which you have demonstrated experience in providing telehealth technical assistance services, as evidenced by the size of the program, years of experience in providing services, and publications and documents demonstrating expertise.
- The extent that you explain how you will ensure that you can provide technical assistance impartially and independently of a parent organization that also provides telehealth services.
- The extent to which you have demonstrated you have previously met needs of health care providers for training, evaluation, and patient care.
- The extent to which you have involved representatives from the providers or populations served in the design and operation of the RTRC.
- The degree to which you will engage in local and regional collaborations to pursue your objectives and overcome challenges.
- The extent to which your application outlined incentives to include and sustain the involvement of committed community stakeholders.
- The clarity and feasibility of standard protocols throughout the consortia/network (if proposed) for receiving, tracking, and following-up on technical assistance requests.

- The extent to which you have identified current experience, skills, and knowledge, including those of individuals on staff, in providing technical assistance to other networks, business/strategic planning, evaluation, telehealth policy activities in your region and state, educational outreach and information dissemination, and other relevant experience.

Work plan (5 points)

- The extent to which you have demonstrated knowledge of and capacity to assist programs with diverse funding sources.
- The description of your capacity to obtain key staffing and begin work immediately at start of the period of performance.

Criterion 6: Support requested (HRSA-25-042) (5 points)

See **Budget and budget narrative** section.

The panel will review your application for:

- How reasonable the proposed budget is for each year of the period of performance.
- Whether costs, as outlined in the budget and required resources sections, are reasonable and align with the project's scope.
- The demonstration that the full-time equivalent (FTE) staffing expertise to implement and maintain the project is realistic, necessary, and justified.
- The extent to which you have provided a complete and detailed narrative and justification to support each line item on the SF-424A budget form and the allocation of resources.
- The extent to which you provided a plan for sustaining the project after federal support for the project has ended.

HRSA-25-043: National Telehealth Resource Centers

Criterion 1: Need (HRSA-25-043) (10 points)

See Project Narrative **Introduction** and **Need** sections.

The panel will review your application for:

- How well you described the problem and its contributing factors.
- The extent to which your application displays a clear understanding of the needs for telehealth technical assistance services.
- How well you have stated the purpose of the proposed project.

- The quality of your described proposal to establish or operate a TRC that provides technical assistance to healthcare entities that provide or will provide telehealth services.

- The extent to which your application provides evidence, including quantitative data, demonstrating the demand for proposed National TRC assistance from Regional TRCs and healthcare entities that provide or will provide telehealth services.

- The extent to which you have adequately addressed the actual and potential relevant barriers that telehealth projects face in their proposed area (such as specific legislative or regulatory issues, specific reimbursement challenges, technical infrastructure challenges, barriers to access for vulnerable populations, and organizational challenges).

- The extent to which you have demonstrated how you will track changes in the demand for National TRC services.

- The extent to which your application describes the needs of rural areas, frontier communities, medically underserved areas, and medically underserved populations.

- How well you have explained the necessity of a consortium, if you are proposing one, and how well you have demonstrated a history of working together.

Criterion 2: Response (HRSA-25-043) (30 points)

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

The panel will review your application for:

Approach (14 points)

- How well you have addressed the [core services.](#)

- The extent to which your proposed project displays a realistic, feasible approach to providing technical assistance, training, and support, and providing for travel expenses, for health care providers and a range of healthcare entities that provide or will provide telehealth services.

- How well your application addresses HRSA priorities listed.

- The quality of the strategy proposed to identify and proactively target those in need of assistance to advance telehealth in rural areas, frontier communities, medically underserved areas, and medically underserved populations.

- The strength of the description of the outreach tools to provide technical assistance including webinars, toolkits, workshop, focus groups, and conferences.

- The strength, relevance, and appropriateness of the data to document your qualifications to serve as a resource for the policy, technology or other challenges faced by current or potential telehealth service providers and networks or Regional TRCs.
- The clarity of the approach to deliver technical assistance to Regional TRCs and healthcare entities that provide or will provide telehealth services, including a description of the service delivery mode (one-to-one, peer-to-peer, one-to-many, and broad public).
- The degree to which you have demonstrated a plan to collaborate with other telehealth policy or technology advisors.
- The quality of your experience and proposed strategies for sharing and disseminating lessons learned from the experience of existing or emerging telehealth programs and services.
- The extent to which you have described your strategy to share lessons learned and best practices with new and/or existing telehealth programs and other key stakeholders.

Work Plan (12 points)

- The appropriateness of activities proposed considering the technical assistance needs and the specificity with which you have proposed to address them.
- The clarity of the work plan that will be used to achieve each of the activities proposed, including all seven core services, including the timeline, activity, goals, and responsible staff.
- The quality of your past experience in the seven core services or the areas of need you have identified.
- The strength of the description of any shifts in demand for telehealth technical assistance and how your services may change in response, if awarded further funding, if you have previously served as a National or Regional TRC.
- The extent to which you have involved representatives from stakeholder communities in planning the operation of your National TRC.
- The specificity with which you have identified all partners and their qualifications, experience, and roles/responsibilities in the project.

Resolution of Challenges (4 points)

- The extent to which you have clearly and effectively identified the challenges you are likely to encounter in designing and implementing the activities described in the work plan.
- The extent to which your application describes the approaches you will use to resolve identified challenges.

- The extent to which you have described previous experience in the design and implementation of telehealth activities.
- How well your proposed project responds to the program's [purpose](#).
- The strength of the proposed goals and objectives and how well they relate to the project.
- How well the activities described will address the problem and meet project objectives.

Criterion 3: Performance reporting and evaluation (HRSA-25-043) (15 points)

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

The panel will review your application for:

- How strong and effective the method is to monitor and evaluate project results.
- Evidence that the measures will assess how well program objectives have been met and to what extent the results are attributed to the project.

Criterion 4: Impact (HRSA-25-043) (15 points)

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

The panel will review your application for:

- How effective the proposed project is likely to be.
- How strong of a public health impact it is likely to have.
- How effective your plans are for sharing project results.
- The likely impact on the community or target population.
- How likely the project results could be national in scope.
- How easy it will be to replicate project activities.
- How likely the program is to continue beyond the federal funding.
- The extent to which National TRC applicants have experience at the national level in successfully addressing telehealth policy or technology concerns, as measured by impacts on those issues or policies.

Criterion 5: Resources and capabilities (HRSA-25-043) (25 points)

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

The panel will review your application for:

- Whether project staff have the training or experience to carry out the project.
- Whether you demonstrate the capabilities to fulfill the needs of the proposed project.
- Whether you have adequate facilities available to fulfill the needs of the proposed project.

Criterion 6: Support requested (HRSA-25-043) (5 points)

See [Budget and budget narrative](#) section.

The panel will review your application for:

- How reasonable the proposed budget is for each year of the period of performance.
- Whether costs, as outlined in the budget and required resources sections, are reasonable and align with the project's scope.
- Whether key staff have adequate time devoted to the project to achieve project objectives.
- The extent to which your application provides a complete and detailed narrative and justification to support each line item on the SF-424A budget form and the allocation of resources.
- The extent to which you provided a plan for sustaining the project after federal support for the project has ended.

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.
- The funding preferences listed.
- The results of reviewing the progress report submitted with a competing continuation application that seeks to a new period of performance.

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.

Funding preferences

This program includes funding preferences, based on 42 U.S.C. § 254c-14(h)(2) (§330I(h)(2) of the Public Health Service Act). If we determine that your application meets these criteria, we will move it up in our ranking of fundable applications. Qualifying for a funding preference does not guarantee that you will receive funding.

You qualify for a funding preference if you meet at least one of the following qualifications:

- **Qualification 1: Provision of services.** You qualify for a funding preference if you have a record of success in the provision of telehealth services to rural areas, medically underserved areas, or medically underserved populations.

- **Qualification 2: Collaboration and sharing of expertise.** You qualify for a funding preference if you have a demonstrated record of collaborating and sharing expertise with providers of telehealth services at the national, regional, State, and local levels.

- **Qualification 3: Broad range of telehealth services.** You qualify for a funding preference if you have a record of providing a broad range of telehealth services, which may include—

  - A variety of clinical specialty services.

  - Patient or family education.

  - Health care professional education.

  - Rural residency support programs.

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 April 14, 2025, at 11:59 p.m. ET.

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

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 the Attachments Form in this order.	
☐ Attachment 1: Work plan		Yes
☐ Attachment 2: Staffing plan and job descriptions		Yes
☐ Attachment 3: Biographical sketches		No
☐ Attachment 4: List of agreements with other entities		Yes
☐ Attachment 5: Proof of consultation with state partners		Yes
☐ Attachment 6: Documentation for funding preference		Yes
☐ Attachment 7: Project organizational chart		Yes
☐ Attachment 8: List of partners (if applicable)		Yes
☐ Attachment 9: Progress report (if applicable)		Yes
☐ Attachment 10: Other relevant document		Yes
☐ Attachment 11: Other relevant document		Yes
☐ Attachment 12: Other relevant document		Yes
☐ Attachment 13: Other relevant document		Yes
☐ Attachment 14: Other relevant document		Yes

☐ Attachment 15: Other relevant document		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
☐ Disclosure of Lobbying Activities (SF-LLL)		No
☐ Project/Performance Site Location(s)		No
☐ Grants.gov Lobbying Form		No
☐ Key Contacts		No

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

Step 6:
Learn What Happens After Award

In this step

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)](#), Supply.
  - [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 and promotes 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.

---

1. Review   2. Get Ready   3. Prepare   4. Learn   5. Submit   **6. Award**   Contacts

You must also follow these program-specific reporting requirements:

- **Progress reports**. You must submit a progress report to HRSA on an annual basis, including a brief self-assessment. Guidance will be provided by HRSA. Further information will be available in the NOA.

- **DCPaaS (Data Collection Platform as a Service) report**. As required by the Government Performance and Review Act of 1993 (GPRA), you must submit a DCPaaS report to HRSA on an annual basis. This report provides standardized performance measures to evaluate the Regional Telehealth Resource Center Cooperative Agreement recipients. More information will be made available after September 1, 2025.

- **Final report**. A final report is due within 120 days after the period of performance ends. The final report will collect information such as program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which you achieved the mission, goal and strategies outlined in the program; your objectives and accomplishments; barriers encountered; and responses to summary questions regarding your overall experiences over the entire period of performance. The final report must be submitted electronically. Further information will be provided upon receipt of reward.

- **OAT recipient directory**. If awarded, you must provide information for OAT's Recipient Directory Profiles. Further instructions will be provided by OAT. The current [Telehealth directory is available online](#).

Step 6: Learn What Happens After Award   **60**

Contacts and Support

In this step

Agency contacts

Program and eligibility

Sophia Rhoades

Public Health Analyst, Office for the Advancement of Telehealth

Attn: National and Regional Telehealth Resource Center Program

Office for the Advancement of Telehealth

Health Resources and Services Administration

Email your questions to: srhoades1@hrsa.gov

Call: 301-945-5215

Financial and budget

For Regional TRCs:

John Gazdik

Grants Management Specialist

Division of Grants Management Operations, OFAM

Health Resources and Services Administration

Email your questions to: jgazdik@hrsa.gov

Call: 301-443-6962

For National TRCs:

Kimberly Ross

Grants Management Specialist

Division of Grants Management Operations, OFAM

Health Resources and Services Administration

Email your questions to: kross@hrsa.gov

Call: 301-443-2353

HRSA Contact Center

Open Monday to Friday, 7 a.m. to 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 1-800-518-4726, 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
- HRSA OAT page

Endnotes

1. For the purposes of this NOFO, the term "frontier community" means a county in which the population per square mile is less than 6. ↑

2. For the purposes of this NOFO, the term "medically underserved area" has the meaning given the term "medically underserved community" in 42 U.S.C. 295p(6) , and the term "medically underserved population" has the meaning given the term in 42 U.S.C. 254b(b)(3) . ↑