



Rural Health Care Coordination Program

Notice of Funding Opportunity: HRSA-23-125

Technical Assistance Webinar

April 6, 2023

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Federal Office of Rural Health Policy (FORHP)

Vision: Healthy Communities, Healthy People



Agenda

- Webinar Overview
- FORHP Overview
- About the Rural Health Care Coordination Program (HRSA-23-125)
 - Program Purpose
 - Eligibility Requirements
 - Funding Preferences
 - Program Requirements and Expectations
 - Application Requirements
- How to Apply
- Review Process
- Resources
- Questions



Webinar Overview

- **Documents Available for Download**
 - HRSA-23-125 Program NOFO
 - HRSA-23-125 Technical Assistance Webinar (slides)
 - HRSA-23-125 Frequently Asked Questions
- **Access Webinar Recording**
 - The technical assistance recording can be accessed by emailing forhprhccp@hrsa.gov
- **Questions**
 - Ask question during the middle and at the end of the presentation
 - Chat pod may be used throughout the presentation
 - Email forhprhccp@hrsa.gov afterwards

Note: HRSA cannot provide information or guidance beyond what is included in the notice of funding opportunity. HRSA cannot edit draft applications or provide feedback on specific project proposals.



Disclaimer

- ***The Rural Health Care Coordination Program Notice of Funding Opportunity (NOFO) and HRSA's SF-424A Application Guide*** should be your primary resources for application instructions and guidelines.
- *This webinar will merely provide a brief overview of the NOFO and answer any questions you might have at this stage in the process.*

HRSA's *SF-424A Application Guide* is available at:

<http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>



How to Access the Notice of Funding Opportunity Announcement (NOFO)

Notice of Funding Opportunity (NOFO)
providers programmatic information

<https://www.grants.gov/web/grants/view-opportunity.html?oppId=346212>

U.S. Department of Health and Human Services

HRSA

Health Resources & Services Administration

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2023
Federal Office of Rural Health Policy
Community-Based Division

Rural Health Care Coordination Program
Funding Opportunity Number: HRSA-23-125
Funding Opportunity Type: New
Assistance Listings Number: 93.912

Application Due Date: May 26, 2023

MODIFIED on April 5, 2023:

Revision: Extended the Application Due Date.

Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!

HRSA will not approve deadline extensions for lack of registration.

Registration in all systems may take up to 1 month to complete.

Issuance Date: March 23, 2023

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Federal Office of Rural Health Policy
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See [Section VII](#) for a complete list of agency contacts.

Authority: 42 U.S.C. 254c(e) (Section 330A(e) of the Public Health Service Act)



How to Access the Notice of Funding Opportunity Announcement (NOFO)

- Announcement: [HRSA-23-125](#)
- Go to **GRANTS.gov** search “**Rural Health Care Coordination Program**” and click on “**HRSA-23-125**” from the list of programs filtered by the search.
 1. Select the “Related Documents” tab.
 2. Select “FORHP HRSA-23-125 (D78) Rural Health Care Coordination FINAL.”
 3. A new window will open with the Notice of Funding Opportunity.



Federal Office of Rural Health Policy (FORHP)

- **Help increase access to care for rural underserved populations and build health care capacity**
 - Community Based Division
 - Hospital State Division
 - Rural Strategic Initiatives Division
 - Policy Research Division
- “Voice for Rural Health”
- Review Health and Human Services regulations
- Administer Grant Programs
- Provide Technical Assistance and Other Resources

Visit us at: <https://www.hrsa.gov/rural-health>



FORHP Priorities

FY 2023



Supporting Rural Hospital and Clinics



Addressing Substance Use Epidemic



Uplifting Rural Community Health



Addressing Rural Disparities



Promoting Partnerships to Address Rural Health Workforce

FY23 Rural Health Care Coordination Program (Care Coordination Program)

HRSA-23-125 Notice of Funding Opportunity (NOFO)
Review



FY23 Care Coordination Program Information

(NOFO Page ii & 1)

Purpose:

- To promote rural health care services outreach by improving and expanding delivery of health care services through comprehensive care coordination strategies in rural areas.
- This award is intended to serve as initial seed funding to implement creative community-based health solutions in rural communities to expand access to and coordination of care with the expectation that awardees will then be able to sustain the program after the federal funding ends.



Program Information – Four Goals (NOFO Page ii & 1)



Expand Access



Improve Outcomes



Increase Collaboration



Sustainability

Program Information – Four Goals (NOFO Page ii & 1)

Goals:

1. Expand access to and quality of equitable health care services through care coordination strategies exclusively in rural areas;
2. Utilize an innovative evidence-based, promising practice, and/or value-based care model(s) that is known to, or demonstrates strong evidence to, improve patient health outcomes and the planning and delivery of patient-centered health care services;
3. Increase collaboration among multi-sector and multidisciplinary network partnerships to address the underlying factors related to social determinants of health; and
4. Develop and implement deliberate and sustainable strategies of care coordination into policies, procedures, staffing, services, and communication systems.

Your project narrative should align with the four goals



Program Information - Select a Primary Focus Area (NOFO Page ii & 1)

Select one primary focus area from the following:

- 1) heart disease;
- 2) cancer;
- 3) chronic lower respiratory disease;
- 4) stroke; or
- 5) maternal health.

Although it is required to select one primary focus area, applicants may include underlying risk factors that contribute to the selected primary focus area understanding care coordination includes the provision of care for individuals with chronic and/or medically complex diseases.



Program Information – Outcomes

(NOFO Page ii & 1)

At the end of the four years, applicants should be able to contribute to the following outcomes:

1. Expanded access to and affordability of quality comprehensive care coordination leading to cost savings and overall health improvement status;
2. Improved patient health outcomes through the utilization of chronic care management, and/or preventive and wellness services;
3. Institutionalized care coordination strategies within their policies, procedures, staffing, services, and communication systems;
4. Implemented a multidisciplinary and multi-sector referral system; and
5. Identified a variety of funding and financing mechanisms to continue comprehensive care coordination strategies beyond the initial FORHP grant funding.



Program Information – Target Population

(NOFO Pages 9, 14-15)

- **Serve Rural Underserved Populations** - HRSA requires that all applicants describe the geographic relationship to the proposed rural service population as well as the plans to ensure that rural populations are served.
- HRSA encourages applicants to include populations that have historically suffered from poorer health outcomes, health disparities, and other inequities, as compared to the rest of the rural population.
 - Examples of these populations include, but are not limited to, racial and ethnic minorities, low-income populations, homeless populations, pregnant women, disabled individuals, youth and adolescents, rural Black, Indigenous, and people of color populations, and rural populations with special health care needs.



Funding Overview (NOFO Pages ii-iii)

Application Due Date:	<u>May 26, 2023</u>
Estimated Number of Awards:	Up to 10
Maximum Funding Amount:	\$300,000 per year
Period of Performance:	September 1, 2023 - August 31, 2027 (4 years) <ul style="list-style-type: none">• Year one (September 1, 2023 – August 31, 2024): Planning Year• Years two – four (September 1, 2024 – August 31, 2027): Program Implementation Years

More information can be found in [HRSA's SF-424 Application Guide](#)



Eligibility – Service Area (NOFO Page 5)

- **Service Area** - All activities and services supported by this program must exclusively target populations residing in HRSA-designated rural counties or rural census tracts. Proposed rural counties should be included the *Project Abstract*.
- HRSA-designated rural definition
 - **Rural Health Grants Eligibility Analyzer:** <https://data.hrsa.gov/tools/rural-health?tab=Address>



Eligibility – Applicant Organization (NOFO Page 5)

- **Organizational Type:** Domestic public or private, non-profit or for-profit entities, including faith-based, community-based, tribes and tribal organizations.
- **Organizational Experience:** Must have demonstrated experience serving, or the capacity to serve, rural underserved populations
 - should describe in detail your experience and/or capacity to serve rural populations in the **Project Abstract**



Eligibility – Consortium/Network (NOFO Page 5)

- For the purposes of the Care Coordination Program, a consortium can also be a network
- A network must:
 - Be composed of at least three or more **health care providers and/or payers***, including the applicant organization.
 - Submit letters of support and/or Memorandum of Understanding (MOU)
 - Have a governing body that includes representation from all member organizations and makes financial and programmatic decisions



*Refer to Appendix B for the definitions for health care providers and payers



Program Expectation: Network Partnerships (NOFO Pages 10-11)

- **Network Definition** – A formal organizational arrangement among at least three separately owned health care providers or other entities that provide or support the delivery of health care services. The purpose of a network is to foster collaboration and integration of functions among network entities to strengthen the rural health care system. For the purpose of this funding opportunity, the terms “consortium” and “network” are used interchangeably.
- **Organization Type:** Domestic public or private, non-profit or for-profit entities including faith-based, community-based organizations, tribes, and tribal organizations
 - Examples of network member entities include behavioral health organizations, critical access hospitals, rural health clinics, community-based and social service organizations, colleges and universities and tribal organizations.
- **Geography:** Network member organizations may be located in rural or urban areas
- At least 66% or two-thirds of network member organizations must be located in a HRSA-designated rural area, as defined by the [Rural Health Grants Eligibility Analyzer](#)
 - This means that if your network is composed of three (3) partners, at least two (2) must be located in a HRSA-designated rural area
 - Urban applicants must ensure shared local control from participating rural counties



Eligibility – Previous and Current Funding (NOFO page 5)

- **Previous Funding** - must not previously have received an award under this subsection for the same or similar project *unless* the entity is proposing to expand the scope of the project or the area that will be served through the project.
 - Funding history details requested submitted in **Attachment 6.**



Eligibility – State Offices of Rural Health (NOFO pages 34-35)

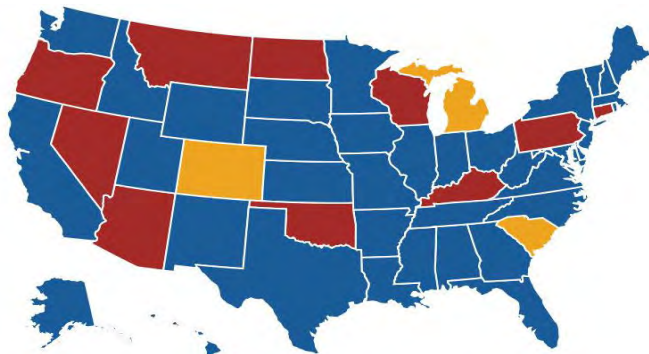
Applicants are required to consult their State Office of Rural Health (SORH) regarding their intent to apply to this program

Applicants must include in **Attachment 1** a copy of the letter or email sent to the SORH describing their project and any response to the letter received.

37 State Departments of Health

10 Institutions of Higher Learning

3 Non Profit Organizations



Who is my State Office of Rural Health (SORH)?

<https://nosorh.org/nosorh-members/nosorh-members-browse-by-state/>

What expertise does my SORH have?

<https://nosorh.org/sorh-showcase/areas-of-expertise/>

How can my SORH help me?

<https://nosorh.org/5-nosorh-releases-factsheet-and-video-to-support-sorh-work-with-cbd-grantees/>

Program Expectation: Staffing (NOFO page 11)

- The network must have a permanent Network Director in place at time of award. HRSA **strongly recommends** the network director role be 1.0 Full Time Equivalent (FTE).
- If a permanent Network Director has not been determined by the time of award, the network should establish an interim network director capable of overseeing the network's administrative, fiscal, and business operations at the time an award is made.
- HRSA prefers that the network director role is **different** from the project director role.

Application Tips – Staffing:

- Clearly state who the identified network director vs. project director (and other key personnel on the award) is for the proposed project.
- Names, titles, and positions for key staff should be included in the Project Abstract.



Program Expectation: Staffing (NOFO page 11) – cont.

- Applicants **must** identify a Project Director (PD) *prior* to receiving award funds.
 - The PD is responsible for project/program monitoring and carrying out the award activities

HSRA **strongly recommends** applicants to:

- The PD be different from the Network Director
- The PD allot at least 0.5 FTE to the program
- The PD role be filled by one individual; not split amongst multiple staff
- Refer to narrative section under *Resources/Capabilities & Attachment 2* for additional guidance

Application Tips – Staffing:

- Clearly state who the identified network director vs. project director (and other key personnel on the award) is for the proposed project.
- Names, titles, and positions for key staff should be included in the Project Abstract.



Application Requirements

HRSA-23-125

Rural Health Care Coordination Program



Application Requirements

Application Section	NOFO Information/Details
1. Project Abstract	Pages 11-13
2. Project Narrative <ul style="list-style-type: none">• Introduction• Needs Assessment• Methodology• Work Plan• Resolution of Challenges• Evaluation of Technical Support• Organizational Information	Pages 14-19
3. Budget	Pages 19-20
4. Budget Narrative	Page 20
5. Attachments	Pages 21-23

**PAGE LIMIT:
60 PAGES**



Application Requirements - Project Abstract (NOFO pages 11-13)

What it is: a one-page, single spaced **summary** of the application.

Tips for Applicants:

- DO NOT upload as an attachment as it may count toward the page limit.
- Provide **all** requested information
- See Section 4.1.ix of HRSA's [SF-424 Application Guide](#) for further instructions

ABSTRACT HEADING CONTENT
Applicant Organization Information Organization Name, Address (street, city, state, zip code), Facility/Entity Type (FHQC, RHC, public health department, etc.) and Website Address (if applicable)
Designated Project Director & Network Director Information <ul style="list-style-type: none">- Project Director Name & Title, Contact Phone Number(s), and E-Mail Address- Network Director Name & Title, Contact Phone Number(s), and E-mail Address- Key Staff Names & Titles, Contact Phone Number(s), and E-mail Address
Rural Health Care Coordination Project: Project Title and Goal
Primary Focus Area: Select one primary focus area from the following: 1) heart disease, 2) cancer, 3) chronic lower respiratory disease, 4) stroke or 5) maternal health)
Proposed Service Area(s): (e.g., states, cities, counties (required)) • NOTE: Proposed rural counties should be fully rural. For partially rural counties, include rural census tract(s).
ABSTRACT BODY CONTENT
Target Patient Population Brief description of the target population group(s) to be served (2-3 sentences max)
Network Members <ul style="list-style-type: none">- Network Name, network members' names, addresses, and EINs- Total number of member organizations and facility/entity type of organizations; HRSA requires an attestation that at least sixty-six percent (66%), or two-thirds of the network composition involved in the proposed project be located in a HRSA-designated rural area, as defined by the Rural Health Grants Eligibility Analyzer
Network Project Activities/Services Brief description of the proposed project activities and/or services provided through the network collaboration
Expected Outcomes Brief description of the proposed project expected outcomes. Clearly label and organize these expected outcomes by the goals for the Rural Health Care Coordination Program .
Evidence-based, Promising Practice, and/or Value-Based Care Models The title/name of the evidence-based, promising practice, and/or value-based care model(s) that you will be adopting and/or adapting. If the model was tailored for the proposed project, please briefly describe how it was modified.
Capacity to Serve Rural Underserved Populations Applicants must demonstrate their experience serving or the capacity to serve, rural underserved populations. Please describe your capacity to serve rural underserved populations. Examples to show this capacity may include a history or ability to: <ul style="list-style-type: none">- Identify activities that build, strengthen, and maintain the necessary skills and resources needed to sustain or improve health services delivery in rural populations- Discuss organizational expertise and capacity as it relates to the scope of work proposed. Include a brief overview of the organization's assets, skills and qualifications to carry on the project- Describe current experience, including partnerships, activities, program implementation and previous work of a similar nature



Application Requirements - Project Narrative (NOFO pages 14-19)

What it is: Application requirement requesting a comprehensive framework for describing all aspects of the proposed project. Serves to help reviewers clearly understand proposed projects.

Tips for Applicants:

- Follow the required section and sub-section header format
- Complete responses for each section and sub-section using the specific details requested in the NOFO under each section
- Responses should be succinct, self-explanatory and well organized
- Responses should be consistent and supportive of the project proposal's overarching goals, objectives and focus
- Clearly state explicit project goals and expected outcomes

Section Headers

Introduction

Needs Assessment

Methodology

Work Plan

Resolution of Challenges

Evaluation and Technical Support Capacity

Organizational Information



Application Requirements - Project Narrative (NOFO Pages 14-19)

- **Clear Plan for Four Program Goals with your selected primary focus area** - Project plans to accomplish your program goals
- **Clear Project Target Patient Population** to be served, tracked and measured over the duration of the 4-year performance period. Refer to Appendix A: Draft Performance Measures.
- **Identify and Address Health Inequity** among target population and/or any subsets of the target population you propose to serve
- **Network Information** should include network composition, control and governance structure
- **Based on Models of Proven Success** - Utilization of an evidence-based or promising practice models to meet project goals



Application Requirements - Budget & Budget Narrative (NOFO Page 20)

All applicants are required to submit a budget and budget narrative as instructed in NOFO on page 20 and in the SF-424 Application Guide that includes:

Requested Budget Line Item Categories

- Personnel Costs
- Travel
- Equipment
- Supplies
- Contractual
- Other
- Indirect Costs

Remember to refer to the [HRSA SF-424 Application Guide](#) as directed throughout the NOFO

Remember to logically link budget narrative and categories to activities outlined in the project narrative.



Application Requirements – Funding Restrictions (NOFO pages 24-25)

Funds under this announcement **may not** be used for the following purposes:

- To build or acquire real property; or
- For construction or major renovation or alteration of any space (see 42 U.S.C. 254c(h))

Note: Also refer to [HRSA SF-424 Application Guide](#)



Application Requirements – Attachments

(NOFO pages 21-23)

- **What it is:** Includes required and optional document attachments that complete the content of the application

Tips for Applicants:

- Carefully follow the instructions detailed in the NOFO for each attachment
- Clearly label and order each attachment in the order laid out in the NOFO
- Be aware of what does and does not count toward the application's **page limit**



Application Requirements – Attachments (NOFO Pages 21-23)

Attachments

#1 State Office of Rural Health Letter (required)
#2 Staffing Plan (required)
#3 Organization Chart (required)
#4 Letters of Commitment (required)
#5 Exceptions Request (if applicable)
#6 Funding Preference Documentation (if applicable)

#7 Previous Grants (if applicable)
#8 Work Plan (required)
#9 Network Governance Plan (required)
#10 Other Relevant Documents (if applicable)

Note that attachments 1-6 **will not count** towards the 60-page limit. Refer to the Appendix C Page Limit Worksheet (NOFO Pages 50-51).



Funding Preferences (NOFO pages 34-35)

Requesting a Funding Preference

**Funding preference request must be included in the Project Abstract*

**Proof of meeting funding preference must be included in Attachment 6*

Qualification 1: Health Professional Shortage Area (HPSA)

- <https://data.hrsa.gov/tools/shortage-area>

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

- <https://data.hrsa.gov/tools/shortage-area>

Qualification 3: Focus on primary care and wellness and prevention strategies

- Must be evident throughout the project narrative.



HRSA-23-125

Rural Health Care Coordination Program

NOFO Review

How to Apply



Technical Assistance

- Award recipients are expected to work closely with a HRSA-funded Technical Assistance provider during the period of performance.
 - Anticipated technical assistance includes routine conference calls, site visits and program meetings.
 - Targeted TA will assist award recipients with achieving desired project outcomes, network development, sustainability and strategic planning, and will ensure alignment of the awarded project with the program goals.
 - The TA is provided to award recipients at no additional cost.



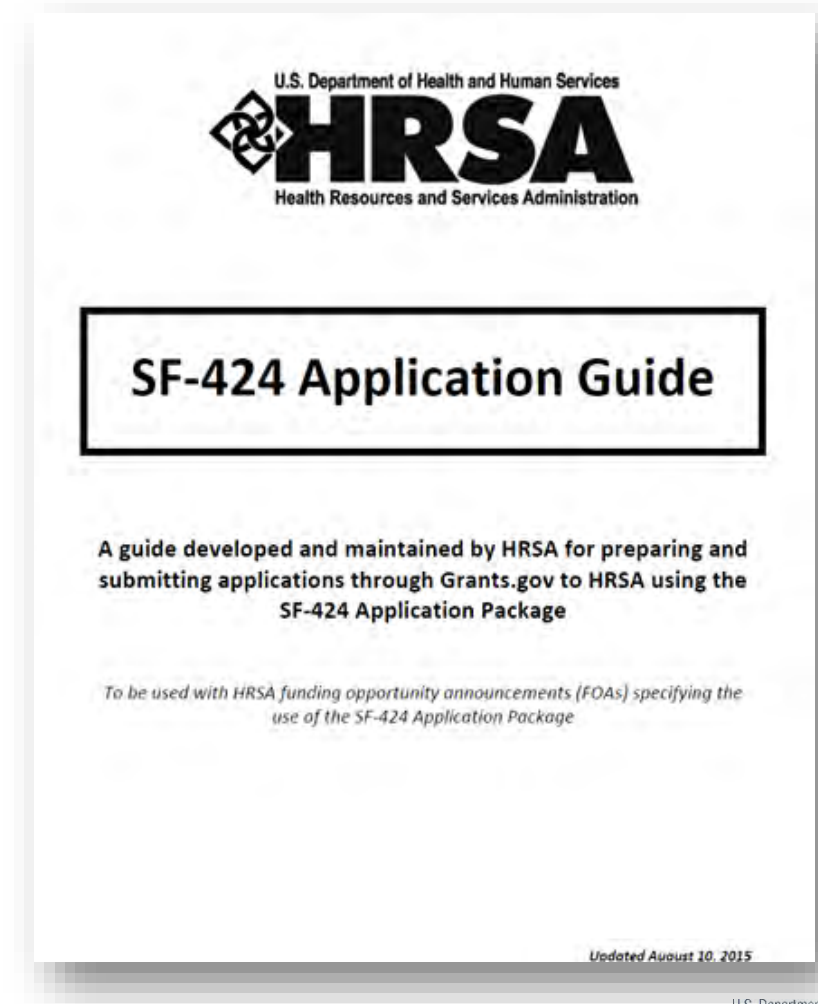
How to Apply

Application Guide

Companion Guide to the NOFO

Referenced throughout the NOFO

<https://www.hrsa.gov/sites/default/files/hrsa/grants/application/applicationguide/sf-424-guide.pdf>



How to Apply

Must register in 2 different systems

System	Why is it important	Website
Unique Entity Identifier (UEI)	UEI numbers are required to do business with the federal government. (Replaced DUNS number)	https://help.hrsa.gov/display/public/EHB/SKBFG/UEI+Transition+-+Applications%2C+Grants.gov%2C+Smar+t+Assist
System for Award Management (SAM)	Designating an E-Business Point of Contact. Registering with SAM is required for organizations to use Grants.gov.	http://www.sam.gov/
Grants.gov	Submit grant applications	http://www.grants.gov/web/grants/register.html



How to Apply – Registration Process

How long will the registration process take?



The process can take up to 4 weeks
START EARLY!

How to Apply – Grants.gov Details and the Authorized Organization Representative (AOR)

- Complete your **Authorized Organization Representative (AOR)** profile on Grants.gov and create your username and password at <http://www.grants.gov/web/grants/applicants/organization-registration.html>
- You will need to use your organization's SAM registration and UEI Number to complete this step
- Allow **3-5 business days** to register with Grants.gov after UEI and SAM registration
- When the registration is approved, the submitting AOR will receive a confirmation e-mail and will be able to submit an application



How to Apply – Tips for Completing your Application

- **Application Planning – What to Keep in Mind**

- Check registrations in SAM (UEI), and grants.gov!
- Read the entire funding opportunity and HRSA SF-424 application guide
- Check eligibility!
- Does your organization have the technical expertise, the personnel, and the financial capacity?
- Are all stakeholders supportive?
- Is your organization prepared to do what it takes?

- **Paint a Comprehensive Picture**

- **Review Criteria**

- All eligible applicants will be reviewed by an Objective Review Committee (ORC) to assess the technical merit of an application

- **Submit Your Application Early!**

Additional application writing resources are available in section 4.7 of HRSA's SF424 Application Guide. Tips for writing a strong application can also be found HRSA's website: <https://www.hrsa.gov/grants/apply/write-strong/index.html>



How to Apply - Submitting an Application

- Make sure your application is complete and follows the NOFO and SF-424 Application Guide instructions
- Submit your application in Grants.gov by **May 26, 2023 11:59 PM EST (now extended)**.
- Check your email
 - An applicant must receive at least two emails by the application deadline:
 1. Confirmation of application
 2. Validation of application
- Track the status of your application (see SF-424 Application Guide for more information)



What Happens After I Submit my Application?

HRSA's Division of Independent Review will:

- Convene panels of expert reviewers
- Ensure that a fair and ethical review is conducted for each application
- Provide a summary of the panel's comments regarding application strengths and weaknesses comments



Application Review Process (NOFO pages 26-33)

- Applications are reviewed and conducted by an external review panel
- Applications will be scored against the program's review criteria listed in the NOFO
- Awards are made to the highest scoring application submitted
- Review summaries and scores are sent out to all applicants after reviews are completed
- Acceptance and non-acceptance letters sent out prior to the award date
- The Notice of Award to successful applicants will be sent out prior to the project period start date

NARRATIVE GUIDANCE	
To ensure that you fully address the review criteria, this table provides a crosswalk between the narrative language and where each section falls within the review criteria. Any attachments referenced in a narrative section may be considered during the objective review.	
<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response (3) Evaluative Measures (4) Impact
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures (4) Impact (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.



Fiscal Overview



Budget Directions

- Consult the SF-424 Application Guide
 - Explore Section 4.1.iv *SF-424 Application Guide*
<http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>
 - **Total Project Costs:** *The total Allowance costs (Direct and Indirect Costs)*
 - **Travel Costs:** *Must be allocated for up to 2 program staff to attend annual 2.5 day Technical Assistance workshop in Washington, DC each year of the grant*
 - **Contractual:** *Consistent with 45 CFR 75, Applicant must have in place an acceptable and adequate procurement system with fully developed written procedures for awarding and monitoring all contracts.*
 - **Please ensure that you complete and submit the SF-424A form for this grant application.**



Budget Narrative

- Ensure to consult the SF-424 Application Guide in the NOFO
 - **Period of Performance: 4 Years**
 - **After the 1st Competitive Year: Recipient will have to submit an HRSA Progress Report with any other required submission reports.**
 - **Funding beyond the 1st Year:** Will be subject to the availability of appropriated funds for this program
 - SF-424A and Budget Narrative must align



Salary Limitation

- Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II, which is \$212,100.
- Pay attention to Funding Restrictions
 - **Unallowable Costs**
 - **Explore all the restrictions list before you submit your budget**



Preparing your Budget Narrative

- Must explain the amounts request for each line item or budget category
- **Must specifically describe how each item** supports the proposed objectives
- Justify in detail each item in the Other Category
- **For subsequent budget years, clearly indicate any substantive changes or highlight the changes from Year 1.**
- Provide a Budget Narrative for each Budget Year.



Resources

Rural Health Grants Eligibility Analyzer

- By State/County: <https://data.hrsa.gov/tools/rural-health?tab=StateCounty>
- By Address: <https://data.hrsa.gov/tools/rural-health?tab=Address>

State Offices of Rural Health Community-Based Organization Resources

- <https://nosorh.org/5-nosorh-releases-factsheet-and-video-to-support-sorh-work-with-cbd-grantees/>

Applicant FAQs

- <https://www.grants.gov/web/grants/applicants/applicant-faqs.html>

How to Apply for a Grant

- <http://www.hrsa.gov/grants/apply/index.html>

HRSA Guide for Developing Effective Financial Management Practices

- <https://www.hrsa.gov/grants/manage-your-grant/financial-management>

HRSA Office of Regional Operations (ORO)

- <https://www.hrsa.gov/sites/default/files/hrsa/about/organization/bureaus/oro/oro-factsheet.pdf>



Previously Funded Rural Health Care Coordination Program Projects

Abstracts of Funded Projects

- Visit <https://data.hrsa.gov/>
- Select 'Tools' then 'Find Grants'
- Select 'Rural Health' under 'HRSA Program Areas'
- Select the desired 'Fiscal Year,' 'Program Name' and any other specifications such as state, county or type of grantee
- Select "Find Grants"

Find Grants Results

Search Criteria:

Key Program Name: 'Rural Health'; Program Name: 'Small Health Care Provider Quality Improvement (G20)'

Export to PDF Export to Excel Data is current as of Feb 05, 2019

Rural Health							
2018	State	County	Grantee Class	Grantee	Grant Number	Program Director	Financial Assistance
Small Health Care Provider Quality Improvement (G20)							
Alaska	Anchorage Borough	Corporate Entity	Federal Tax Exempt	Providence Health & Services - Washington 3200 Providence Dr Anchorage, AK 99505-4815	0209P-02037	Olivia Foster 907.434.1826 Send email	\$200,000
View Abstract							
Alaska	Valdez-Cordova Census Area	Corporate Entity	Federal Tax Exempt	CR2ES ROAD HEALTH SERVICES, INC. 187 Glenn Hwy Bldg A Gannett, AK 99588-3005	0209P-02081	Lari Meach Send email	\$177,200
View Abstract							
Arkansas	DeWitt County	Corporate Entity	Federal Tax Exempt	Daughters of Charity Services of Arkansas 101 S Main St Dumas, AR 71628-2222	0209P-02125	Brenda Jacobs Send email	\$196,177
View Abstract							

Grantee Sourcebook:

<https://www.ruralhealthinfo.org/assets/2844-11034/care-coordination-network-partnership-sourcebook-2015-2018.pdf>

Grantee Directory:

<https://www.ruralhealthinfo.org/assets/4057-17180/2020-rural-health-care-coordination-grantee-directory.pdf>

Application Deadline

May 26, 2023
11:59 PM ET

[Click here to apply!](#)



Contact Information

Program-Related Inquiries:

Amber Berrian

(301) 443-0845

forhprhccp@hrsa.gov

Finance-Related Inquiries:

Eric Brown

301-945-9844

ebrown@hrsa.gov



Questions



Connect with HRSA

Learn more about our agency at:

www.HRSA.gov



[Sign up for the HRSA eNews](#)

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Eligibility Information: Frequently Asked Question #1

Q: Are we eligible to apply if our organization’s headquarters is not in a rural census tract but our target population (where we would be implementing the project) are?

A: Yes. Page 5 – “Eligible applicants shall be domestic public or private, non-profit or for-profit entities, including faith-based, community-based, tribes and tribal organizations. The applicant organization may be located in a rural or urban area, but must have demonstrated experience serving, or the capacity to serve, rural underserved populations.”



Eligibility Information: Frequently Asked Question #2

Q: How do you define “Health Care Provider ” and “Payer”?

A: Appendix B –

“Health care provider organizations are defined as entities including but not limited to hospitals, health systems, rural health clinics (RHCs), federally qualified health centers (FQHCs), primary care providers, specialty care providers, outpatient medical practices, oral health service providers, mental health centers, critical access hospitals (CAH), Certified Community Behavioral Health Clinics (CCBHCs), local public health departments, non-health human and social service organizations, community action agencies, accountable care organizations (ACO), State Home Visit, and Health Start Program organizations.”

“Payers – any entity responsible for providing coverage to patients and for the payment of healthcare. This includes but is not limited to private health insurance companies, State Medicaid, federal Medicaid, Medicare, Medicare Advantage, and other types of health plans.”



Eligibility Information: Frequently Asked Question #3

Q: Are tribal governments and faith-based organizations eligible to apply to this grant as they are public entities?

A: Yes. Faith-based and community-based organizations are eligible to apply for these funds. Tribes and tribal organizations are eligible to apply for these funds.



Eligibility Information: Frequently Asked Question #4

Q: Does my organization have to be a part of a consortium or network to apply for HRSA-23-125 funding?

A: Yes. Pages 5 and 10 – “Applicants must represent a network composed of three or more health care provider organizations and payers, including the applicant organization. For the purposes of the Care Coordination Program, a consortium can also be a health care network”

