

Rural Health Transformation Program Technical Assistance for Suicide Intervention-Healthcare Systems, May 19, 2026

Prepared from presentation slides and speaker notes. This handout is designed as an accessible companion document for participants who may not be able to use slide decks effectively.

1. Agenda

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Purpose: To help applications feel confident and prepared, we will review the funding opportunity guidance, highlight key requirements and provide a space for questions.

- Background
- Eligibility
- Purpose
- Unallowable costs
- Application and Review
- Reporting
- Questions
- Resources and Reminders

Information may change based on upon updated federal guidance or upon further consideration by North Dakota Health and Human Services (ND HHS).2. Rural Health Transformation Program (RHTP)

2. Rural Health Transformation Program (RHTP)

RHTP was authorized by the One Big Beautiful Bill Act (Section 71401 of Public Law 119-21) providing \$50 billion to all 50 states over five years

- North Dakota Health and Human Services (ND HHS) submitted an application to the Centers for Medicare and Medicaid Services (CMS)
- ND was awarded \$198.9M for year one (12/29/2025 – 10/30/2026)

North Dakota's application identified 4 initiatives

- Make ND healthy again
- Strengthen and stabilize rural health workforce
- Bring high-quality healthcare closer to home
- Connect technology, data and providers for a stronger ND

3. Funding Opportunities

- Funding opportunities will be released in phases, with individual applications announced over time.
- Each funding opportunity will have a unique purpose, eligibility and timeline.
- Future year's funds will be determined by CMS based on the state's progress on the plan submitted in the RHTP application.
- Use of funds must align with the state's RHTP application or provide justification.
- Use of funds must follow state and federal guidance.
- Awarded funds must receive proper state and federal approval.

4. Suicide Intervention-Healthcare Systems

- Funding opportunity solicitation number: 210-131
- Funding: \$400,000
 - One award is expected

5. Eligibility

- 501 (c)(3) non-profit organizations
- Private sector agencies
- Educational Institutions
- Hospitals and clinics
- Other health care providers

Applicants must serve rural or tribal North Dakota residents.

6. Purpose and Outcomes

Improve rural and/or Tribal health by partnering with and supporting rural and tribal healthcare facilities in implementing:

- Widespread use of evidence-based suicide risk screening, referral and
- Standardize follow-up protocols following a suicide attempt.
- Technical assistance includes:

Must support North Dakota's RHTP.

Expected Outcomes:

- Decrease youth and adult suicide consideration and attempts
- Decrease number of deaths by suicide

7. Requirements for Eligible Project

Provide outreach to and engage rural and tribal healthcare facilities throughout the state to implement evidence-based suicide interventions and strategies.

- Assist healthcare providers in developing and implementing an evidence-based plan to screen and assess all individuals for suicidal ideation, including those at risk for suicide.
- Assist healthcare providers in implementing evidence-based suicide care management guidelines and policies to include implementation of standardized follow-up protocols after a suicide attempt.
- Incorporate activities aligned with recommendations from the [North Dakota Suicide Fatality Review Commission](#) and the national [Zero Suicide](#) framework.
- Assist providers in establishing collaboration with community partners, as applicable, to supplement and not duplicate existing efforts.
- Connect efforts to already existing North Dakota behavioral health resources and programs, including but not limited to: [Parents Lead](#) and the [Behavioral Health Program Directory](#).
- Ensure strategies are recovery-orientated, trauma-informed and person-centered.
- Make any necessary project modifications as deemed necessary by ND HHS.

Preference will be given to applicants who can document existing collaborations with ND rural and tribal healthcare facilities.

8. Funding Opportunity Period

- Start: once the agreement has been fully executed, following all required approvals and signatures.
- End: September 30, 2027, and all funds must be fully expended by that date. (potential for renewing for additional years as approved by ND HHS)

Timeline:

- June 12, 2026, 5:00 pm CT: Applications due
- June 15-July 10, 2026:
- Review and scoring
- Communication with applicants for adjustments if needed
- Approval by CMS and ND HHS leadership
- September 2026: All Year 1 funds must be awarded
- September 2027: All Year 1 funds must be expended

9. Requirement to Receive Federal Funding

- Register with the Secretary of State to perform business in the state.
- If your organization has not been paid by a state entity before, you must register with vendor registry before you can be paid.
- ND HHS will require a W9 form to set up by your organization within our contract system. If your organization would like to be paid with electronic funds transfer, you need to submit the substitute IRS form W-9.
- Organizations need to register with SAMS.gov and receive a UEI number to receive these funds.

10. Unallowable Costs and Limits for Suicide Intervention-Healthcare Systems Grant Funding Opportunity

- RHTP funds under this funding opportunity may not be used to purchase a new or used vehicle to fulfill objectives of the funding opportunity.

11. Unallowable Costs and Limits

10% cap on admin costs across all funding

- Pre-award costs.
- Meeting matching requirements for any other federal funds or for local entities.
- Services, equipment or supports that are the legal responsibility of another party under federal, State or tribal law.
- Supplanting existing State, local, tribal, or private funding of infrastructure or services.
- New construction, building expansion, or purchasing of buildings.
- Renovations or alterations are allowed if they are clearly linked to program goals. Cannot include cosmetic upgrades or significant retrofitting of buildings.
- Renovation or alternations cannot exceed 20% of total funding in a budget period.
- Replacing payment(s) for clinical services that could be reimbursed by insurance.
- Direct health care services may be funded if not currently reimbursable, will fill a gap in care coverage, and/or may transform current care delivery model.
- Provider payments cannot exceed 15% of total funding in a budget period.

12. Unallowable Costs and Limits

10% cap on admin costs across all funding

- No more than 5% of total funding in a budget period can support funding the replacement of an electronic health record (EHR) system if a previous HITECH certified EMR is in place as of September 1, 2025.
- Funding toward initiatives similar to the “Rural Tech Catalyst Fund Initiative” cannot exceed the lesser of 10% of total funding or \$20 million of total funding awarded in a budget period.
- Financial assistance to households for installation and monthly broadband internet costs.
- Clinician salaries/wages for facilities that subject clinicians to non-compete clauses.
- Meals and food.

13. Application

- Background
- Narrative
 - Identified Need and Proposed Goals
 - Strategies, Activities, and Measurable Outcomes
- Action Plan
 - Timeline and Milestones
 - Metrics
 - Key Personnel
- Budget

14. Application – Background Information

- Organization name and background
 - Provide the organization name, location, additional facilities and the estimated population served.
- Project Lead and Contact Information
- Identify the project lead who will serve as the primary point of contact to receive communications about the application. Provide first and last name, title, phone number and email.
- Project Title and Reason
- State the project name and a brief description of why the organization is applying.

15. Application – Project Narrative

Identified need and proposed goals

- Identify the need for the proposed project
- Discuss the challenges the proposed project aims to address. Describe the specific need or issue impacting the organization or community. Use qualitative and quantitative data to substantiate this need.
- Provide a description of the proposed project, including outlining the overarching goal(s) of the proposed project, including the target population who will benefit
- The target population must include rural or tribal residents, but additional populations may be included. If the proposed project serves additional populations or is located in an urban area, describe how rural or tribal residents will be served.
- The goal(s) should describe the broad, high-level change(s) the applicant seeks to achieve. Goal(s) must be specific, measurable, achievable, relevant and time-bound (SMART).
- RHTP funds cannot be used to duplicate or replace existing funding (supplanting). Funds can be used to expand or enhance an existing project (see Budget section for details)
- Is this project already in progress, currently funded by another source or actively being implemented in the organization or community? If yes, identify current or similar projects and their funding sources.
- Explain how the proposed project will enhance, rather than duplicate, existing efforts, including how you plan to coordinate with partners to prevent duplication.
- If requesting funds for an expansion, describe why the expansion is needed and how the new funds will support additional efforts

16. Application – Project Narrative Continued

Strategies, Activities and Measurable Outcomes

- Describe the specific strategies, services, tasks or activities the project will implement in order to achieve the proposed goal(s).
- Strategies must be evidence-based and include the following:
 - Widespread screening and referral, and
 - Standardize follow-up protocols after a suicide attempt.
- Strategies must be aligned with the recommendations from the [North Dakota Suicide Fatality Review Commission](#) and the [national Zero Suicide](#) framework.
- If there are multiple strategies and activities, please number in order of priority.

- Each strategy, task or activity must include sufficient detail to ensure the scope is measurable and aligned with program goals.
- Identify outcome measure(s) for the proposed project. Outcome measure(s) should address some or all of those identified on page 7 of the NOFO.
- Using the identified strategies, explain how the outcomes will be sustained and address how effective practices will be integrated into ongoing operations.

17. Application – Project Narrative Continued

Strategies, Activities and Measurable Outcomes

How does your project align with elements of CMS's RHTP?

- Improving access
- Improving outcomes
- Technology use
- Partnerships
- Workforce
- Data-driven solutions
- Financial solvency strategies
- Cause identification

For the identified elements, briefly explain the connection to the project.

18. Application – Action Plan

Timeline and Milestones

- Provide the timeline to successfully implement the proposed project
- Identify key milestones and estimated completion dates for each strategy and activity

Metrics

- For each measurable outcome, identify specific metrics that will be used to measure progress. Identify how progress will be tracked and reported to meet requirements.
- As a reminder, templates will be provided for reporting requirements. Due dates and additional information will be provided in the agreement.

Key Personnel

- Identify key personnel, including a project lead. Describe the type of work each person will perform in carrying out the project. Include relevant credentials and experience managing funds and special projects.
- If the applicant plans to use external sources, such as consultants, please identify them, describe their experience and outline their role in the project. These external sources must also be identified in the budget.

19. Application – Budget

- Template for itemized budget
- Cover
- Budget
- Lease vs. Purchase
- Appropriate justification for each cost category
- Proposals will only be accepted for:

RHTP funds are governed by applicable provisions of 2 CFR Part 200 and 2 CFR Part 300, with guidance from the federal RHTP Notice of Funding Opportunity and CMS's Frequently Asked Questions document.

The limits and unallowable costs detailed in this section come from federal guidance and are non-negotiable.

20. Application Submission

Applications must be submitted through [Qualtrics](#)

- Can start, save and go back
- Submit early to avoid technical issues
- Don't forget to include required attachments

Approval of the grant application by the government body

- Itemized Subrecipient Budget Template (found on [funding opportunity webpage](#))

Reminder:

- Applications due by 5 p.m. CT on June 12, 2026
- Applications not received by the submission date and time will be considered non-responsive and not reviewed

21. Application Review

June 15-July 10, 2026

- Identify key personnel, including a project lead. Describe the type of work each person will perform in carrying out the project. Include relevant credentials and experience managing funds and special projects.
- If the applicant plans to use external sources, such as consultants, please identify them, describe their experience and outline their role in the project. These external sources must also be identified in the budget.

[Funding Opportunity Scoring Tool](#) (linked on page 11 of the NOFO)

22. Reporting

Quarterly and annual reports

- Reimbursement requests
- Impact stories
- Progress reports
- Metrics
- Use of funds

23. Resources and Reminders

Visit the Website - www.hhs.nd.gov/rural-health-transformation

- [Sign up](#) to receive email updates
- [Funding Guidance](#) resource

Submit questions to [FAQ Survey](#)

24. Rural Health Transformation Program

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