



North Dakota Department of Health and Human Services | Rural Health Transformation Program

Competitive Funding Opportunity Application Guidance

Funding Opportunity Name: Mobile Mammography Unit Acquisition

Funding Opportunity Solicitation Number: 210-333

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Funding Overview:

1) Background

As part of Public Law 119-21, Congress established the \$50 billion [Rural Health Transformation Program \(RHTP\)](#) to help rural communities reimagine their health care delivery systems and improve health outcomes. This program administered by the Centers for Medicare and Medicaid Services (CMS), aims to address longstanding health-care challenges facing rural and tribal communities.

North Dakota is taking bold, practical steps to restore health, stability and prosperity to America's heartland. The North Dakota Department of Health and Human Services (HHS) developed its RHTP to focus on creating new access points, modernizing care delivery and empowering local providers to meet the needs of their communities through sustainable investments. North Dakota's plan, as indicated in the [RHTP application and supporting documents](#), includes four initiatives:

- Initiative 1: Make North Dakota Healthy Again
- Initiative 2: Strengthen and Stabilize Rural Health Workforce
- Initiative 3: Bring High-Quality Health Care Closer to Home
- Initiative 4: Connect Tech, Data and Providers for a Stronger North Dakota

Following approval from CMS, HHS is launching multiple funding opportunities as part of North Dakota's five-year RHTP effort. These opportunities are designed to support practical, locally driven solutions that help rural and tribal communities stay healthy and strong. Funding opportunities will be released in phases, with individual applications announced over time. Eligible applicants may apply for more than one funding opportunity; there is no limit to the number of applications that can be submitted.

2) Funding Opportunity

Breast cancer remains one of the most common cancers among women in the United States and North Dakota, affecting 1 in 8 women over their lifetime. Although early detection can increase 5-year survival rates to greater than 99%, persistent disparities in access to timely screening continue to place many communities at elevated risk for late-stage diagnosis and poorer outcomes.

The Mobile Mammography Unit Acquisition funding opportunity is intended to strengthen healthcare delivery infrastructure by expanding access to high-quality, evidence-based breast cancer screening services in western North Dakota. Mobile mammography units play a critical role in reducing structural barriers to care by delivering screening services directly to communities, thereby minimizing the need for patients to travel to fixed-site facilities. This approach has been shown to improve

screening uptake, particularly among populations that face logistical, geographic and socioeconomic challenges.

Through this initiative, the successful applicant will acquire and support the deployment of a mobile unit in western North Dakota equipped with digital breast tomosynthesis (3D mammography), enabling advanced imaging capabilities that enhance early detection. The funding opportunity prioritizes rural, frontier and medically underserved populations in western North Dakota, where gaps in access to diagnostic imaging are most pronounced. By addressing barriers such as transportation limitations, geographic isolation and limited availability of local imaging services closer to home, this project aims to increase screening rates, facilitate earlier diagnosis, and ultimately reduce disparities in breast cancer morbidity and mortality.

This funding opportunity aligns with Initiative 3: Bring High-Quality Health Care Closer to Home of North Dakota's RHTP. Refer to the Project Narrative and Action Plan under Application Requirements for additional details on acquisition of a mobile mammography unit and to the Budget section for information on allowable and unallowable costs.

Additionally, this funding opportunity aims to support improvement in the metrics identified for Initiative 3: Bring High-Quality Health Care Closer to Home, found on pages 55–56 of the [project narrative](#) and page 19 of the project [appendices](#). Please note, not all metrics listed on these pages apply to the Mobile Mammography Unit Acquisition funding opportunity. The associated metrics for this initiative are further defined in Section B of the Action Plan.

3) Eligibility

Applicants must serve western rural North Dakota residents and Medicaid members; this may also include rural tribal residents. For this funding opportunity, 50% of the service area of the mobile mammography unit must include locations between the western border of North Dakota to 75 miles east of Highway 83. Eligible applicants are:

- Integrated healthcare systems that include a hospital, outpatient clinics, and a variety of support services
- Rural clinic or hospital system expanding screening access across multiple counties
- Federally Qualified Health Centers (FQHCs)
- Tribes, tribal health organizations, or a tribal health authority addressing screening gaps on reservation lands

For RHTP funding opportunities, the entities within and the cities of Grand Forks, Fargo, West Fargo and Bismarck are considered urban and do not qualify for RHTP funding opportunities unless the population served by the grant applicant is at least 50% ND

rural citizens or the focus of the grant funding will be used for ND rural citizens. RHTP funding must be used to support ND rural citizens.

For the Mobile Mammography Unit Acquisition funding opportunity, priority consideration will be given to applicants that exhibit:

- Provision of breast cancer screening or mobile health services that serve western rural, low-income and medically underserved populations
- Experience in offering preventive screening programs
- Established partnerships for follow-up care (diagnostics, treatment referrals)
- Ability to provide data reporting and metrics and outcomes tracking
- Financial and operational capacity to sustain utilization of the acquired mobile mammography unit

4) Funding

This is a competitive funding opportunity application process for year one RHTP funding; an additional application process for the Initiative 3: Bring High-Quality Health Care Closer to Home funding opportunity is expected to be offered in future years of the RHTP. 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.

Approximately \$1,500,000 in total federal funds is available in year one for the Mobile Mammography Unit Acquisition funding opportunity. The awards provided will be dependent on the applications received; it is estimated one award for approximately \$1,500,000 is expected to be funded in year one. Applicants may request funding at any level necessary to support their proposed project. All goods purchased under this award **must be fully delivered no later than Sept. 30, 2027.**

HHS reserves the right to negotiate the applicant's budget based on the number of applications received, the content of the proposed project work plan and total budget of the Mobile Mammography Unit Acquisition funding opportunity prior to issuing the award.

Refer to the [Budget section](#) for details on allowable and unallowable costs.

Additional funding opportunities will be available for other RHTP activities and initiatives. Eligible applicants may apply for more than one funding opportunity. There is no limit to the number of applications that can be submitted across the program; however, only one application per organization per funding opportunity should be submitted.

5) Reporting Requirements

The successful applicant(s) will be required to submit reimbursement requests or supporting information, progress reports and impact stories to HHS. Templates will be provided for reporting requirements. Due dates and additional information will be provided in the agreement.

Successful applicants may be required to report for up to five years or as otherwise required by CMS.

Additional reporting requirements may be required based upon updated federal guidance.

6) Application Submission

Applications for this funding opportunity are due by June 30, 2026 at 5:00 PM CT. Applications must be submitted to HHS through [Qualtrics](#).

The application questions, along with full details, are provided in the Application Requirements section of this document. This section is meant to serve as a companion resource while completing the Qualtrics survey. Applicants are welcome to copy the questions into any format to draft their responses. However, final answers and a completed budget must be submitted through the Qualtrics survey.

Applications not received by the submission date and time will be considered non-responsive and not reviewed.

7) Technical Assistance

A technical assistance conference call has been scheduled for the following date and time:

- June 11, 2026, 1:00 pm – 1:45 pm CT
- [Link for registration](#)

The link to register for the technical assistance call will be posted on the RHTP webpage under Funding Opportunities – Bring High-Quality Health Care Closer to Home.

The technical assistance call will be recorded and posted on the RHTP webpage for later viewing. Additional resources related to this funding announcement, including Frequently Asked Questions (FAQ), will also be published on the RHTP webpage after the call.

We strongly encourage you to submit questions for this funding opportunity to [RHTP FAQ Survey](#) prior to 7 days of the submission deadline. As time allows, questions submitted prior to the technical assistance call will be addressed during the session and added to a FAQ resource. Questions submitted following the call will be answered and added to the published FAQ resource on the webpage. Questions submitted within 7 days of the submission deadline may not be addressed due to the volume of questions and staff members working on other RHTP funding opportunities.

Questions may also be directed to regional councils entities assisting with RHTP.

Application Requirements

Interested entities are required to submit an application to be considered for the Mobile Mammography Unit Acquisition funding opportunity. Do not include any proprietary or confidential information in application materials as the application will become an open record.

Below is the outline and related details for the application. HHS will provide a budget template. All application components will be submitted through [Qualtrics](#).

- 1.) Background Information
- 2.) Project Narrative
 - a. Identified Need and Proposed Goals
 - b. Strategies, Activities and Measurable Outcomes
- 3.) Action Plan
 - a. Timeline and Milestones
 - b. Metrics
 - c. Key Personnel
- 4.) Budget
- 5.) Sustainability Plan

1) Background Information

Provide the following background information:

- Organization Name and Background – Provide the organization name, location, additional facilities, estimated population served, and the service area.
- 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.

2) Project Narrative

The project narrative must address the identified need and planned strategies and activities, being as specific and concise as possible. Keep the narrative clear and focused on how it will make a difference for rural health, which may also include rural tribal health.

a. Identified Need and Proposed Goals

a.1. Identify the need for the proposed project.

- Discuss the challenges the proposed project aims to address. Describe the specific issues impacting the organization or community.
- When available, include relevant local data to demonstrate the scope and urgency of the need.

a.2. Outline the overarching goal(s) of the proposed project, including the target population who will benefit.

- The goal(s) should describe the broad, high-level change(s) the organization seeks to achieve.
- The target population must include western rural or tribal residents and Medicaid members, 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 and Medicaid members will be served.
- Reminder For RHTP funding opportunities, the entities within and the cities of Grand Forks, Fargo, West Fargo, and Bismarck are considered urban and do not qualify for RHTP funding opportunities unless the population served by the grant applicant is at least 50% ND rural citizens or the focus of the grant funding will be used for ND rural citizens. RHTP funding must be used to support ND rural citizens.
- 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).

a.3. 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 why expansion or enhancement is needed. Describe how the proposed project will enhance rather than duplicate existing efforts, including how the organization plans to coordinate with partners to prevent duplication.

b. Strategies, Activities and Measurable Outcomes

b.1. Describe, in outcome-focused terms, the specific strategies, services, tasks, or activities the project will implement to complete acquisition of a mobile mammography unit. Outcomes should be specific, realistic, measurable and directly linked to the strategies, services, tasks or activities described. When applicable, strategies and activities should be evidence-based, evidence-informed, or a promising-practice. They should also reflect how the project will support the goals.

Applicants must propose strategies, activities and measurable outcomes that align with the RHTP evaluation plan and metrics. The Initiative 3: Bring High Quality Health Care Closer to Home evaluation plan and metrics are identified in the funding opportunity section of this guidance. Projects should support some or all of the identified metrics.

b.2. The strategies, activities and measurable outcomes should address one or more elements identified by [CMS's Notice of Funding Opportunity](#). Identify which elements apply to the proposed project and briefly explain the connection to the project.

- Improving Access
- Improving Outcomes
- Technology Use
- Partnerships
- Workforce
- Data-driven Solutions
- Financial Solvency Strategies
- Cause Identification

3) Action Plan

Complete a comprehensive Action Plan detailing how the applicant will carry out the proposed strategies, activities and measurable outcomes. 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. Please identify the corresponding priority numbers from the project narrative in the action plan, as applicable. Being as concise as possible, the action plan must include:

a. Timeline and Milestones:

- Provide a timeline the applicant will follow to successfully implement the proposed project.
- The timeline should identify key milestones and include estimated completion dates for each key strategy or activity.

- Applicant should address the following as it relates to capital acquisition of a mobile mammography unit:
- Project Initiation and Procurement Planning
- Mobile Coach/Vehicle Acquisition and Customization
- Acquisition of 3D Mammography Equipment
- PACS (Picture Archiving and Communication System) / RIS (Radiology Information System) Integration and IT Infrastructure
- Regulatory Compliance and Licensing
- Equipment Installation and Testing
- Staff Recruitment and Training
- Community Outreach and Scheduling Launch
- Pilot Operations and Quality Assurance
- Full Program Implementation

b. Metrics:

Applicants requesting funding for the purchase of a mobile mammography unit must demonstrate the anticipated impact, utilization, and long-term sustainability of the proposed investment. Although this funding opportunity supports **capital acquisition only (see budget section for allowable expenses for acquisition of a mobile mammography unit)**, applicants are required to provide projected performance metrics and a plan for ongoing performance tracking, monitoring, and evaluation.

For each measurable outcome, applicants must identify specific metrics that clearly demonstrate community need, service utilization, health impacts, and patient health outcomes – not solely the acquisition of the equipment itself.

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.

c. 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.
- Reminder: This funding opportunity supports capital acquisition only (see budget section for allowable expenses for acquisition of a mobile mammography unit).

4) Budget

Using the ND HHS provided “Itemized Subrecipient Budget Template”, develop and submit an itemized budget with appropriate justification for each cost category. The template can be found in the required documents section of the [funding opportunity webpage](#).

- Please upload a completed budget in Excel format, using the “Itemized Subrecipient Budget Template.”
- Each budget item must include detailed justification. Justifications must be clear and should include information on how the applicant determined the cost. For example, identify what information was used to determine salary or fringe benefit rates.
- All goods purchased under this award must be fully delivered no later than Sept. 30, 2027.

Allowable expenses for acquisition of a mobile mammography unit include:

- **Specialized Vehicle:** Custom-built vehicle with lead-lined walls, generator, HVAC, patient areas transforming the vehicle into a clinical space including ADA-accessible design.
- **Medical Imaging Unit:** Core component for imaging – 3D digital mammography system known as tomosynthesis is considered the current standard of care.
- **Essential Software:** Radiology Information System (RIS) and Picture Archiving and Communication System (PACS).
- **Initial Licensing and Certification:** Mammography Quality Standards Act (MQSA) certification, state-specific facility and technologist licenses.
- **Insurance and Legal Fees:** Business formation, medical malpractice, auto, and general liability insurance.
- **Initial Staffing and Training:** Salaries for first 1-2 months for specialized equipment training.*
- **Initial Marketing and Community Outreach:** Website, communications collateral (ads, informational flyers), community engagement, digital advertising.

*Please note: Per federal grant guidance, individual financial incentives are tied to a minimum five-year service commitment. Individual financial incentives includes funding for training and development that leads to a certification, license, or degree for an individual. As part of the application review, HHS will determine whether any successful applicant-proposed strategies are subject to the federal five-year service commitment requirement and will notify the successful applicant accordingly.

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](#) documents. The limits and unallowable costs detailed in this section come from federal guidance and as such are non-negotiable.

RHTP funding is designed to support expansion and scale to better serve rural communities, not to replace or duplicate existing funding sources. When using funds to expand an existing pilot program or initiative or to develop a new training program with existing partners, the funds may only be applied to the costs associated with the new population, new activities, new program milestones, etc.

Capital Expenditures and Remodeling

Capital expenditures are expenditures to acquire capital assets or expenditures to make additions, improvements, modifications, replacements, rearrangements, reinstallations, renovations, or alterations to capital assets that materially increase their value or useful life. Capital expenditures are limited by the federal guidance identified above.

Unallowable capital expenditures include:

- New construction
- Building expansion
- Purchasing of buildings
- Supplanting funding for in-process or planned construction projects
- Significant retrofitting of buildings
- Cosmetic updates
- Any other cost that materially (significantly or substantially) increases the value of the capital

Allowable capital expenditures include investing in existing rural health care facility buildings and infrastructure, such as minor building alterations or renovations and equipment upgrades. Minor renovations or alterations must be clearly linked to RHTP and funding opportunity outcomes. Minor renovations or alterations cannot exceed 20% of total funding in a budget period.*

Davis-Bacon and Related Acts Compliance

This project may be subject to the [Davis-Bacon and Related Acts](#) (40 U.S.C. § 3141 et seq.). If applicable, the applicant must comply fully with all federal and state prevailing wage requirements. This includes incorporation of the federal contract clause at [FAR 52.222-6](#), Davis-Bacon Act, into all capital improvement expenditures contracts and subcontracts in excess of \$2,000, as required by [48 CFR § 22.403-1](#).

The applicant must ensure that all laborers and mechanics employed by contractors or subcontractors on covered work are paid wages at rates not less than those determined by the U.S. Department of Labor for the corresponding classes of laborers and mechanics. The [Wage Determination page](#) from the General Services Administration

can be used to support this. If awarded, the applicant will require submission and retention of certified payroll records and will ensure compliance with all applicable reporting, recordkeeping and enforcement requirements. [Online tools for simplifying Davis-Bacon certified payroll reporting](#) are offered from the U.S. Department of Labor's Wage and Hour Division.

Vehicle Purchases

RHTP funds can be used to purchase a new or used vehicle to fulfill objectives of the funding opportunity. Vehicle purchase requests will be reviewed on a case-by-case basis by CMS and approval is not guaranteed. The order must be placed by September 30, 2026. Delivery must occur by September 30, 2027.

Additional Unallowable and Limited Costs

- Modified total direct administrative/indirect costs are not allowable for this funding opportunity.
- 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, tribal, or civil rights law.
- Supplanting existing state, local, tribal, or private funding of infrastructure or services (ex. staff salaries).
- The cost of independent research and development.
- Funds related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or executive order.
- Financial assistance to households for installation and monthly broadband internet costs.
 - Meals, unless in limited circumstances such as:
 - Subjects and patients under study.
 - Where specifically approved as part of the project or program activity, such as in programs providing children's services.
- As part of a per diem or subsistence allowance provided in conjunction with allowable travel in accordance with the U.S. General Services Administration (GSA) established rates.
- 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.*
- No more than 5% of total funding in a budget period can support funding the replacement of an Electronic Medical Record (EMR) system if a previous Health Information Technology for Economic and Clinical Health (HITECH) Act certified EMR is in place as of September 1, 2025.* Upgrades, enhancements, added

modules, interfaces, or functionality to existing EMR systems are allowable and not subject to the 5% limitation.

- Funding toward projects 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.*
- Clinician salaries/wages for facilities that subject clinicians to non-compete clauses.
- Demolition of aged buildings.

*Limits apply to HHS’s spending of RHTP funds. Individual agreements may be considered for costs exceeding the budget limitations.

5) Sustainability

Operating a mobile mammography unit requires substantial ongoing maintenance and operational support to ensure patient safety, diagnostic accuracy, and compliance with regulatory standards. Although this funding opportunity is limited to the acquisition of a mobile mammography unit, applicants must demonstrate how they will maintain long-term financial stability, operational effectiveness, and alignment with their mission while continuing to expand access to breast cancer screening for underserved women.

The sustainability plan should address the following components:

- Financial Sustainability;
- Operational Sustainability, including preventive maintenance, equipment management, unexpected repairs, and staffing;
- Community Partnerships;
- Patient Access and Continuity of Care through a patient navigation system and referral network;
- Data Collection and Program Evaluation; and
- Maintenance of a Consistent Communications Strategy focused on breast cancer awareness and early detection education.

6) Application Review and Selection

Applications will be reviewed and scored solely on what is presented within the application materials. The committee will score applications based on criteria in the Mobile Mammography Unit Acquisition Scoring Tool found on the [funding opportunity webpage](#).

HHS aims to notify applicants about their award in a timely manner. HHS reserves the right to support applicants with changes to their project proposals to ensure HHS’s RHTP commitments are upheld; additionally, HHS may require applicants to supplement

responses. HHS is in a cooperative agreement with CMS for RHTP and is subject to substantial CMS project involvement. This may delay funding timelines.

The awarded applicant(s) will be sent an agreement to sign and return to HHS. The awarded applicant(s) shall comply with the agreement provisions set out in the sample documents. Due to the limited timeframe associated with the funding source for this funding opportunity, HHS will not entertain any changes to the agreement Terms and Conditions.

Additional Information

Information may change based on updated federal guidance or upon further consideration by HHS.

Learn More: [Rural Health Transformation | Health and Human Services North Dakota](#)

If you have feedback on the application process, please complete the [Funding Opportunity Feedback Survey](#).

This RHTP funding opportunity is supported by CMS of the U.S. Department of Health and Human Services as part of a financial assistance award totaling \$198,936,969.55 with 100 percent funded by CMS/U.S. Department of Health and Human Services. The contents are those of HHS and do not necessarily represent the official views of, nor an endorsement, by CMS/U.S. Department of Health and Human Services, or the U.S. Government.