

Notice of Funding Opportunity
Application due 07/10/2026

HRSA

Health Resources & Services Administration

Federal Office of Rural Health Policy
Rural Northern Border Region Network Planning Program
HRSA-26-100



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Before You Begin

Health Resources and Services Administration

Federal Office of Rural Health Policy

Rural Northern Border Region Network Planning Program

HRSA-26-100

All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations and applicable judicial holdings. Accordingly, discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate: racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation; denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic; illegal immigration; or any other initiatives that compromise public safety. If an application does not align, the application will not receive funding to the extent permitted by law and applicable court orders.

Step 1: Review the Opportunity

Basic information

Funding new or strengthening existing rural health care networks in the Northern Border Region to improve health care services and associated outcomes, achieve efficiencies, and strengthen the rural health care system.

Summary

The Rural Northern Border Region Network Development Program provides one-year funding to build new or strengthen existing healthcare networks that serve rural communities within the [Northern Border Region](#), which will:

- Expand access to, coordinate, and improve the quality of basic health care services and associated health outcomes.
- Achieve efficiencies.
- Strengthen the rural health care system as a whole.

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

Key facts

Opportunity name:

Rural Northern Border Region Network Planning Program

Opportunity number:

HRSA-26-100

Announcement version:

initial

Federal assistance listing:

93.619

Key dates

NOFO issue date:

06/08/2026

Informational webinar:

See [Join the webinar](#)

Application deadline:

07/10/2026

Expected award date:

09/30/2026

Expected start date:

09/30/2026

See [other submissions](#) for other time frames that may apply to this NOFO.

Funding details

Application Types:

Limited competition

New

Expected total available funding in FY:

2026: \$1,800,000

Expected number and type of awards:

18 G (Grant)

Funding range per award:

\$0 - \$100,000

We plan to fund awards in one 12-month budget periods for a total one year period of performance from 09/30/2026 to 09/29/2027.

Eligibility

You can apply if you are a domestic public or private, non-profit or for-profit entity located in the [Northern Border Region](#) and serving [qualifying HRSA-designated rural area](#) within that region.

Types of eligible organizations

These types of domestic organizations may apply:

- State governments
- County governments
- City or township governments
- Special district governments
- Independent school districts
- Public and State controlled institutions of higher education
- Native American tribal governments (Federally recognized)
- Public housing authorities/Indian housing authorities
- Native American tribal organizations (other than Federally recognized tribal governments)
- Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education
- Nonprofits without 501(c)(3) status with the IRS, other than institutions of higher education
- Private institutions of higher education
- For profit organizations other than small businesses
- Small businesses
- Others (see [Additional Information on Eligibility](#) for clarification)

Unrestricted (i.e., open to any type of entity above), subject to any clarification in text field entitled “Additional Information on Eligibility”

Additional information on eligibility

Eligible applicants include domestic public or private, non-profit or for-profit entities including domestic faith-based and community-based organizations, tribes and tribal organizations located in the [Northern Border Region](#) and serving [qualifying HRSA-designated rural areas](#) within the four Northern Border Regional Commission member States: Maine, New Hampshire, New York, and Vermont. The applicant organization must have demonstrated experience serving, or capacity to serve populations in rural areas. Eligible applicants also include Federal Qualified Health Centers (FQHCs) and Community Health Centers, Rural Health Clinics (RHCs), Hospitals and Rural Emergency Hospitals.

For the purposes of the notice, “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 meet all the requirements in this eligibility section, as well as the following additional criteria. If you do not meet all of these requirements, it will impact the eligibility and scoring of your application.

You must:

- Have demonstrated experience serving, or capacity to serve, rural populations. You can demonstrate this by describing the buy-in from the rural community or communities your proposed project plans to serve in your project narrative.
- Have not previously received a grant under this program (42.U.S.C. 254c(f)) for the same or a similar project. If you have previously received an award under this program, you are eligible to apply if you:
 - Expand network services or service areas.
 - Engage a new population or new focus area.
 - Include new or additional stakeholders.
 - Applicant organizations representing existing networks are eligible to apply if they propose to collaborate with at least two outside organizations they have not worked with before under a formal relationship.
- Consult the [State Office of Rural Health \(SORH\)](#) and the [Northern Border Regional Commission \(NBRC\)](#) about your intent to apply to this program. See [Attachment 1](#) and [Attachment 2](#).
- Ensure all grant activities serve only counties and/or census tracts located in [HRSA-designated rural areas](#) of [Northern Border Region counties](#).
 - Counties served by the grant must clearly align with fully or partially rural counties provided in your project narrative and documentation completed in [Attachment 3](#).

Network Requirements

For the purposes of this program, we define:

- **Health Care Network:** At least three regional or local organizations that come together to develop strategies for improving health services in a community.
- **Network Participants:** Local organizations that come together to form a health care network.

To meet the Network Requirements of this notice, you must:

- Represent a network comprised of three or more health care provider organizations (including the applicant organization). This includes:

- No less than 3 separately owned network participants with their own EIN/UEI number, unless an exception is requested. See [Attachment 11](#) and [Attachment 12](#).
- Provide the EIN/UEI number for the applicant organization and each network participant in [Attachment 7](#) showing:
 - No less than 66%, or two-thirds of the network participant organizations working directly on your proposed project, are physically located in a qualifying eligible [HRSA designated rural area](#) within the [Northern Border Region](#)
- Scanned, signed copies of letters of commitment from each network participant listed in [Attachment 7](#) are provided under [Attachment 8](#).

Completeness and responsiveness criteria

Application limits

You may submit more than one application under the same Unique Entity Identifier (UEI) if each proposes a distinct project. We will only review your last validated application for each distinct project before the deadline.

If you submit more than one application under the same UEI and/or EIN for distinct proposed projects, you must provide the required EIN exception request documentation in [Attachment 11](#) (EIN/UEI exception request) or [Attachment 12](#) (Tribal EIN/UEI exception request).

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. Recipients agree that once committed, cost sharing amounts are enforceable and subject to reporting and auditing requirements under 2 CFR 200.

Post-award requirements

Before you apply, make sure you understand the requirements that come with an award. See [Step 6: Learn What Happens After Award](#) for information on regulations that apply, reporting, and more.

Program description

Purpose

The Rural Northern Border Region Network Planning (RNBR-NP) Program provides one-year funding to build new or strengthen existing healthcare networks in the [Northern Border Region](#). RNBR-NP uses network development as a strategy for linking rural health care stakeholders together for greater collective capacity to overcome local challenges, expand access, and improve the quality of care in the rural communities these organizations serve. The program helps network participants work together on three legislative aims:

- Achieve efficiencies.

- Expand access to, coordinate, and improve the quality of basic health care services and associated health outcomes.
- Strengthen the rural health care system as a whole.

Funding Opportunity Goals

- Build new or enhance existing partnerships and strengthen health care networks that serve rural communities within the Northern Border Region.
- Identify strategies for project sustainability after grant funding ends.

Background

[HRSA's Federal Office of Rural Health Policy \(FORHP\)](#) is the focal point for rural health activities within the U.S. Department of Health and Human Services. FORHP programs provide technical assistance and other activities as necessary to support improving health care in rural areas.

The RNBR-NP Program is authorized by 42 U.S.C. 254c(f) (330A(f) of the Public Health Service Act). This program enables recipients to use federal funding for the planning and development of integrated health care networks to achieve efficiencies, improve health care services and associated health outcomes, and strengthen the rural health care system.

RNBR-NP helps advance the [Making America Healthy Again \(MAHA\)](#) priorities, which include:

- Preventive health.
- Reducing chronic disease.
- Mental health.
- Nutrition.
- Access to primary and value-based care.
- Appropriate services for tribes.
- Early childhood health and autism support.

Program requirements and expectations

Projects funded through this program must also meet the requirements and expectations outlined in this section.

Legislative aims

The program requires a selection of at least one of the program's legislative aims. Applicants must select one or more of the following aims:

Aim #1: Achieve efficiencies

Achieve efficiencies through a community health and/or provider needs assessment at the regional and/or local level. Activities may include, but are not limited to:

- Identifying the most critical need of network participants to ensure they can continue operating successfully after the network planning ends.
- Identifying additional participants in the community/region needed for a more collaborative and effective network.

- Assessing workforce challenges and developing long-term strategies to address workforce needs.
- Identify financial resources available to support and sustain the network services.
- Identifying opportunities and developing plans to strengthen regional systems of care that better meet the unique needs of rural patients and the broader health needs of the community.

Aim #2: Expand access to, coordinate, and improve the quality of basic health care services and associated health outcomes.

Activities may include, but are not limited to:

- Integrating health and human services to improve coordination and access to care to most vulnerable individuals, including those with disabilities. Activities may include coordinated referrals and shared planning between medical providers and social service agencies and partnerships that include community health workers and other community organizations like transportation services, disability support service, etc.
- Developing a plan to expand the role of emergency medical services within the community, including loss of services as a result of hospital closure/conversion and/or readiness to support labor and delivery.

Aim #3: Strengthen the rural health care system as a whole.

Activities may include, but are not limited to:

- Identifying and implementing best practices to integrate care across organizations, including coordination between medical, behavioral, and social services.
- Developing strategies to enhance workforce capacity and retention across the network.
- Identifying ways to encourage cross-organizational collaboration and leadership commitment to improve health outcomes.
- Identifying and establishing ways to obtain regional and/or local community support/buy-in around the development of the network.
- Developing a strategy to leverage broadband connectivity to support health information technology applications and telehealth services in rural communities.
- Establishing mechanisms to monitor and evaluate the network's impact on regional population health and healthcare access.
- Exploring opportunities to secure funding and resources that support ongoing network operations and service expansion.

Statutory authority

[42 U.S.C. 254c\(f\) \(330A\(f\) of the Public Health Service Act\)](#)

Award information

Funding policies and limitations

Changes in HHS regulations

As of October 1, 2025, HHS has adopted [2 CFR Part 200](#), with some modifications included in 2 CFR Part 300. These regulations replace those in 45 CFR Part 75.

Policies

- To make an award, funding must be available and allocated for this program and purpose, at which point we will move forward with the review and award process.
- Have clear policies and good financial practices to avoid spending HRSA funds on unallowable activities. Like other award rules, we may audit your policies, procedures, and controls.
- Support beyond the first budget year will depend on:
 - Appropriation of funds.
 - Your 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 the [Application Guide](#).
 - [2 CFR Part 200 Subpart E](#) - General Provisions for Selected Items of Cost.
 - Allowable and Unallowable Costs and Activities in the [HHS Grants Policy Statement](#).
- All costs must be [reasonable](#), necessary, [allocable](#) to the award, and adequately documented ([2 CFR 200.403](#)).
- You cannot earn profit from the federal award. See [2 CFR § 200.400\(g\)](#).
- Current appropriations law includes a salary limit of \$228,000 as of January 2026 that applies to this program. You may pay salaries at a higher rate if the rate beyond the salary rate limit (Executive Level II) is paid with non-HHS funds.

Program-specific statutory or regulatory limitations

You cannot use funds:

- To build or acquire real property.
- For construction.
- To pay for equipment costs not directly related to the award.
- To pay for the direct provision of clinical health services.

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 incur 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 at the time of award.

Method 2 – *De minimis* rate. Per [2 CFR § 200.414\(f\)](#), if you do not have a current 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 up to 15% of modified total direct costs (MTDC). See [2 CFR § 200.1](#) for the definition of MTDC. You can use this rate indefinitely for all your federal awards or until you choose to receive a negotiated rate.

Consider your indirect costs when developing your [budget](#).

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 [2 CFR 200.307](#).

- 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.

Step 2: Get Ready to Apply

Get registered

SAM.gov

You must have an active account with SAM.gov to apply. 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 for the information you will need to register.
- You must agree to the [financial assistance general certifications and representations](#) specifically. Those for contracts are different.

When you register, you will also receive your required Unique Entity Identifier (UEI).

Once you register:

- You will have to maintain your registration throughout the life of any award.
- If your organization has multiple UEIs, use the one associated with your physical location.

If you need additional information about user roles in SAM.gov, see “Get registered: SAM.gov user roles” in the [Application Guide](#).

Grants.gov

You must also have an active account with [Grants.gov](https://www.grants.gov). You can see step-by-step instructions at the Grants.gov [Quick Start Guide for Applicants](#) and [How to Apply for Grants](#).

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-26-100.

After you select 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

Webinar information will be posted to the Related Documents tab on Grants.gov. We recommend you “Subscribe” to the NOFO on Grants.gov to receive updates when documents are posted.

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

Step 3: Build Your Application

Application checklist

There are two types of forms in Grants.gov.

- Some forms allow you to upload components of your application to the form. These include components like your project narrative, budget and budget narrative, and attachments, as applicable.
- Other forms are more typical, fill-in-the-blank forms.

Make sure that you have everything you need to apply.

Narratives

Component	Grants.gov form	Included in page limit*?
<input type="checkbox"/> Project narrative Use the Project Narrative Attachment form.	Project Narrative Attachment form.	Yes
<input type="checkbox"/> Budget narrative	Budget Narrative Attachment form.	Yes

Use the Budget Narrative Attachment form.		
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Attachments

Insert each in the Attachments Form in this order.

Component	Included in page limit*?
<input type="checkbox"/> 1. Documentation from State Office of Rural Health	No
<input type="checkbox"/> 2. Documentation from Northern Border Region Commission	No
<input type="checkbox"/> 3. Rural service area	Yes
<input type="checkbox"/> 4. Work plan	Yes
<input type="checkbox"/> 5. Staffing plan and job descriptions	Yes
<input type="checkbox"/> 6. Biographical sketches	Yes
<input type="checkbox"/> 7. Network organizational chart and network participant information	Yes
<input type="checkbox"/> 8. Letters of commitment	Yes
<input type="checkbox"/> 9. Funding preference documentation	Yes
<input type="checkbox"/> 10. Funding priority documentation	Yes
<input type="checkbox"/> 11. EIN/UEI exception request	No
<input type="checkbox"/> 12. Tribal EIN/UEI exception request	No
<input type="checkbox"/> 13. CMS Rural Health Transformation Program details	No
<input type="checkbox"/> 14. Previous grants	No
<input type="checkbox"/> 15. Other relevant document	Yes

Other required forms

Upload using each required form in Grants.gov.

Forms	Submission requirement
Application for Federal Assistance (SF-424)	With application.
Project Abstract Summary Form	With application.
Grants.gov Lobbying Form	With application.
Disclosure of Lobbying Activities (SF-LLL), optional	With application.
Project/Performance Site Location(s)	With application.
Budget Information for Non-Construction Programs (SF 424A)	With application.
Key Contacts	With application.

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

Application contents and format

This section includes guidance on each component found in the application checklist.

Application page limit: 40

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

Required format

Required format for project summary, project narrative, budget narrative, and attachments.

Font: A readable font like Arial, Courier, CG Times, or Times New Roman

File format: We only accept the following document formats:

- .PDF - Adobe Portable Document Format
- .DOC/.DOCX - Microsoft Word
- .RTF - Rich Text Format o .TXT - Text
- .WPD - Word Perfect Document
- .XLS/.XLSX - Microsoft Excel
- .VSD - Microsoft Visio

Size: 12-point font

Footnotes, charts, graphics, and budget tables may be 10-point or higher.

Ink color: Black

Spacing: Single-spaced, including all text and tables

Alignment: Left

Headings: Bold all headings and align left.

Size: 8.5 x 11 (Make sure the print area is set and allows printing to 8.5 x 11.)

Margins: 1-inch on all sides

Footer: On each page as the footer, include your organization's name and page numbers. If a competing continuation or competing supplement, also include your 10-digit award number.

Page numbering:

- Do not number the standard OMB-approved forms.
- Number each attachment page sequentially (that is, 1, 2, 3).
- Reset the numbering for each attachment.
- Treat each attachment as a separate section.

File names: You can find guidance for naming your files in the [Application Guide](#).

Project narrative

Introduction

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

- Briefly describe the purpose of your project and what you hope to achieve.

- Include the legislative aim(s) you will focus on.
- Give an overview of the eligible rural or partially rural counties you will serve.
 - Include a list of all rural counties (or rural census tracts, for partially rural counties) in your target rural service area in [Attachment 3](#).

Need

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

- Describe the health care needs and related needs (e.g., such as employment, education, income, housing, transportation) of the population residing within your target rural service area.
- Describe the health care service environment, including strengths as well as structural challenges and gaps impacting health care delivery, in your target rural service area.
- Use and cite supporting information from appropriate data sources, such as local, tribal, state, or regional data, whenever possible. You may also use proxy measures or composite indexes of community risk or need.

Approach

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

- Describe how your proposed project will help meet the health care-related needs of your target rural service area. As part of your response, describe how your proposed project will achieve one or more of the following:
 - Increase access to quality health care services.
 - Improve access across the full continuum of care.
 - Serve rural populations within the service area.
- Tell us how you'll meet the two funding opportunity goals and all program requirements and expectations described in this NOFO.
- Explain how your project will build from, but does not duplicate, other federal, regional, state, local or tribal programs.

High-level work plan

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

- Give an overview of the specific activities you will implement during the period of performance to successfully execute your proposed project and meet the two funding opportunity goals.
 - Provide a high-level timeline that includes when each planned activity will occur.
 - As needed, identify how activities will inform or build on each other.
 - Identify which organization(s) or individual(s) will lead each activity.
- You will also include a more detailed work plan in [Attachment 4](#).

Resolving challenges

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

- Discuss possible challenges you may face in designing and carrying out the activities in the work plan.

- Explain how you will resolve them.
- Include how you will adapt to changes and new information you gather during the project

Performance Management

See merit review criterion 3: [Performance reporting and evaluation](#)

- Describe how you will work with network participants to collect and report information to HRSA accurately and on time.
- Describe how you will ensure appropriate plans and procedures are in place to manage and securely store data, including how you will protect data against cybersecurity threats, breaches, or other loss of data integrity.
- Describe how you will monitor and analyze performance data/information to continually improve your program. This includes helping the network set shared goals and using data to guide its activities.

See the [reporting](#) section for more information and for performance measure requirements.

Sustainability

See merit review criterion 4: [Impact](#)

Propose a plan for project sustainability after the period of federal funding ends.

- Describe the actions you'll take to obtain future sources of funding.
- Discuss challenges that you'll likely encounter in sustaining the program. Include how you will resolve these challenges.

Organizational information

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

Applicant Organization

- Provide a brief overview of your organization that includes:
 - Current mission.
 - Structure, leadership, size of organization, and staffing.
 - Scope of relevant current and past activities.
 - Connection to and ability to serve the target rural northern border region service area.
 - Ability to manage the project and associated personnel.
 - Financial practices and systems in place to ensure your organization can properly account for and manage federal funds.
- Explain how these details relate to your capacity to lead the proposed project.

Network Participants

- Give an overview of current or proposed network participants and your planned network structure. Include:

- Why the network participants were selected and what each will contribute to the project.
- How your network will meet the requirement that no less than 66% of network participants are physically located (either the headquarters or a satellite site) in a [qualifying HRSA-designated rural area](#) within the [Northern Border Region](#).
- How you will ensure that network participants have demonstrated experience serving, or capacity to serve, high-need rural populations.
- Include a detailed table of your proposed project's network participants with one letter of support from each network participant (not including the applicant organization) in [Attachment 7](#).
 - Your network MUST include no less than three network participants, including the applicant organization.
- Describe how you will ensure that network participants and other relevant community stakeholders are engaged and actively participating throughout the project.

Key Personnel and Staffing

- Describe your plan to adequately staff the project.
 - Include details of each position in [Attachment 5](#).
 - For each staff member reflected in your staffing plan, provide a brief biographical sketch in [Attachment 6](#) that clearly demonstrates each staff member has appropriate experience for their role(s) on the project.
 - If staff fulfill more than one role, describe why this is needed and how you will make sure they meet all relevant expectations.
 - You must identify a project director for your proposed project.
- Briefly describe how you will manage the project team and ensure work is done effectively and efficiently.
 - For positions that are currently vacant, describe your interim staffing plan for these positions, including your plan to quickly fill the position(s) if awarded.

Budget and budget narrative

See merit review criterion 6: [Support requested](#)

Your **budget** should follow the instructions in budget narrative: detailed instructions section of the Application Guide and the instructions listed in this section. Your budget should show a well-organized plan.

HHS now uses the definitions for [equipment](#) and [supply](#) 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. 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, allowable and allocable, and consistent with your project's purpose and activities.
- The restrictions on spending funds. See [funding policies and limitations](#).
- **Travel:** You must budget travel funds for one program staff to attend a one-and-a-half-day program meeting at a location to be determined (within one of the four Northern Border Region states or in Washington, D.C.) and include the cost of this as a budget line item.
 - To determine estimated travel costs refer to the U.S. General Services Administration (GSA) per diem rates for FY 2026. [Per diem rates can be found on the GSA's website](#).
 - You may also propose travel for additional meetings and conferences that are directly related to the purpose of the program and will complement your project's objectives.
- **Legal costs:** Legal costs that exceed 20% of the total award amount may be considered unreasonable and unallowable. Legal costs include services and activities such as consultations, 501(c)(3) application preparation, and development of articles of incorporation and by-laws.
- **Contractual:** Consistent with 2 CFR 200, you must provide a clear explanation of the purpose of each contract, how the costs were estimated, and the specific contract deliverables.

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

Attachments

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

Unless the instructions below require it, do not submit organizational brochures or other promotional materials (for example, slides, films, clips).

Attachment 1: Documentation from State Office of Rural Health

Include a copy of the State Offices of Rural Health (SORH)'s response to your letter or a letter/email you sent to your SORH notifying them of your intent to apply for this grant funding. All applicants are required to notify their [State Offices of Rural Health \(SORH\)](#) in the application process to advise them of their intent to apply.

Attachment 2: Documentation from Northern Border Region Commission

Include a copy of the [Northern Border Region Commission](#) (NBRC)'s response to your letter or a letter/email you sent to the NBRC notifying them of your intent to apply for this grant funding.

All applicants are required to notify the NBRC in the application process to advise them of their intent to apply.

Attachment 3: Rural service area

You must identify a target rural service area that includes only counties and/or census tracts that are qualifying eligible [HRSA-designated rural areas](#) AND located in the [Northern Border Region](#). Include:

- State.
- County name.
- Census tract identifiers.
 - Only include for HRSA-designated rural census tracts within urban counties.

Attachment 4: Work Plan

Attach your project's work plan. This attachment is required and is expected to align with your [project narrative](#).

The work plan must:

- Outline the individual or organization responsible for carrying out each activity.
- Include a timeline for the period of performance. The minimum timeline increment is by quarter.

We recommend using a table format with these headings:

- Goals/objectives.
- Key action steps.
- Activities.
- Outputs, data sources, and program assessment methods. These might include the direct products or deliverables of program activities and how you will assess them.
- Outcomes and measurements. These might include the result of a program, typically describing a change in people or system.
- Person and/or organization responsible.
- Projected completion date.

Attachment 5: Staffing plan and job descriptions

Key personnel are individuals who receive funds from this award or person(s) conducting activities central to this program.

Provide a staffing plan that includes information for each key personnel using a table format. Responses are expected to align with your [project narrative](#) and include:

- Name (if not yet hired, state "TBH")
- Job title (e.g. project director)
- Organizational affiliation.
- Full-time equivalent (FTE) devoted to the project
 - You cannot bill more than 1.0 FTE for the same person across federal awards.
 - Explain your reasons for the amount of time you request for each staff position.

- List of roles and responsibilities for the project.
- Timeline and process for hiring and onboarding, if applicable.

Attachment 6: Biographical sketches

Key personnel are individuals who would receive funds from this award or person(s) conducting activities central to this program.

Include biographical sketches for people who will hold the key positions, including the project director, you describe in [Attachment 5](#).

- Biographical sketches should be no more than two pages.
- 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 along with the biographical sketch.

Attachment 7: Network organizational chart and network participant information

- Provide a one-page network organizational chart.
- Provide a list of all network participants that includes:
 - The organization's name and type (such as a community health center, hospital, or health department).
 - The organization's physical address. This will be the address used to determine qualifying eligible HRSA-designated rural status and confirm location in the Northern Border Region.
 - The name(s) of the key personnel from the organization who will be working on the program.
 - Brief description of the organization's anticipated role in the proposed project.
 - Organization's EIN/UEI, unless the applicant is a tribe or requests a multiple EIN/UEI exception.
- Provide screenshots from the rural health grants eligibility analyzer for each organization to demonstrate that no less than 66%, or two-thirds, of network participant organizations are physically located in a qualifying eligible HRSA-designated rural area and located in the [Northern Border Region](#).

Attachment 8: Letters of commitment

You must provide a scanned, signed copy of a letter of commitment from each network participant.

- The applicant organization does not need to submit a letter of commitment.
- Each network participant should provide a separate letter.
- Letters of support must include:
 - The organization's expected role(s) and responsibilities for the project.
 - The activities each organization will be included in.
 - How the organization's expertise is relevant to the project.
 - A brief description of the organization's ties to the target rural service area.
 - The address, including city, state and zip code, of the organization.
 - If the participant has a location in the target rural service area, also provide that address.

Attachment 9: Funding preference documentation

Provide documentation based on the funding preference you are requesting to be considered to qualify for.

- Refer to [funding preferences](#) to see whether you qualify and what information you need to include.
- We recommend that you use this statement:

“[Your organization name] qualifies for the [Name which funding preference(s) you qualify for] funding preference because [insert rationale here], for example, Applicant Organization Y is located in a designated HPSA.”

If you are not requesting consideration for a funding preference, include a statement explicitly stating this.

- Applications that do not include documentation in this attachment for a qualifying funding preference will not be considered to receive a funding preference.
- Funding preferences are either met or not met. Additional credits are not given if an applicant requests and qualifies for more than one funding preference.

Attachment 10: Funding priority documentation

Submit only if applicable.

If you are requesting consideration for the New HRSA Federal Office of Rural Health Policy (FORHP) Funding Priority, you must:

- Provide an attestation statement verifying your organization has not been a direct recipient of FORHP grant or cooperative agreement funding.
- Include your organization’s full business name, address and associated EIN/UEI number in your attestation statement.

If you are not requesting consideration for this funding priority, omission of this attachment will assume you are not requesting consideration, and you will not receive any points for this funding priority.

We will review your attestation statement to assess your organization’s qualifications for receiving this funding priority. Provision of an attestation statement in this attachment does not guarantee you will qualify to receive this funding priority.

Attachment 11: EIN/UEI exception request

Submit only if applicable.

Generally, you cannot apply for multiple projects using the same UEI (previously DUNS) number and/or EIN. In response to growing trends towards consolidation within the rural health care industry, and the possibility that multiple organizations may share the same UEI and/or EIN with one parent organization, we may allow separate applications associated with a single UEI or EIN, if you provide the following to us in this attachment:

- Names, street addresses, EINs, and/or UEI numbers of your organizations.
- Name, street address, EIN, and/or UEI number of the parent organization.

- Names, titles, email addresses, and phone numbers for points of contact at each of your organizations and the parent organization.
- Proposed HRSA-26-100 service areas for each of your organizations.
- Assurance that the organizations will each be responsible for the planning, program management, financial management, and decision-making of their respective projects, independent of each other and the parent organization.
- Signatures from the points of contact at each of your organizations and the parent organization.

A single organization or parent organization cannot submit multiple applications even if the projects are different. If the parent organization applies using the legal and/or “doing business as” name of the parent or satellite sites, it is still considered an application submitted by the parent organization and will not be allowed.

Applications associated with the same UEI number or EIN should be independently developed and written. We reserve the right to deny this request if you provide insufficient information or if we receive nearly identical application content from organizations using the same EIN or UEI.

Attachment 12: Tribal EIN/UEI exception request

Submit only if applicable.

For tribal exceptions requests, include:

- Names, titles, email addresses, and phone numbers for points of contact at your organization and network participant organizations.
- Justification for multiple applications from the network participant organizations under the same EIN and/or UEI.
 - For example, unique focus area or services provided, or a lack of other applicant organizations.

Attachment 13: CMS Rural Health Transformation Program details

Submit this attachment only if you participate in or benefit from your state’s CMS Rural Health Transformation Program. Reviewers will not consider this information during merit review.

- If it applies, describe the CMS-supported activities that you participate in or benefit from.
- Clearly explain how the proposed HRSA-funded work is non-duplicative, coordinated, and complementary to the CMS-supported work

Attachment 14: Previous grants

Submit only if applicable.

Provide a list of the applicant organization’s previous HRSA grants within the last five years. Include the grant number for each.

If you are requesting consideration for this NOFO’s funding priority, you are required to provide as part of this attachment:

- A verifying statement that describes why previous grant awards cited in this attachment do not disqualify you for this NOFO’s funding priority: New to HRSA Federal Office of Rural Health Policy Funding.

Attachment 15: Other relevant documents

Optional. If you need to provide more details about your proposal, you can provide other documents in this attachment.

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.
Project Abstract Summary Form	With application.
Grants.gov Lobbying Form	With application.
Disclosure of Lobbying Activities (SF-LLL), optional	With application.
Project/Performance Site Location(s)	With application.
Budget Information for Non-Construction Programs (SF 424A)	With application.
Key Contacts	With application.

Form instructions

The application guide has detailed instructions for:

- The [Application for Federal Assistance \(SF-424\)](#).
- The [Budget Information for Non-Construction Programs \(SF-424A\)](#).

Project abstract summary form instructions

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 legislative aim(s) you will focus on.
- Include a basic description of your target rural service area and the population you plan to serve.

When writing your summary:

- Use 4,000 characters or fewer.
- Make sure it's clear, accurate, short.
- Do not refer to other parts of the application.
- Do not include [personally identifiable information \(PII\)](#) in abstract form.
- If you receive an award, we'll put your project abstract on public websites and databases, including [USAspending.gov](#).

Important: Public information

When filling out your SF-424 form, pay attention to Box 15: Descriptive Title of Applicant’s Project.

We share what you put there with [USAspending](#). This is where the public goes to learn how the federal government spends their money.

Instead of just a title, insert a short description of your project and what it will do.

[See instructions and examples.](#)

Step 4: Understand Review, Selection, and Award

Application review

Initial review

We will review your application to make sure that it meets [eligibility](#) criteria, and the requirements in this NOFO. If your application does not meet eligibility criteria, it will not be funded. If your application does not meet other criteria, we will not fund it.

Merit review

A panel reviews all applications that pass the initial review. You can find more about the merit review process in the [Application Guide](#). The members use these criteria.

Criterion	Total number of points = 1
1. Need	45 points
2. Response	20 points
3. Performance reporting and evaluation	5 points
4. Impact	10 points
5. Resources and capabilities	15 points
6. Support requested	5 points

Criterion 1: Need (45 points)

See the project narrative [Introduction](#) and [Need](#) sections.

The panel will review your application for how clearly it:

Goals

- Describes the purpose and goals of the proposed project.
- Details project goals that align with the selected legislative aim(s).
- Identifies a proposed target rural service area aligned to proposed project goals and information provided in [Attachment 3](#).

Need

- Describes the health care needs and related needs (e.g. factors such as employment, education, income, housing and transportation) of the people living in the target rural service area.
- Describes the health care service environment, including strengths and structural challenges and service gaps impacting health care delivery, in the target rural service area.
- Accurately incorporates and cites information from appropriate data sources, such as local, tribal, state or regional data whenever possible.

Criterion 2: Response (2 points)

The panel will review your application for how well it:

- Logically explains how the project will meet the two funding opportunity goals and all program requirements described in this NOFO.
- Provides a detailed, realistic and effective work plan.
- Identifies anticipated challenges carrying out work plan activities and proposes effective approaches to resolve those challenges.
- Accurately integrates relevant data into the responses.

Criterion 3: Performance reporting and evaluation (5 points)

See the project narrative [Performance management](#) section.

The panel will review your application for the strength of your plan to:

- Work with network participants to collect and report information to HRSA accurately and on time.
- Monitor and analyze data/information to continually improve your program.

Criterion 4: Impact (1 points)

The panel will review your application for:

- How likely the proposed project will have a positive impact on the health care-related needs of the target rural service area.
- How strongly the work plan aligns with the purpose of the project.
- The strength of the proposed plan for project sustainability after the period of federal funding ends.

Criterion 5: Resources and capabilities (15 points)

See the project narrative [Organizational information](#) and [Performance management](#) sections.

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

- Your organization's capabilities meet the needs of the project.
- You demonstrate a meaningful connection to, and ability to serve, the target rural northern border region service area.
- Your organization can properly account for and manage federal funds.
- Network participants have demonstrated experience serving, or capacity to serve, the target rural northern border region service area.

- The network meets the requirement that no less than 66%, or two-thirds of network participants, are physically located (either the headquarters or a satellite site) in a [qualifying HRSA-designated rural area](#) within the [Northern Border Region](#).
- Network participants will meaningfully contribute to the proposed project.
- Project staff show the skills, experience, and time needed to carry out the project and meet its goals and objectives.

Criterion 6: Support requested (5 points)

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

The panel will review your application to determine how:

- Reasonable the proposed budget is for the period of performance.
- Reasonable costs are, and how well they align with the project’s scope.
- Sufficient time is for key staff to spend on the project to achieve project objectives.

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 [2 CFR 200.206](#).

Selection process

When making funding decisions, we consider:

- The amount of available funds.
- Assessed risk.
- Alignment with [HRSA Mission and Strategic Priorities](#)
- Merit review results. These are key in making decisions but are not the only factor.

- The larger portfolio of HRSA-funded projects, including project type and geographic distribution.
- The funding priorities, funding preferences, and special considerations listed.

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.
- Additionally, we may not make an award if you are delinquent on two or more Single Audit Reports

You cannot appeal a denial, or the amount of funds awarded.

Funding priorities

Priority 1: New HRSA Federal Office of Rural Health Policy Funding (2 Points)

We will give you a funding priority if:

Your organization has not previously been a direct recipient of a HRSA Federal Office of Rural Health Policy (FORHP) grant or cooperative agreement. To be considered for this funding priority, you must provide the required documentation requested in [Attachment 10](#) . HRSA will review and consider funding priority requests using documentation you provide in [Attachment 10](#) . Provision of required documentation in [Attachment 10](#) does not guarantee you will qualify to receive this funding priority.

Funding preferences

This program includes funding preferences, based on 42 U.S.C. 254c(h)(3). If we determine that your application meets one of 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.

Qualification 1: Health Professional Shortage Area (HPSA)

You or your service area is in an officially designated health professional shortage area (HPSA). You must include a screenshot or printout from the [HRSA Shortage Designation website](#), which indicates if a particular address is located in a HPSA. The screenshot or printout should be included in [Attachment 9](#).

Qualification 2: Medically Underserved Community/Populations (MUC/MUP)

You or your service area is in a medically underserved community (MUC) or if you serve medically underserved populations (MUPs). You must include a screenshot or printout from the [HRSA Shortage Designation website](#) that indicates if a particular address is located in a MUC or serves an MUP. The screenshot or printout should be included in [Attachment 9](#).

Qualification 3: Focus on Primary Care and Wellness and Prevention Strategies

Your project focuses on primary care and wellness and prevention strategies. You must include a brief justification describing how your project focuses on primary care and wellness and prevention strategies. The justification should be included in [Attachment 9](#).

Award notices

We issue Notices of Award (NOA) on or around the [start date](#) listed in the NOFO. See “how we make awards” in the [Application Guide](#) for more information.

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

Step 5: Submit Your Application

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.

Application deadline

You must submit your application by 07/10/2026, at 11:59 p.m. ET.

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

If you need a deadline extension, see “requesting a waiver” in the [Application Guide](#).

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.

If Grants.gov rejects your application due to errors, you must correct and resubmit before the deadline.

If you want to know more about correcting errors or tracking your application, you can refer to the [Application Guide](#).

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

Other submissions

Intergovernmental review

This NOFO is not subject to [Executive Order 12372](#), Intergovernmental Review of Federal Programs. No action is needed.

Step 6: Learn What Happens After Award

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 [2 CFR Part 200](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, modifications at [2 CFR Part 300](#), and any superseding regulations.
- The [HHS Grants Policy Statement](#). 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](#).
- All anti-discrimination laws: By applying for or accepting federal funds from HHS, you certify compliance with all federal antidiscrimination laws and these requirements. Complying with those laws is a material condition of receiving federal funding streams. You are responsible for ensuring subrecipients, contractors, and partners also comply.

Required Alignment with HRSA Mission and Strategic Priorities

Recipients must use funds awarded under this NOFO to implement program goals or agency priorities in accordance with the HRSA [vision, mission, core values, and strategic priorities](#), where authorized by law.

In administering programs under this and all funding announcements, HRSA prioritizes:

- **Evidence-based healthcare:** Funding activities supported by rigorous scientific evidence, particularly for programs serving children and adolescents, where HRSA is committed to approaches that reflect the highest standards of clinical care and child safety.
- **Biological and physiological integrity:** Recognizing the relevance of biological sex to health outcomes, HRSA encourages applicants to account for sex-based health factors in program design, data collection, and service delivery where scientifically appropriate.

HRSA will implement these priorities consistent with applicable laws, regulations, court orders, and all required administrative procedures. Applicants are encouraged to describe how their proposed programs align with these priorities in their project narratives.

Funded activities must advance HRSA's vision of protecting and improving the health and well-being of Americans. The particular focus is on those who are medically vulnerable or live in areas with limited access to care. HRSA's duty is to serve wisely, effectively, and with measurable results that justify every taxpayer dollar invested.

Consistent with HRSA's priorities, in carrying out any project funded under this NOFO, the recipient must adhere to the following principles, where they are consistent with the authority and scope of the award and its activities:

- **Gold standard science:** Design and deliver services using gold standard evidence-based and evidence-informed approaches, establish measurable performance goals, and use data to monitor outcomes and drive continuous improvement.
- **Program integrity and fiscal stewardship:** Recipients must:
 - Administer funds in accordance with all applicable federal statutes, regulations, and award conditions.
 - Maintain strong internal controls.
 - Prevent waste, fraud, and abuse.
- **Partnership and local leadership:** Coordinate with state, tribal, territorial, local, and community partners, as appropriate, and tailor services to meet community-identified needs while respecting local decision-making authority.

Recipients must manage any project awarded under this NOFO in accordance with the following objectives in programs authorized to advance them:

Make America Healthy Again (MAHA): HRSA prioritizes the health and well-being of all Americans by supporting common-sense, evidence-based health policies that promote:

- Personal responsibility.
- Strong families and communities.
- Proper nutrition.
- The prevention and management of chronic disease, while ensuring access to high-quality, affordable physical and mental health care.

Child protections, biological integrity, parental rights, and lawful use of funds: HRSA prioritizes safeguarding children's health and safety by:

- Not supporting medical interventions for gender dysphoria in minors that lack a strong evidence base.
- Applying sex-based definitions grounded in biological reality.
- Supporting parental authority, transparency, and choice in education, including school-based health centers that respect parental rights and religious upbringing.
- Ensuring taxpayer funds are not used to promote or support elective abortions, consistent with federal law and the Hyde Amendment.

Advancing evidence-based, merit-driven, and ethically grounded health care: HRSA will prioritize unbiased, transparent science; merit-based workforce opportunities; and programs that demonstrate measurable outcomes, while deprioritizing organizations with:

- Conflicts of interest.
- “Harm reduction” models.
- Housing-first approaches.
- Activities that facilitate illegal drug use or unsafe medical practices.

Promoting public safety, lawful use of federal funds, and national health priorities: To the extent permitted by law, HRSA will align funding with administration priorities by:

- Supporting ending the HIV epidemic through authorized, evidence-based care.
- Reserving benefits for eligible individuals.
- Discouraging illegal immigration and unsafe community practices.
- Prioritizing recipients that enforce public safety, address serious mental illness and substance use through treatment and recovery, and reduce homelessness responsibly.

To the extent allowable by law, under awards, HRSA will give priority to states and municipalities for programs to:

- Enforce prohibitions on open illicit drug use.
- Enforce prohibitions on urban camping and loitering.
- Enforce prohibitions on urban squatting.
- Enforce, and where necessary, adopt, standards that address individuals who are a danger to themselves or others and suffer from serious mental illness or substance use disorder, or who are living on the streets and cannot care for themselves. The approach must be through assisted outpatient treatment or by moving them into treatment centers or other appropriate facilities through civil commitment or other available means, to the maximum extent permitted by law.

HRSA will implement these priorities consistent with applicable laws, regulations, court orders, and any required procedures.

The recipient must demonstrate ongoing compliance with these priorities, in all programs that are authorized to advance them, through program design, implementation, reporting, and evaluation.

Failure to meaningfully align funded activities with the applicable requirements may result in corrective action, additional reporting requirements, or other actions consistent with federal grant regulations at [2 CFR Part 200](#) and the terms and conditions of this award. This includes termination under [2 CFR § 200.340\(a\)\(4\)](#) if an award no longer effectuates the program goals or agency priorities.

Cybersecurity

- If awarded, you must develop plans and procedures, modeled after the NIST Cybersecurity framework, to protect HHS systems and data. See [details here](#).

Successful applicants under this NOFO agree that:

Where award funding involves:	Recipients and subrecipients are required to:
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Implementing, acquiring, or upgrading health IT for activities funded by any entity	Use health IT that meets standards and implementation specifications adopted in 45 CFR 170, Subpart B, if such standards and implementation specifications can support the activity. Visit to 45 CFR 170, Subpart B learn more.
Implementing, acquiring, or upgrading health IT for activities by eligible clinicians in ambulatory settings, or hospitals, eligible under Sections 4101, 4102, and 4201 of the HITECH Act	Use health IT certified under the ONC Health IT Certification Program if certified technology can support the activity. Visit https://www.healthit.gov/topic/certification-ehrs/certification-health-it to learn more.

If standards and implementation specifications adopted in [45 CFR part 170, Subpart B](#) cannot support the activity, recipients and subrecipients are encouraged to use health IT that meets non-proprietary standards and implementation specifications developed by consensus-based standards development organizations. This may include standards identified in the ONC Interoperability Standards Advisory, available at <https://www.healthit.gov/isp/>.

Reporting

If you are funded, you will have to follow the reporting requirements in “reporting” section of the [Application Guide](#). The NOA will provide specific details.

You must also follow these program-specific reporting requirements:

- Annual performance reports through Electronic Handbooks.
- Program performance measures:
 - You will submit an annual performance measures report for each budget period in a centralized program outcomes reporting system.
 - We will aggregate the data collected from the reporting system to demonstrate the overall impact of the program.
 - Upon award, we will notify you of the specific performance measures required.

Contacts and Support

Agency contacts

Program and eligibility

Claire Darnell
Public Health Analyst
Community Based Division
Federal Office of Rural Health Policy
Health Resources and Services Administration

Attn:
Rural Northern Border Region Network Planning Program

Email: cdarnell@hrsa.gov
Phone: 301-443-3868

Financial and budget

Dhendup Sherpa

Grants Management Specialist
Division of Grants Management Operations
Office of Financial Assistance and Acquisition Management (OFAAM)
Health Resources and Services Administration

Email: dsherpa@hrsa.gov
Phone: 301-443-3462

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](#)

Help with systems

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

- [Application Guide](#)
- [HRSA Grants page](#)
- [HHS Tips for Preparing Grant Proposals](#)
- [Frequently Asked Questions](#)
- [Applicant Training](#)
- [Rural Health Information Hub](#)