Notice of Funding Opportunity

Application due 1/8/2027

HRSA
Health Resources & Services Administration

MATERNAL AND CHILD HEALTH BUREAU
Division of Women's Health

Women's Initiative for Screening and Health (WISH)

Opportunity number: HRSA-27-072

Contents

Before you begin 3

Step 1: Review the Opportunity 4

Basic information 5

Funding details 5

Eligibility 8

Program description 10

Award information 15

Step 2: Get Ready to Apply 19

Get registered 20

Find the application package 20

Application writing help 21

Step 3: Build Your Application 22

Application checklist 23

Application contents and format 24

Step 4: Understand Review, Selection, and Award 37

Application review 38

Selection process 43

Award notices 43

Step 5: Submit Your Application 44

Application submission and deadlines 45

Other submissions 46

Step 6: Learn What Happens After Award 47

Post-award requirements and administration 48

Reporting 52

Contacts and Support 53

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 1/8/2027.

All activities proposed in your application and budget narrative must align with applicable law and policies, 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.

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	5
Funding details	5
Eligibility	8
Program description	10
Award information	15

Basic information

Health Resources and Services Administration

MATERNAL AND CHILD HEALTH BUREAU

Division of Women's Health

Improving women's health by filling gaps in existing preventive services.

Summary

The purpose of the Women's Initiative for Screening and Health (WISH) is to improve women's health across the lifespan by increasing access to and availability of preventive health services. Through a multidisciplinary coalition of healthcare providers, academic institutions, and patient-centered organizations, WISH drives a comprehensive strategy to:

- Review and recommend evidence-based updates to the HRSA-supported Women's Preventive Services Guidelines (referred to in this notice of funding opportunity as the Guidelines).
- Raise awareness and knowledge of the Guidelines among the general public with a focus on communities with limited access to preventive health services.
- Increase clinicians' use of the Guidelines in standard clinical practice.

Under section 2713 of the Public Health Service Act, as added by the Patient Protection and Affordable Care Act, P.L. 111-148 (42 U.S.C. 300gg-13), most health insurance plans created or changed after March 23, 2010 (called non-grandfathered plans) must cover services listed in these Guidelines without charging patients (no copays, deductibles, or coinsurance).

Funding details

Application Types: New

Expected total available funding in FY 2027: $1,000,000

Expected number and type of awards: 1 CA (Cooperative Agreement)

Funding range per award: $0 - $1,000,000

We plan to fund awards in 5 12-month budget periods for a total 5 year period of performance from 03/01/2027 to 02/28/2032.

Have questions?
Go to Contacts and Support.

Key facts

Opportunity name: Women's Initiative for Screening and Health (WISH)

Opportunity number: HRSA-27-072

Announcement version: initial

Federal assistance listing: 93.110

Key dates

NOFO issue date: 11/6/2026

Informational webinar: See Join the webinar

Application deadline: 1/8/2027

Expected award date is by: 3/1/2027

Expected start date: 3/01/2027

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

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

Optional Supplemental Funding Information

As part of the application for the WISH program, you may also elect to apply for one or more of the following optional supplemental funding opportunities. Supplemental awards are subject to the availability of funds and satisfactory recipient performance. Only if you submit a complete application for the base WISH award are you eligible to apply for these supplemental funding opportunities.

An applicant may receive supplemental funding only if it is selected for the base WISH award. Any supplemental funding awarded will be provided to the recipient of, and as supplemental funding under, the base WISH cooperative agreement.

1. Dissemination and Awareness of the HRSA-Supported Women's Preventive Services Guidelines - Supplemental Funding Opportunity

Funding: Up to $250,000 per year for up to five years.

Purpose: Applicants may apply for a supplemental award to expand the dissemination and implementation efforts of the HRSA-supported Women's Preventive Services Guidelines (Guidelines). The supplement will support innovative outreach, education, and communication activities that increase awareness, understanding, and adoption of the Guidelines among clinicians, health profession students, health systems, patients, professional organizations, community-based organizations, and other stakeholders. Emphasis will be placed on increasing awareness and use of the Guidelines in rural, frontier, tribal, and other communities with limited access to preventive health services.

Supplemental activities may include:

- developing and disseminating implementation resources;
- conducting targeted educational campaigns and provider education;
- expanding partnerships with professional associations, academic institutions, rural health organizations and providers, community-based organizations, faith-based organizations, and other trusted community partners;
- engaging stakeholders through webinars and other educational events;
- adapting educational materials for priority populations; leveraging digital communications and other innovative dissemination strategies; and
- addressing emerging implementation and dissemination needs to increase awareness and uptake of the Guidelines.

Statutory Authority: 42 U.S.C. § 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act).

Eligibility: Only applicants applying for the base WISH cooperative agreement are eligible to apply for this supplemental funding opportunity.

Application instructions: To apply, follow the instructions provided in Attachment 8: Dissemination & Awareness Supplement.

2. WISH Emerging Issues Research and Program Implementation – Supplemental Funding Opportunity

Funding: Up to $250,000 per year for up to five years.

Purpose: Applicants may apply for a supplemental award to support and/or conduct emerging issues research, implementation science, and innovative program activities that strengthen the evidence base for women's preventive services and improve implementation of the HRSA-supported Women's Preventive Services Guidelines.

Supplemental activities may include:

- evaluating implementation strategies;
- addressing emerging clinical or women's health issues;
- conducting implementation research;
- developing innovative tools and resources; and
- piloting approaches that improve integration of the Guidelines into clinical practice, particularly in communities with limited access to preventive health services.

Statutory Authority: 42 U.S.C. § 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act).

Eligibility: Only applicants applying for the base WISH cooperative agreement are eligible to apply for this supplemental funding opportunity.

Application instructions: To apply, follow the instructions provided in Attachment 9: Emerging Issues Supplement.

Eligibility

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

“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.

Additional information on eligibility

Individuals are not eligible applicants under this NOFO.

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

Your single application must include your application for the base WISH award and, if applicable, your request for one or more of the optional supplemental funding opportunities described in this NOFO. You may not submit separate applications for the base award and supplemental funding.

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 purpose of the Women's Initiative for Screening and Health (WISH) is to improve women's health across the lifespan by increasing access to and availability of preventive health services. Through a multidisciplinary coalition of healthcare providers, academic institutions, patient-centered and community-based organizations, including organizations serving rural and frontier communities and faith-based organizations, WISH drives a comprehensive strategy to:

- Review and recommend evidence-based updates to the HRSA-supported Women's Preventive Services Guidelines (referred to in this notice of funding opportunity as the Guidelines).
- Raise awareness and knowledge of the Guidelines among the general public with a focus on communities with limited access to preventive health services including rural, frontier, and tribal communities. .
- Enhance clinicians' use of the Guidelines in standard clinical practice.

Under section 2713 of the Public Health Service Act, as added by the Patient Protection and Affordable Care Act, P.L. 111-148 (42 U.S.C. 300gg-13), most health insurance plans created or changed after March 23, 2010 (called non-grandfathered plans) must cover services listed in these Guidelines without charging patients (no copays, deductibles, or coinsurance).

Currently, the Guidelines cover 14 topics. Please visit Women's Preventive Services Guidelines | HRSA to access the full list of types of preventive services covered.

Funding Opportunity Goals

- The program goal is to improve women's health across the lifespan by increasing access to and availability of preventive health services. The program seeks to increase patient access to and utilization of the Guidelines, and to improve the quality and comprehensiveness of women's preventive health services. The program objectives to be accomplished during the period of performance to support program goals, include the following:
- Conduct evidence reviews of existing or potential Guideline topics, and the feasibility of Guideline implementation in standard clinical practice.
- Increase provider awareness and knowledge about the HRSA-supported Women's Preventive Service Guidelines

- Increase acceptance and sponsorship of the Guidelines by health professional organizations.

Background

Research has shown that consistent preventive care for women is associated with improved health and well-being across the lifespan. 58 million women are eligible to receive preventive services without cost sharing, individuals often delay or forego preventive services if cost is a factor. Investing in expanding patients' and providers' knowledge of preventive care guidelines can help more women access these essential services.

WISH[1] has been established as per statute and in response to a 2011 recommendation from the Institute of Medicine (IOM), now known as the National Academies of Sciences, Engineering, and Medicine (NASEM), to create a process for regularly updating HRSA-supported evidence-based guidelines for women's preventive health services. Since 2016, HRSA has competed the program twice, positioning WISH as a national initiative to recommend Guidelines that, once supported by HRSA, require coverage without cost sharing for all women covered by non-grandfathered group and individual health insurance plans across the United States. During the past period of performance, the evidence reviews and Guidelines were expanded to support 14 women's preventive services Guidelines.

This program advances Making America Healthy Again priorities around disease prevention and reducing rates of chronic disease. For this award, HRSA aims to reduce the burden of chronic disease in women, while also enhancing dissemination and implementation of the recommendations.

Program requirements and expectations

If you are awarded funding through this program, you will be expected to meet program components in three areas:

- Convene a multidisciplinary group of preventive service stakeholders.
- Conduct evidence reviews and develop and provide to HRSA a report with recommended updates to the Guidelines.
- Disseminate information on the Guidelines tailored to those in communities with limited access to preventive health services.

The following sections explain each of these sets of expectations in more detail.

Convene a multidisciplinary group of preventive service stakeholders

We expect you to:

- Convene a multidisciplinary panel of at least 10 experts representing women's health professional organizations and public health/preventive medicine, for the purpose of developing and recommending updates to the Guidelines. Members of the expert panel may include, but are not limited to:
  - National organizations representing family physicians, pediatricians, adolescent medicine physicians, internal medicine physicians, preventive medicine physicians, public health practitioners, obstetricians and gynecologists, nurse practitioners, nurse-midwives, and other types of nurses.
  - Clinicians, researchers, and academic centers with a focus on epidemiology, women's health, and public health/preventive medicine.
  - Professional organizations and/or academic centers representing, at a minimum:
    - Public health.
    - Primary care.
    - Chronic disease management.
    - Preventive medicine.
    - Obstetrics and gynecology.
    - Behavioral health.
    - Patients.
    - Consumer organizations.
    - Organizations with experience reaching and serving women with limited access to preventive health services, including rural health organizations and providers, community-based organizations, and faith-based organizations.
- Help the members of the expert panel coordinate, review, and recommend development processes for the Guidelines.

Conduct evidence reviews and submit a report with recommended updates to the Guidelines

We expect you to build upon and refine the existing WISH process for developing recommendations to update the Guidelines. The process you use should follow the standards of developing trustworthy guidelines established by NASEM.

Successful applicants will be expected to:

- Review and recommend updates or reaffirm existing Guidelines based on emerging scientific evidence about women's preventive services. You should review all components of each Guideline at least once during the period of performance. Each Guideline has three components: Clinical Recommendation,

Implementation Considerations, and Research Recommendations. You will be expected to prioritize updates to the Clinical Recommendation portion of each Guideline.

- **Clinical Recommendations:** This section is reviewed and approved by HRSA for purposes of health insurance coverage without cost-sharing by group health plans and health insurance issuers.
- **Implementation Considerations:** This section contains information that guides clinicians but does not have insurance coverage implications.
- **Research Recommendations:** This section addresses gaps in the existing evidence and does not have insurance coverage implications.

- Develop a process to recruit and onboard review workgroups that include a broad range of content experts in women's preventive health care across the lifespan. At least 10 members should be recruited. Workgroup members should also include methodological experts and researchers.
- Make sure workgroups discuss emerging scientific evidence related to women's preventive services. Workgroups should also review and synthesize existing guidelines for women's clinical preventive services, including but not limited to:
  - U.S. Preventive Services Task Force recommendations.
  - Bright Futures Periodicity Schedule (for adolescents).
  - Practice guidelines recommended by professional organizations that represent providers of women's preventive services across the lifespan.
- Establish a process to integrate the existing Guidelines and new scientific evidence into a comprehensive document. The Well-Woman Chart serves as a comprehensive resource that organizes recommended preventive care and screenings for women across the lifespan, taking into consideration factors such age, health status, and risk factors.
- By October 1, 2028, and each following year of the period of performance, the award recipient will review and update or reaffirm the existing Guidelines based on emerging scientific evidence. The review process should ensure that the Guidelines are reviewed on a recurring basis, generally at least once every five years. The award recipient will be expected to submit the updated evidence report, a presentation on the evidence, and summaries of all public comments submitted.

Disseminating information on the Guidelines

We expect you to disseminate the Guidelines to promote their adoption and use in clinical practice and by patient populations, especially those with limited access to preventive health services resources.

Successful applicants will be expected to:

- Establish a coordinated dissemination strategy with partner organizations to promote consistent messaging and implementation of the HRSA-supported Guidelines for use in clinical practice and by patient populations.
- Develop, maintain, and update comprehensive educational materials, implementation tools, and other resources that support dissemination of the HRSA-supported Guidelines throughout the health care community, including health care providers, health systems, insurers, educators, and patients. Dissemination activities should use multiple communication channels to increase awareness, knowledge, and adoption of the Guidelines among groups including:
  - Health care and public health professionals.
  - Patients.
  - Health professions educators.
  - Health care organizations, health systems, and insurers.
  - Rural health care providers and organizations serving rural and frontier communities.
  - Community-based and faith-based organizations that can serve as trusted partners for outreach, education, and dissemination.
- Recipients are encouraged to engage trusted community partners with established relationships with populations that may experience limited access to preventive health services, including rural and faith-based organizations, as appropriate.
- Ensure that all dissemination materials clearly identify the Guidelines as the HRSA-supported Women's Preventive Services Guidelines and accurately reflect HRSA-approved Guideline content.
- Maintain and as needed, update Guideline-related materials and tools.
- Coordinate with HRSA on the development, review, branding, and dissemination of all public-facing products that reference the Guidelines or WISH, consistent with the terms of the cooperative agreement.
- Comply with HRSA requirements governing the use of the WISH name, logo, trademarks, and other HRSA-owned intellectual property. Recipients may use WISH trademarked materials and branding only as authorized by HRSA and must obtain HRSA approval prior to developing or disseminating materials that incorporate WISH trademarks, logos, or other protected branding elements.

Statutory authority

42 U.S.C. § 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act)

*From 2016 – 2026, WISH was previously titled the Women's Preventive Services Initiative (WPSI).

Award information

Cooperative agreement terms

Our responsibilities

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

- Ensuring experienced HRSA personnel are available to help you plan and develop the project.
- Participating, as appropriate, in conference calls, meetings, and technical assistance sessions that are conducted during the period of the cooperative agreement.
- Providing consultation on maintaining and updating the Guidelines, including compliance with all applicable federal requirements.
- Providing ongoing review and final recommendation on all program activities and processes.
- Participating in the development and implementation of the plan for obtaining expert participation and public comment.
- Coordinating partnership and communication with federally funded women's and maternal health programs and other relevant federal entities.
- Establishing or participating in federal interagency partnerships, collaboration, and cooperation that may be necessary to conduct the project.
- Conducting an ongoing review of the activities, procedures, measures, and tools used to accomplish the goals of the cooperative agreement.
- Helping to disseminate project findings, best practices, and lessons learned.

Your responsibilities

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

- Collaborating, communicating, and coordinating with HRSA/MCHB and other health professional organizations with expertise in women's health on the development and dissemination of the recommended Guidelines.

- Completing activities in response to the program requirements and expectations section of this NOFO.
- Reviewing, discussing and clearing any publications, audiovisuals, and other materials produced under this cooperative agreement with the federal project officer.
- Participating in face-to-face meetings and conference calls with HRSA, including participating in the biannual Maternal Health Action and Resource Center's Maternal Health Summit.
- Consulting with the federal project officer to schedule any meetings at which the project officer's attendance would be appropriate (as determined by the project officer).
- Collaborating with HRSA on ongoing review of activities, procedures, budget items, and information and publications prior to dissemination.
- Providing leadership in data collection and analysis.
- Promptly completing all administrative data and performance measure reports, as designated by HRSA.
- Maintaining, recommending updates, and reaffirming the Guidelines, including:
  - Complying with all applicable federal requirements.
  - Integrating the Guidelines into workforce development and training of health care providers and public health professionals.
  - Disseminating the Guidelines for use in clinical practice and public health systems.
  - Developing and implementing a plan for obtaining expert participation and public comment under the cooperative agreement.
  - Creating a program evaluation and dissemination plan.

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.
- 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
  - 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. For help calculating salaries under this limit, read more at "salary rate limitation" in Step 1 of the How to Apply – Application Guide.

Program-specific statutory or regulatory limitations

Please review additional information related to coverage of preventive health services in Section 2713 of the Public Health Service Act (42 U.S.C. 300gg-13), as added by the Patient Protection and Affordable Care Act, P.L. 111-148.

Non-grandfathered group health plans and non-grandfathered group and individual health insurance coverage must include coverage, without cost sharing, for the preventive services identified in that section, including the services provided in the HRSA-supported Women's Preventive Services Guidelines.

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.

Step 2:
Get Ready to Apply

In this step

Get registered	20
Find the application package	20
Application writing help	21

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.

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 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-27-072.

After you select the opportunity, click the Subscribe button to get updates.

If you need additional information about getting registered or finding the application package, see Step 2 in the How to Apply – Application Guide.

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.

FAQs will be posted on our TA webpage after the webinar.

Join the webinar

For more information about this opportunity, visit MCHB's open opportunities website. The webinar will be recorded.

Have questions? Go to Contacts and Support.

Step 3:
Build Your Application

In this step

Application checklist 23
Application contents and format 24

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*?
☐ **Project narrative** Use the Project Narrative Attachment form.	Project Narrative Atatchment form.	Yes
☐ **Budget narrative** Use the Budget Narrative Attachment form.	Budget Narrative Attachment form.	Yes

Attachments

Insert each in the Attachments Form in this order.

Component	Included in page limit*?
☐ 1. Work plan	Yes
☐ 2. Staffing plan and job descriptions	Yes
☐ 3. Biographical sketches	Yes
☐ 4. Agreements with other entities	Yes
☐ 5. Multi-year budgets, fifth year budget	No
☐ 6. Project organizational chart	Yes
☐ 7. Tables and charts	Yes
☐ 8. Dissemination & Awareness Supplement	No
☐ 9. Emerging Issues Supplement	No

Component	Included in page limit*?
☐ 10. Other relevant document	Yes
☐ 11. Other relevant document	Yes
☐ 12. Other relevant document	Yes
☐ 13. 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: 60

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

Required format

You can find technical guidance for formatting your application documents in Step 5 of the NOFO and in Step 5 of the How to Apply - Application Guide.

Project narrative

Introduction

See merit review criterion 1: Need

- Briefly describe the purpose of your project.

Need

See merit review criterion 1: Need

- Describe the target population's and/or audience's knowledge of recommended preventive services for women and their delivery.
- Describe the current state of preventive health services for women, and the need for preventive service guidelines for women.
- Discuss the limitations of the current women's preventive service recommendations.
- Describe how the identified needs for preventive health services for women have informed the project activities.
- Discuss any relevant barriers that you hope to overcome.

Approach

See merit review criterion 2: Response

Goals and objectives

- List your specific goals that respond to the purpose of the project, and how you plan to develop and update the Guidelines. Provide specific, measurable, achievable, realistic, and time-bound objectives for each proposed goal.

Creating a coalition of preventive service stakeholders

Address all of the requirements in the coalition section of the program description.

- Describe how you will convene multidisciplinary panels of experts representing women's health and public health/preventive medicine for the purpose of reviewing and recommending updates to the Guidelines and another panel for to support dissemination activities.

- Outline steps you will take to make sure that the expert panel includes health professional organizations with expertise in adult women's health across the lifespan and preventive medicine/public health.
- Describe how you will help the expert panel members coordinate, review, and recommend development processes for the Guidelines.

Conducting evidence reviews and updating the Guidelines

Address all of the requirements in the conducting evidence reviews and updating the Guidelines section of the program description.

- Describe how you will review, update or reaffirm the existing women's preventive services recommendations using current and emerging scientific evidence, and discuss your process for creating new Guidelines, when warranted.
- Outline the process and timeline you will use to recruit and onboard workgroup members that consist of a broad range of content experts in adult women's preventive health care across the lifespan.
- Describe how you'll convene and coordinate review workgroups to discuss current and emerging scientific evidence related to women's preventive services.
- Describe how you will incorporate existing guidelines and new scientific evidence into a comprehensive final report that supports women's preventive services across the lifespan.
- Outline the process that you will use to submit updated, reaffirmed or new individual recommendations annually (at least once during the project period), when warranted, to HRSA/MCHB by October 1, 2028, and then annually thereafter.

Disseminating information on the Guidelines

Address all of the requirements in the dissemination section of the program description.

- Outline the process you will use for developing consensus among partner organizations to support the comprehensive Guidelines for use in clinical practice and by patient populations.
- Describe the process you'll use to ensure that the recommended Guidelines include comprehensive resources for the purpose of dissemination throughout the health care community, including all the groups listed in the program description.
- Describe how you will identify and engage partners that can extend the reach of the Guidelines to populations with limited access to preventive health services, including, as appropriate, rural health providers and organizations, community-based and faith-based organizations.

- Describe how you will maintain and, as needed, update related materials and tools in response to changing standards and new scientific knowledge.

High-level work plan

See merit review criteria 2: Response and 4: Impact

- Describe how you'll achieve each of the objectives during the period of performance.
- Provide a work plan with a timeline as Attachment 1 that includes each activity and identifies who is responsible for each. As needed, identify how key stakeholders will help plan, design, and carry out these activities.
- The work plan and timeline should cover the entire five-year period of performance and should align with and be supported by the needs assessment, proposed budget, and organizational capacity.

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'll resolve them.
- **Outcomes.** Describe the expected outcomes (desired results) of the funded activities.
- **Performance measurement and reporting**. See our reporting manual for performance measure requirements and examples of reporting forms.
    - Describe how you will collect, and report required performance data accurately and on time.
    - Describe how you will 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 to continually improve your program.
- **Program evaluation**. Describe how you will evaluate your project. The evaluation should examine processes and progress towards goals, program objectives, and expected outcomes. Evaluations should follow the HHS Evaluation Policy, as well as the standards and best practices described in OMB Memorandum M-20-12. In the description of your evaluation, include:
    - The evaluation questions, methods, data you will collect, and timeline for evaluating the program.
    - Challenges in evaluating your program and how you will address them.

    - The capacity of your organization and staff to evaluate the program. Include their experience, skills, and knowledge.
- How you will share results, how you will assess whether you are sharing results effectively, whether your results are national in scope, and whether other organizations can replicate your program.

See the reporting section for more information.

Sustainability

See merit review criterion 4: Impact

We expect you to sustain key project elements that improve practices and outcomes for the target population. Propose a plan for project sustainability after the period of federal funding ends.

- Highlight key elements of your projects. Examples include training methods or strategies that have been effective in improving practices.
- Describe the actions you'll take to obtain future sources of funding.
- Determine the timing to become self-sufficient.
- 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

Briefly describe your mission, structure, and the scope of your current activities. Explain how they will help you carry out the program requirements. You'll include a project organizational chart in your attachments.

- Discuss how you'll follow the approved project, keep track of all federal funds, and record all costs to avoid issues during the project audit.
- Describe how you'll assess the unique needs of the people who live in the community you serve.
- Describe your organizational profile, budget, partners, key processes, and your key staff's experience, skills, and knowledge.
    - Describe how this program fits into your organization's mission.
    - Demonstrate an understanding of preventive health screenings and services for women.
    - Describe project personnel, including proposed partners, who will fulfill the project requirements.

    - Include a staffing plan and job descriptions for key personnel in Attachment 2. The plan should list staff titles (for example, program director, program assistant, state coordinator, and data coordinator), and number of FTEs fulfilling the role, roles and responsibilities of each position.
    - Include biographical sketches of key personnel in Attachment 3.
    - Provide a list of proposed partners and identify each one's role in program implementation.

- Provide information on your ability, capacity, and experience to enhance health care professionals' knowledge and practice of appropriate preventive health services. Specifically, describe experience with:
    - Promoting preventive health services for adult women across the lifespan.
    - Developing clinical guidelines for delivering such services.
    - Engaging significant numbers of health professional organizations with expertise in women's health care and/or public health/preventive medicine at the national, state, and local levels.
    - Developing and disseminating informational materials and resources on clinical guidelines.
- Provide information on your ability, capacity, and experience fostering partnerships between various health professional organizations with expertise in women's health and/or public health/preventive medicine. Discuss collaborative efforts with health care organizations and health care professional organizations with expertise in these areas.
    - Provide letters of agreement as Attachment 4 from a broad spectrum of health professional organizations with expertise in adult women's health across the lifespan and/or public health/preventive medicine who have committed to participating in the project.
    - You may also provide letters of agreement from other key dissemination and community partners, including rural health organizations, community-based organizations, and faith-based organizations, that describe their proposed roles in outreach, education, implementation, and dissemination.
- Describe how all these factors contribute to the organization's ability and capacity to conduct the project requirements and meet project expectations. Focus on any experience related to convening stakeholders, promoting preventive services for adult women across the lifespan, and creating and disseminating resources and materials.

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.
- This program requires a five-year budget proposal. The SF-424A Budget Form outlines the budget categories for the first four years of the project. Applications must include an additional one-year budget to cover the entire period of performance. This document must be included as Attachment 5: 5th Year Budget.

To create your budget narrative, see budget narrative detailed instructions in Step 3 section of the How to Apply – 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: 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 description

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 their education and experience. Explain your reasons for the time you request for each staff position.

For each key staff member, attach a one-page job description. It must include their role, responsibilities, and qualifications.

Attachment 3: Biographical sketches

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

Each biographical sketch 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 4: Agreements with other entities

Provide any documents that describe working relationships between your organization and others you mention in your project narrative. If you include documents that confirm actual or pending contracts or agreements, the documents should clearly describe the roles of subrecipients and contractors and any deliverables. It is not necessary to include the entire contents of lengthy agreements, so long as the portions you include describe the working relationship between you and the other organization. Make sure letters of agreement are signed and dated.

Attachment 5: For multi-year budgets, fifth year budget

For the fifth budget year, submit a copy of Section B of the SF-424A as an attachment. We do not count this in the page limit however; any related budget narrative does count. See Section 3.1.4 of the Application Guide.

Attachment 6: Project organizational chart

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

Attachment 7: Tables and charts

Provide tables or charts that give more detail about the proposal. These might be Gantt, PERT, or flow charts.

Attachment 8: Dissemination & Awareness Supplement (Optional)

This attachment is only needed if you are requesting additional funding for this supplement. Applying for this supplement will not impact your base WISH application score.

Note: You need to apply for the WISH program to apply for this supplement.

Maximum length: 3-page narrative (excluding work plan and budget)

If applying for this supplemental funding opportunity, submit the following:

A. Supplement Narrative (up to 3 pages)

Describe:

- The dissemination and awareness activities you propose to conduct beyond the base WISH award requirements.
- The target audiences and partners (e.g., clinicians, health professions students, health systems, patients, rural health providers and organizations, community-based organizations, faith-based organizations, and populations in rural, frontier, tribal, or other communities with limited access to preventive health services).
- The innovative outreach, education, communication, or implementation strategies you will use.
- How the proposed activities will increase awareness, understanding, adoption, and implementation of the HRSA-supported Women's Preventive Services Guidelines.
- Expected outcomes and how success will be measured.

- How the proposed activities complement, but do not duplicate, the activities proposed under the base WISH application.

B. Supplement Work Plan

Provide a concise work plan that includes:

- Major activities
- Timeline
- Key milestones
- Responsible personnel

C. Supplement Budget and Budget Narrative

Provide a detailed budget for the requested supplemental funds and a brief justification describing how requested costs support the proposed supplemental activities.

Attachment 9: Emerging Issues Supplement (Optional)

This attachment is only needed if you are requesting additional funding for this supplement. Applying for this supplement will not impact your base WISH application score.

Note: You need to apply for the WISH program to apply for this supplement.

Maximum length: 3-page narrative (excluding work plan and budget)

If applying for this supplemental funding opportunity, submit the following:

A. Supplement Narrative (up to 3 pages)

Describe:

- The emerging issue(s), implementation challenge(s), or research question(s) you propose to address.
- The significance of the proposed activities for improving women's preventive services and implementation of the HRSA-supported Women's Preventive Services Guidelines.
- The proposed research, implementation science, evaluation, pilot activities, or innovative program approaches.
- The methods or approach you will use, including anticipated products or deliverables.
- Expected outcomes and how findings will inform implementation or future updates to the Guidelines.

- How the proposed activities complement, but do not duplicate, the activities proposed under the base WISH application.

B. Supplement Work Plan

Provide a concise work plan that includes:

- Major activities
- Timeline
- Key milestones
- Responsible personnel

C. Supplement Budget and Budget Narrative

Provide a detailed budget for the requested supplemental funds and a brief justification describing how requested costs support the proposed supplemental activities.

Attachment 10: other relevant documents

You may use attachments 10 through 13 to add other relevant documents.

Attachment 11: other relevant documents

You may use attachments 10 through 13 to add other relevant documents.

Attachment 12: other relevant documents

You may use attachments 10 through 13 to add other relevant documents.

Attachment 13: other relevant documents

You may use attachments 10 through 13 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.
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 Step 3 section of the How to Apply – 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 population groups you plan to serve. For more information, see Section 3.1.2 of the Application Guide.

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

In this step

Application review	38
Selection process	43
Award notices	43

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.

Merit review

A panel reviews all applications that pass the initial review. You can find more about the merit review process in Step 4 of the How to Apply – Application Guide. The members use these criteria.

Criterion	Total number of points = 100
1. Need	10 points
2. Response	30 points
3. Performance management	10 points
4. Impact	10 points
5. Resources and capabilities	30 points
6. Support requested	10 points

Criterion 1: Need (10 points)

See the project narrative Introduction and Need sections.

The panel will review your application for the extent to which it:

- Describes the purpose of the project and the need for women's preventive service recommendations, and for need of the continued attention on preventive services.
- Describes unmet needs and gaps in preventive services for women.

Criterion 2: Response (30 points)

The review panel will assess the extent to which the application:

Approach (20 points)

- Proposes an approach that aligns with the purpose of the funding opportunity and addresses the program requirements and expectations. Specifically, the

extent to which the proposed plan and activities address the following key program components:

- Convening a multidisciplinary group of preventive service stakeholders
- Conducting evidence reviews and update the Guidelines
- Disseminating information on the Guidelines

- The strength of the proposed goals and objectives and how well they relate to the project.
- Presents clear, appropriate, and achievable goals and objectives that support the proposed project.
- Describes activities that are likely to address the identified needs and achieve the project objectives.
- Demonstrates a feasible strategy for engaging trusted partners to reach populations with limited access to preventive health services, including rural and frontier communities.

Work Plan (10 Points)

- Clearly describes how each objective outlined in the Approach section will be achieved during the project period, and clearly describes a thorough process for program implementation, recommendation development, and Guideline dissemination.
- Includes a work plan with a timeline as Attachment 1 that details each activity and identifies who is responsible for each and, as applicable, how key stakeholders will help plan, design, and carry out these activities.
- Explains how ready you and your expected partners are to work together to achieve project goals and expectations.
- How well the work plan and timeline align with and are supported by the needs assessment, proposed budget, and organizational capacity.

Criterion 3: Performance management (10 points)

See the project narrative Performance reporting and evaluation section.

The panel will review your application for:

Evaluation

- The strength of your overall approach and methodology to evaluate project results against goals and objectives and gain insights into program outcomes and impact.

Performance measurement

- The strength and effectiveness of the method proposed to monitor and evaluate the project results. Evidence that the measures will be able to assess:
  - To what extent the program objectives have been met, and
  - To what extent these can be attributed to the project.

Criterion 4: Impact (10 points)

The panel will review your application for:

- How effective the proposed project is likely to be.
- How strong a public health impact it is likely to have.
- How effective your plans for sharing project results are likely to be.
- What the likely impact on the community or target population will be.
- How likely the project results are to be national in scope.
- The strength of the Proposed plan for project sustainability after the period of federal funding ends.
- Discuss challenges that you'll likely encounter in sustaining the program. Include how you will resolve these challenges.

Criterion 5: Resources and capabilities (30 points)

See the project narrative Organizational information and Performance management sections.

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

Organizational Information (20 points)

- Project staff have the training or experience to carry out the project.
- You have quality facilities available to carry out the project.

- You provide detailed information on the organization's current mission and structure, the scope of its current activities, and an organizational chart. You describe how these factors contribute to the organization's ability to conduct the project activities.
- You demonstrate strong partnerships with organizations that represent health professionals with expertise in adult women's health across the lifespan, public health/preventive medicine professionals, patient and consumer groups, and organizations with the capacity to reach populations with limited access to preventive health services, including rural health, community-based, and faith-based organizations, as appropriate, at the national, state, and local levels.
- You demonstrate significant experience and expertise in developing and disseminating clinical guidelines, informational materials, and training to health care providers.
- You provide letters of agreement from a broad spectrum of national health professional organizations with expertise in women's health and public health/ preventive medicine to participate in a workgroup to guide the coordination, review and updating of the women's preventive services Guidelines.
- You describe experience partnering with organizations that have established relationships with populations with limited access to preventive health services, including rural health organizations and providers, community-based organizations, and faith-based organizations, as applicable.
- Includes a well-defined project organizational chart in Attachment 6.
- Demonstrates that key personnel, including the Project Director/Program Manager, and Fiscal Manager have appropriate qualifications, experience, and sufficient time commitment to carry out project activities.
- Includes a staffing plan, position descriptions, and biographical sketches for key personnel.
- Project staff have the training or experience to carry out the project.

Performance Management (10 points)

- Project staff have the training and experience to carry out performance reporting and program evaluation.
- How well the applicant describes the capacity of the organization and staff to carry out performance reporting, monitoring, evaluation, and quality improvement activities.
- How well the applicant describes staff experience, skills, and knowledge related to data collection, performance measurement, evaluation, and continuous quality improvement.

- How well the applicant demonstrates the capacity to manage and report data accurately and securely.
- How well the applicant demonstrates that sufficient systems, processes, and resources are in place to support required reporting, evaluation, and continuous quality improvement activities.

Criterion 6: Support requested (10 points)

See the Budget and budget narrative section.

The panel will review your application to determine:

- How reasonable the proposed budget is for each year of the period of performance.
- How reasonable costs are and how well they align with the project's scope.
- How sufficient the 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.
- The results of reviewing the progress report submitted with a competing continuation application that seeks to a new period of performance.
- Alignment with HRSA Mission and Strategic Priorities.

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.

Award notices

We issue Notices of Award (NOA) on or around the start date listed in the NOFO. See "how we make awards" in Step 4 of the How to Apply – 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 45
Other submissions 46

Application submission and deadlines

Your organization's authorized official must certify your application. Make sure you have everything you need. See Step 5 in the How to Apply – Application Guide for more detailed information on submitting your application.

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 How to Apply – Application Guide.

Application deadline

You must submit your application by 1/8/2027, 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 deadline waiver" in Step 5 of the How to Apply – 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 Step 5 in the How to Apply in 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

In this step

Post-award requirements and administration 48
Reporting 52

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.

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:
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 Step 6 of the How to Apply – Application Guide. The NOA will provide specific details.

You must also follow these program-specific reporting requirements:

- Progress report(s) each year
- Annual Performance reports.
- **DGIS Performance Reports.** The Discretionary Grant Information System (DGIS) is where you will report annual performance data to us. You will submit a DGIS Performance Report annually, by the specified deadline.
- To prepare successful applicants for their reporting requirements, the listing of administrative forms and performance measures for this program are available at https://grants4.hrsa.gov/DGISReview/programmanual?NOFO=HRSA-27-072&ActivityCode=UH0. The type of report required is determined by the project year of the award's period of performance. You can see the full OMB-approved reporting package at Discretionary Grants Information System on our website (OMB Number: 0915-0298 | Expiration Date: 12/31/2026).

Type of Report	Reporting Period	Available Date	Report Due Date
a) New Competing Performance Report	March 1, 2027 - February 28, 2027 *administrative data and performance measure projections, as applicable*	Period of performance start date	120 days from the available date
b) Non-Competing Performance Report	March 1, 2028 - February 28, 2029	Beginning of each budget period (Years 2–5, as applicable)	120 days from the available date
c) Project Period End Performance Report	March 1, 2028 - February 28, 2029	Period of performance end date	90 days from the available date



Contacts and Support

In this step

Agency contacts 54

Help with systems 54

Agency contacts

Program and eligibility

CDR Johannie Escarne, Acting Deputy Director

Attn: Women's Initiative for Screening and Health (WISH)
Health Resources and Services Administration
wellwomancare@hrsa.gov
301-443-5692

Financial and budget

Travis J. Wright

Grants Management Specialist Division of Grants Management Operations Office of Financial Assistance and Acquisition Management (OFAAM) Health Resources and Services Administration
twright@hrsa.gov
301-443-0676

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

- How to Apply – Application Guide
- HRSA Grants page
- HHS Tips for Preparing Grant Proposals
- Frequently Asked Questions
- Applicant Training

Footnotes

[1] U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation (ASPE). Access to Preventive Services without Cost-Sharing: Evidence from the Affordable Care Act (January 2022).

[2] Standards for Developing Trustworthy Clinical Practice Guidelines