# Rural Health Transformation Program Technical Assistance for Childcare for the Rural Workforce, July 23, 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.

- Welcome and background
- Eligibility
- Purpose
- Application components
- Budget
- 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 (HHS).

## 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 (HHS) submitted an application to the Centers for Medicare and Medicaid Services (CMS)
- North Dakota 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. Childcare for the Rural Health Workforce

- Funding opportunity solicitation number: 210-223
- Total Funding: $3,000,000
- Approximately 38 awards of $78,000

## 5. Eligibility

### Eligible:

This funding opportunity is for:

- Critical access hospitals
- Rural emergency hospitals
- General acute hospitals
- Non-federally operated Indian Health Service hospitals and tribally run 638 heath facilities meeting the stated hospital definition

### Disqualifying Factors:

This funding opportunity excludes:

- Clinics
- Health centers
- Behavioral health or psychiatric hospitals

As per CMS requirements, federally operated Indian Health Service hospitals from applying.

For RHTP opportunities, the entities in and the cities of Grand Forks, Fargo, West Fargo and Bismarck are considered urban and do not qualify for this funding opportunity.

### Priority considerations:

Priority will be the healthcare workforce working in critical access hospitals, rural emergency hospitals, general acute hospitals, non-federally operated Indian Health Service hospitals and tribally run 638 Health Facilities meeting the stated hospital definition.

### Target Populations

The target population must include healthcare staff working in a rural location. Additionally, staff of the childcare and external healthcare partners may also be included. The organization may choose to include contracted individuals, locum tenens staff, students and interns of the healthcare facility.

## 6. What is Rural?

For Rural Health Transformation Program (RHTP) funding opportunities, entities within the cities of Grand Forks, Fargo, West Fargo and Bismarck are considered urban and are not eligible unless at least 50% of the population served by the proposed project is rural North Dakota residents or the funding will primarily benefit rural North Dakota residents. RHTP funding must be used to support rural North Dakota citizens.

## 7. Eligible Proposals

Proposed projects eligible for this funding opportunity are planning grants for embedding childcare into rural health facilities

## 8. Purpose and Outcomes

### Purpose

- Support the planning and development of sustainable childcare solutions that enhance recruitment and retention of North Dakota's rural health workforce
- Transform rural health, which may include rural tribal health, must support North Dakota's RHTP

### Expected Outcomes

- Identify sites for developing/expanding on-site childcare
- Increase the rural provider retention rate at three and five years
- Recruit new rural providers
- Reduce Health Professional Shortage Area (HPSA) counties

## 9. Timeline

### Operating Period:

- Begin: 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.

### Key Dates

- Applications Due August 11, 2026, at 5 p.m. CT
- Review and scoring; August 11, 2026 – September 12, 2026,
- Communication with applicants for adjustments if needed
- Approvals by CMS and HHS leadership
- Agreement development
- September 30, 2026: All Year 1 funds must be awarded
- September 30, 2027: All Year 1 funds must be expended

## 10. Requirements 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.

## 11. Application

- Background
- Narrative
- Identified need
- Proposed project

- Timeline
- Budget

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## 12. Application - Background (page #8)

- Organization name and background
- State your project title
- Describe the overarching goal and high-level change the organization aims to make
- Key Personnel – Project lead, person responsible for managing grant funds, agreement signer, external sources – letters of support

## 13. Application – Narrative (page #9)

### Identify Need

- Identify the need for the proposed project. When available, include relevant local data to demonstrate the scope and urgency of the need.
- Discuss the challenges the proposed project aims to address.
- Identify and describe the target population for the project.
    - If the project includes additional populations outside of the required target groups, or if it is located in an urban area, clearly describe how the required target population will be prioritized and served.
- The target population must include healthcare staff working in a rural location. Additionally, staff of the childcare and external healthcare partners may also be included. The organization may choose to include contracted individuals, locum tenens staff, students and interns of the healthcare facility.
- Is the proposed project currently in progress, supported by other funding sources, or already being implemented within the organization or community?
- Please describe the organization's current related work.
- Explain why new efforts, expansion or enhancement are needed for this project. Describe how the proposed project represents a new, expanded or improved initiative rather than a duplication of existing work. Include how your organization will coordinate with partners to ensure efforts are aligned and duplication is avoided.

# 14. Application – Narrative (page #10)

## Proposed Project

- The applicant must provide detailed information about the proposed project, including the outcomes, strategy, service and tasks. Each outcome, strategy, service and task must include sufficient detail to ensure the scope is aligned with the eligible projects and requirements identified in this guidance. When applicable, strategies, services and tasks should be evidence based, evidence informed or a promising practice.
- For the purposes of this guidance, use the following definitions:
    - Outcomes: Outcomes should describe what will be different because of the project. Outcomes should be specific, measurable, achievable, realistic and time-bound (SMART) and directly linked to the strategies, services and tasks described.
    - Strategy: Strategies explain how the applicant intends to create the desired change. They are the high-level approaches or methods the project will use to achieve the outcomes.
    - Services: Services describe what is being offered or provided to accomplish the strategy and outcomes. They are the direct supports or interventions delivered to the target population.
    - Tasks: Tasks are the specific activities and actions to carry out the strategies and deliver on an outcome. Tasks break down strategies into action steps.

# 15. Application – Narrative (page #10)

## Proposed Project

The applicant must provide detailed information about the proposed project, including the outcomes, strategy, service and tasks. Each outcome, strategy, service and task must include sufficient detail to ensure the scope is aligned with the eligible projects and requirements identified in this guidance. When applicable, the strategy, services and tasks should be evidence-based, evidence-informed or a promising practice.

Only one strategy may be submitted per organizational application and should focus on using a data-informed planning process to design a sustainable childcare model for the rural health workforce.

- The strategy indicated here should correspond with the number of “budget” tabs on your completed “Itemized Subrecipient Budget Template”

- This will automatically populate fields for the indicated number of strategies.
- The following questions should be responded to one strategy at a time.

# 16. Application – Narrative (page #11)

## Proposed Project

- Describe, in outcome focused terms, the strategy the project will implement to address identified needs. Identify the specific services and tasks that will be implemented to carry out the stated strategy.
- For the identified strategy, identify the top three to five metrics that will be used to measure progress on the project. Identify how progress on the metric will be tracked and reported to meet requirements.
- Explain how the identified strategy will be sustained and address how effective practices will be integrated into ongoing operations.
- Does the identified strategy include purchasing equipment or technology? If yes, outline the plan for maintenance and continued use after funding ends. Funding for equipment and technology maintenance costs during the five-year RHTP period may be considered.
- Does the identified strategy include an individual financial incentive and a five-year service commitment? If yes provide a description of the policies and monitoring procedures the organization has established, or plans to establish, to meet the service commitment requirements.

# 17. Application – Narrative (page #11)

## Proposed Project

- As it relates to the identified strategy, identify which elements apply to the proposed project.
- The identified elements should be clearly indicated in the outcome, strategy, service or task described in the proposed project description.

### Key Elements

- Improving access
- Improving outcomes
- Technology use
- Partnerships
- Workforce

- Data-driven solutions
- Financial solvency strategies
- Cause identification

## 18. Application – Narrative (page # 9)

### Proposed Project

- North Dakota's RHTP application identified an evaluation plan and metrics, detailed in the Funding Opportunity section of this guidance and applicants are encouraged to present strategies to support the identified metrics.
- As it relates to the identified strategy, indicate which ND RHTP outcomes the applicant anticipates impacting.

### Outcomes

- Identify sites for developing/expanding on-site childcare.
- Increase the rural provider retention rate at three and five years
- Recruit new rural providers
- Reduce Health Professional Shortage Area (HPSA) counties

## 19. Application – Narrative (page # 12)

### Proposed Project

- Being as concise as possible, complete a comprehensive timeline for the identified strategy.
    - The timeline must identify key milestones and dates to detail how the applicant will carry out the proposed outcomes, strategy, services and tasks.
    - Please include an estimated completion date for the strategy.
- As a reminder, the operating period will start upon execution of the agreement, with all required approvals and signatures. The operating period will end on September 30, 2027, and all funds must be expended by this date.

## 20. Application – Budget

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.

## 21. Application – Budget (page # 13)

- The budget should provide a high-level overview of your project as this is what ND HHS submits to CMS for approval of the use of funds.
- Must use the itemized subrecipient budget template.
    - Cover – Overview of the narrative
- Budget – Create a copied "budget" tab for each priority. The first priority must be within a reasonable amount of the estimated award amount.
    - Lease vs Purchase – Complete for all equipment purchases
- Submit the completed template in Excel format

## 22. Application – Budget (page # 13)

- Budget Period indicates this is year one RHTP funding. This will be different than the period of performance/operating period.
- Priority Area: Childcare site planning.
- The budget must include appropriate justification for each cost category. This should connect the cost to the scope of work and purpose of the funding opportunity.
- Applicants are encouraged to submit vendor sales quote(s) for the proposed equipment to support cost accuracy; however, quote(s) are not required for the application to be considered complete.

## 23. Unallowable Costs and Limits

- Detail allowable or unallowable/limited costs for this funding opportunity

## 24. 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 of services.

- New construction, building expansion or the purchase of buildings.
    - Renovations or alterations are allowed if they are clearly linked to program goals, cannot include cosmetic upgrades or significant retrofitting of buildings.
    - Renovations 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.

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## 25. 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.

# 26. Application Submission

## Applications must be submitted through Qualtrics

- Your progress is automatically saved every time you click the Next button at the bottom of the page.
- If you need to stop, simply close your browser. You can resume within one week.
- To resume, click the original survey link again from the same device and browser.
- This feature will not work if you are using a private or incognito browser window.
- Submit early to avoid technical issues.

### Reminders

- Applications due by August 11, 2026, at 5 p.m. CT
- Applications not received by the submission date and time will be considered non-responsive and not reviewed
- Required attachments
- Budget template
    - Optional letters of support and vendor sales quotes

# 27. Application Review

## Dates: August 12 – September 12, 2026

- Review and scoring by a committee
- Communication with applicants for adjustments, if needed
- Approvals by CMS and HHS leadership
- Agreement development

**Scoring Criteria on Funding Opportunity Webpage**

# 28. Reporting

## Quarterly and annual reports

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

# 29. Questions

- Review of questions received
- Submit via chat
- Funding opportunity FAQ and resources will be added to website
- We may not be able to answer all questions today

# 30. Submitted Questions

Questions and application support requests may be directed to the Regional Development Councils (RDCs).

# 31. Resources and Reminders

- Visit the Rural Health Transformation Program webpage
    - Sign up to receive email updates
    - Funding Guidance
- Submit questions: FAQ Survey
- Connect With Regional Support | Health and Human Services North Dakota

# 32. Rural Health Transformation Program

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