Virginia Foundation for Healthy Youth

REQUEST FOR BEST VALUE APPLICATIONS (RFA) #852P028

RFA INSTRUCTIONS

Title: Rural Health Innovation Grants

Issuing Agency: Virginia Foundation for Healthy Youth (VFHY)

VFHY is excited to launch its first-ever Rural Health Innovation Grants, supporting organizations that use technology-enabled approaches to improve the health and wellness of young people in 76 rural localities across Virginia.

This Request for Applications (RFA) is a solicitation for services related to the Live Well Together, Consumer Tech for Education and Lifestyle Change sub-initiative under Virginia's Rural Health Transformation Program, which seeks to expand access to technology-enabled approaches that improve health and wellness among youth and families in rural Virginia. Projects may address a wide range of youth health needs, including nutrition, physical activity, health education, tobacco and nicotine use prevention and cessation, substance use prevention, chronic disease prevention and management, and other factors that support healthy lifestyles. All proposed projects must demonstrate a connection, directly or indirectly, to at least one of VFHY's mission areas: preventing and reducing youth tobacco and nicotine use, substance use, or childhood obesity.

Applicants do not need to be technology companies. Technology should be used as part of a broader approach to improve youth health, and project success should be measured by health impact, not simply by the adoption, use, or expansion of a technology product. Projects must be designed to produce measurable improvements in at least one of the following:

- Health behaviors
- Health literacy
- Ability to navigate and connect with health and wellness resources and services

Projects may also involve parents, caregivers, or other adults when their participation directly supports the health and wellness of participating youth under the age of 18; however, youth must remain the primary population served. Priority will be given to approaches that reach youth who face greater barriers to good health, including young people living in low-income communities.

Grants will be awarded through a competitive process. Individual grants will range from $300,000 to $1,500,000 and will cover the period from the contract start date through August 31, 2027. Grants may be renewed, at VFHY's sole discretion, for up to four additional funding periods.

TABLE OF CONTENTS

PROGRAM BACKGROUND AND CONTEXT 2
PART I: PROGRAM BACKGROUND AND CONTEXT 4
PART II: REQUIRED SCOPE OF WORK 7
PART III: REQUIRED PERFORMANCE METRICS, MILESTONES, AND COMPLIANCE 13
PART IV: APPLICATION REQUIREMENTS AND INSTRUCTIONS 16
PART V: REVIEW CRITERIA AND SCORING 25
PART VI: AWARD TERMS, REPORTING, AND COMPLIANCE REQUIREMENTS 26

PROGRAM BACKGROUND AND CONTEXT

Rural Health Innovation Grants are part of Virginia's Rural Health Transformation Program initiative, Live Well Together, and the Consumer Tech for Education and Lifestyle Change sub-initiative.

Issuing Agency/Organization:	Virginia Foundation for Healthy Youth
Program Name:	Rural Health Transformation Program (RHTP): Consumer Tech for Education and Lifestyle Change (Also known as Rural Health Innovation Grants).
CFDA / Assistance Listing:	93.798 - Rural Health Transformation Program
Federal Award Identification Number (FAIN):	RHTCMS332088
Federal Award Date:	December 29, 2025
Awarding Agency:	U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS), Office of Acquisitions and Grants Management
Statutory Authority:	Section 71401 of Public Law 119-21
Primary Recipient:	Virginia Department of Medical Assistance Services ([DMAS]); 600 E Broad St, Suite 1300, Richmond, VA 23219-1856
Federal Funds Expiration Date:	October 30, 2030

RFA Reference Number:	RFA-RHTP-852P028
Initiative:	Live Well Together
Sub-initiative:	Consumer Tech for Education and Lifestyle Change (AKA Rural Health Innovation Grants)
RFA Issue Date:	11/10/2026
Application Deadline:	12/17/2026 5:00 PM ET
Decision Timeline:	The initial round of awards will be announced by January 25, 2027. Some awards may be announced later.
Submission Method:	Applications must be submitted via VFHY's online Grants Portal only. No hard copy applications will be accepted. Online applications are due and must be uploaded by 5:00 pm ET on December 17, 2026. To be considered, applications must be submitted on or before the date and hour stipulated. Applications uploaded after the date and hour designated are automatically disqualified and will not be considered. Applicants are encouraged to submit online applications prior to the deadline to avoid any delays due to busy servers or other internet failures. No late applications will be accepted, under any circumstances, regardless of the reason(s). Once an application is submitted, no other edits can be made, and no other support documentation can be accepted during the application window. VFHY is not responsible if the application is not submitted by the appointed time. The official time used in the receipt of responses is the electronic time stamp recorded by the server's clock.
File Format and Naming Convention Requirements:	The Budget Form must be submitted in Microsoft Excel format. The Evaluation Plan must be submitted in Microsoft Word format. Unless otherwise specified, all other attachments must be combined and submitted as a single PDF in the applicable upload field. File names should follow this format: Organization Name_Document Name. Do not use special characters in file names. Only one file may be uploaded in each field.

Estimated Award Range:	VFHY anticipates awarding up to $8,574,012.5 for this RFA. Organizations may be awarded between $300,000 to $1.5 million for the initial grant period.
Subaward Period of Performance:	Contract Start Date through August 31, 2027
Geographic Scope:	The people served must reside in one or more of the 76 Virginia localities detailed in this document. (See Section 2.4 Geographic Scope)
Q&A:	Questions requiring interpretation or clarification of the RFA must be submitted through the FAQ Submission Form in writing during the Q&A period, which ends on December 7 (5:00 pm). Answers will be published on the Rural Health Innovation Grant page on the VFHY website each Friday through December 11, 2026. The deadline for submitting interpretive questions is December 7 (5:00 pm).
VFHY Contacts:	Applicants may contact VFHY staff directly for technical assistance with the Online Grant Portal, the Evaluation Plan, and the Budget Form. To do so, please email ruralhealth@vfhy.org. Questions requiring interpretation or clarification of the RFA must be submitted through the FAQ Submission Form.

PART I: PROGRAM BACKGROUND AND CONTEXT

1.1 Rural Health Innovation Grants Program Context

Virginia is home to more than 1.5 million rural residents spanning the Southwest, Southside, Roanoke/Alleghany, Northern Piedmont, Shenandoah, and Eastern Shore & Northern Neck regions. Youth in rural communities face persistent access barriers, high chronic disease burden including childhood obesity, healthcare workforce shortages, behavioral health gaps, and financially fragile rural hospitals and clinics.

The Rural Health Transformation Program (RHTP) was established under Section 71401 of Public Law 119-21 and is administered by the Centers for Medicare & Medicaid Services (CMS). The RHTP provides funding over five budget periods to States for investments that structurally transform healthcare delivery in rural communities. CMS awarded the Commonwealth of Virginia a Cooperative Agreement designating the Virginia Department of Medical Assistance Services (”DMAS”) as the primary recipient. DMAS administers RHTP funds and issues grantee awards to qualified organizations to implement approved program initiatives. The Virginia Foundation for Healthy Youth (VFHY) is a

subrecipient of DMAS and will be carrying out the Consumer Tech for Education and Lifestyle Change (AKA Rural Health Innovation Grants).

VFHY, a political subdivision of the Commonwealth, awards funding through grants to local organizations to reduce and prevent youth tobacco and nicotine use, substance use, and childhood obesity, in keeping with its legislatively created public purpose noted in the Code of Virginia § 32.1-355. Applicants must demonstrate how their proposed project supports, directly or indirectly, at least one of VFHY's mission areas: preventing or reducing youth tobacco and nicotine use, preventing or reducing youth substance use, or preventing or reducing childhood obesity.

1.2 Program & RFA Purpose

This Request for Applications (RFA) is a solicitation for services related to Consumer Tech for Education and Lifestyle Change as part of the Live Well Together initiative, which seeks to expand access to technology-enabled approaches that improve health and wellness among youth and families in rural Virginia.

1.3 Program Objectives for this RFA

The purpose of this funding, provided through the Rural Health Transformation Program's Live Well Together – Consumer Tech for Education and Lifestyle Change sub-initiative, is to improve the health and wellness of rural youth in support of the broader objective of reducing chronic disease among rural children and adults. Rural Health Innovation Grants will support technology-enabled approaches to improve the health and wellness of young people and their families in 76 rural localities across Virginia.

Projects may address a wide range of youth health needs, including nutrition, physical activity, health education, tobacco and nicotine use prevention and cessation, substance use prevention, chronic disease prevention and management, and other factors that support healthy lifestyles. All proposed projects must demonstrate a connection, directly or indirectly, to at least one of VFHY's mission areas: preventing and reducing youth tobacco and nicotine use, substance use, or childhood obesity.

Projects must be designed to produce measurable improvements in youth health behaviors, health literacy, or the ability to navigate and connect with health and wellness resources and services. Projects may also involve parents, caregivers, or other adults when their participation directly supports the health and wellness of participating youth; however, youth must remain the primary population served.

Objective	Description	CMS Strategic Goal Alignment
Decrease rates of chronic disease.	Help young people improve health behaviors that support chronic disease prevention and management.	Make Rural America Healthy Again
Promote sustainable healthy behavior changes among rural youth.	Help young people establish and sustain healthier behaviors related to nutrition, physical activity, substance use prevention and cessation, chronic disease prevention and management, and other factors that support healthy lifestyles.	Make Rural America Healthy Again
Improve health literacy among rural youth.	Help young people find, understand, evaluate, and use health information to make informed decisions about their health and wellness.	Make Rural America Healthy Again

1.4 Eligible Applicants

To be eligible for an award under this RFA, applicants must meet the following requirements:

- **Organization:** Be a legally organized entity in good standing, registered to do business in Virginia (*prior* to submitting an application), and capable of receiving federal subaward funding. Examples of eligible organizations include nonprofit organizations, for profit organizations, Tribal entities, schools or school divisions, and government agencies. Organizations must be U.S.-based and U.S.-owned. Work must be performed in the U.S. with U.S. employees and contractors. International applicants are ineligible. Agencies of the Commonwealth of Virginia may submit more than one application if each application represents a different division and proposes a distinct project. Agencies must obtain VFHY approval before submitting multiple applications. All other organizations may submit only one application as the lead applicant but may participate as a collaborating partner on other applications.

- **Compliance**: Organizations interested in funding must comply with the federal statutes, regulations, or terms and conditions of the federal award made to the Commonwealth of Virginia. Organizations with an active exclusion in SAM.gov, such as debarment or suspension, are not eligible for funding.

- **Capacity**: Applicants must demonstrate the organizational and operational capacity to implement the proposed project, reach the eligible population, manage federal grant funds, and collect and report required program and performance information. Applicants that do not directly serve youth must identify a partner or partners that provide a clear pathway to reach and engage the youth to be served.

- **Population**: The grant-funded project must primarily serve youth under age 18 who reside in one or more of the 76 eligible rural Virginia localities listed in Section 2.4. Adults may participate when their involvement directly supports the health and wellness of eligible youth, but projects may not primarily serve adults without a direct and meaningful connection to youth.

1.5 Available Funding & Award Structure

The Virginia Foundation for Healthy Youth (VFHY) anticipates making at least 15 awards through this RFA. A total of up to $8,574,012.5 is available for this funding cycle. Awards are for the period stated in this RFA. Individual awards can range from a minimum of $300,000 to a maximum of $1,500,000. Grants may be renewed at the sole discretion of VFHY for up to four additional funding periods.

Receipt of an award does not create an entitlement to additional or future funding. Any future funding will depend on the availability of funds, satisfactory performance, and any additional application or competitive process required by VFHY.

Regardless of award amount, the following conditions apply to all awards under this RFA:

- Administrative costs such as general organization leadership and administrative support, and indirect costs such as office expenses or organization-wide accounting may not be funded in this grant. Please submit questions to the FAQ if clarification is needed.
- No cost sharing or matching is required.
- Grantees must demonstrate satisfactory performance to be eligible for renewal funding in each subsequent budget period.

- Pre-award costs are not allowable. In other words, we cannot reimburse grantees for any work that takes place or goods that are purchased prior to the start of a contract.

PART II: REQUIRED SCOPE OF WORK

2.1 Scope of Work Overview

Rural Health Innovation Grants are part of Virginia's Live Well Together / Consumer Tech for Education and Lifestyle Change sub-initiative and support CMS's Make Rural America Healthy Again strategic goal.

Grantees funded under this RFA will use technology-enabled approaches to improve the health and wellness of young people in 76 rural localities across Virginia.

Projects may address a wide range of youth health needs, including nutrition, physical activity, health education, tobacco and nicotine use prevention and cessation, substance use prevention, chronic disease prevention and management, and other factors that support healthy lifestyles. All proposed projects must demonstrate a connection, directly or indirectly, to at least one of VFHY's mission areas: preventing and reducing youth tobacco and nicotine use, substance use, or childhood obesity.

Applicants do not need to be technology companies. Technology should be used as part of a broader approach to improve youth health, and project success should be measured by health impact, not simply by the adoption, use, or expansion of a technology product. Projects must be designed to produce measurable improvements in at least one of the following:

- Health behaviors
- Health literacy
- Ability to navigate and connect with health and wellness resources and services

Projects may also involve parents, caregivers, or other adults when their participation directly supports the health and wellness of participating youth; however, youth must remain the primary population served. Priority will be given to approaches that reach youth who face greater barriers to good health, including young people living in low-income communities.

This RFA does not support projects focused primarily on mental health or the provision of mental health counseling or clinical mental health treatment. Grant funds may not be used for individual or group counseling, psychotherapy, psychiatric services, crisis intervention, or treatment of mental health conditions. Non-clinical prevention education and health coaching may be included when they directly support an otherwise eligible youth health outcome.

This RFA emphasizes prevention rather than medical treatment. VFHY prioritizes approaches that promote healthy behaviors, improve health literacy, and help youth navigate and connect with health and wellness resources and services. Projects serving youth with existing medical conditions may qualify when they emphasize prevention, education, self-management, or care navigation. Grant funds may not be used to provide medical diagnosis, clinical treatment, medical procedures, or routine healthcare services.

Applicants are encouraged to leverage partnerships to achieve project outcomes.

All projects must prioritize need, track participation and frequency of engagement, and include a plan for sustaining activities beyond the grant period.

Examples: These are examples of projects that might qualify for funding. This list is not exhaustive:

Health Behaviors

- Healthy nutrition: A health system works with community partners to provide an intensive, family-based nutrition and physical activity program across several rural counties using live telehealth sessions, a digital curriculum, and between-session text coaching to deliver the sustained contact shown to improve nutrition-related outcomes.

- Nicotine cessation: Schools and community organizations enroll youth who use cigarettes or vapes in a regional cessation program combining direct in-person support with personalized two-way text support, quit planning, reminders, and follow-up.

- Healthy food choices: A rural school division pilots a digital program that integrates nutrition education with school cafeteria menus, helping students make informed food choices through interactive information and prompts. The project seeks to increase students' selection of healthier foods, using cafeteria data and participant feedback to evaluate results.

- Substance use prevention: Multiple school divisions implement an evidence-based prevention curriculum using interactive digital lessons, repeated booster sessions, and parent-facing digital components to reduce initiation or use of alcohol, cannabis, nicotine, or other drugs.

- Healthy eating: A multi-school division initiative combines evidence-based nutrition education, cooking and food-preparation skills, taste testing, and family engagement with digital meal-planning education and ongoing text-based coaching for youth and caregivers to improve eating behaviors.

- Physical activity pilot: Eight rural school divisions partner to pilot a physical fitness app integrated into their existing physical education programs. The app provides students and parents with individualized feedback on exercise technique, proper form, physical activity, and progress toward fitness goals, alongside age-appropriate health education. Participating schools analyze aggregated data across divisions to identify effective practices, evaluate improvements in student physical activity and fitness, and determine how the approach could be expanded.

Health Literacy

- Finding trustworthy health information: School divisions teach students how to evaluate online health claims and misinformation through interactive digital scenarios using realistic websites, social media posts, advertising, and health content.

- Nutrition literacy: Schools and community partners use hands-on food education alongside interactive digital lessons on food labels, portion sizes, meal planning, added sugars, and making healthier food choices and measure whether students can apply what they learn.

- Chronic-disease literacy: Health systems provide youth with diabetes, obesity, or other related chronic conditions and their caregivers with live virtual education and interactive condition-

specific learning modules that teach them what the condition is and how everyday behaviors affect it.

Navigation and Connection to Health and Wellness Resources

- Primary care access: A regional school-health partnership uses a digital referral and care-navigation platform with live navigator support to connect rural youth and families to primary care providers, preventive visits, screenings, and follow-up services, including those that support healthy growth and childhood obesity prevention.

2.2 Required Activities

Rural Health Innovation Grants will support organizations to implement, expand, or scale evidence-based or evidence-informed approaches that produce measurable improvements in the health and wellness of rural youth.

Project Activities:

Funded projects must:

- Serve Rural Youth: Primarily benefit youth residing in one or more of the 76 eligible rural Virginia localities.
- Address an Identified Need: Address a clearly identified youth health or wellness need using an evidence-based or evidence-informed approach.
- Meaningfully Use Technology: Incorporate technology as a meaningful part of the intervention, demonstrate that it is appropriate for the population served, and explain how it will contribute to improved youth health and wellness.
- Improve Health Outcomes: Seek measurable improvements in at least one of the following areas: youth health behaviors, health literacy, or the ability to navigate and connect with health and wellness resources and services.
- Recruit and Engage Participants: Conduct outreach to eligible youth and families, including through community partners where appropriate. Establish strategies for participant recruitment, onboarding, and continued engagement with the technology-enabled intervention.
- Implement the Approved Project: Complete the activities, milestones, and deliverables established in the approved application and grant contract.
- Plan for Sustainability: Establish a realistic plan for sustaining successful project activities and benefits beyond the initial grant period.

Reporting, Monitoring, and Compliance Requirements

Grantees must:

- Track Participation and Outcomes: Track participant enrollment, participation, engagement, and applicable health and wellness outcomes, including the required Rural Health Innovation Grant performance metrics.
- Evaluate Project Success: Develop and implement an evaluation plan that identifies measurable outcomes and appropriate methods for assessing project effectiveness.

- Maintain Records and Submit Reports: Maintain documentation supporting project activities, expenditures, participation, outcomes, and deliverables. Submit required financial and programmatic reports to VFHY.
- Cooperate with VFHY Monitoring: Participate in meetings, document reviews, site visits, and other monitoring activities. Be available to accommodate on-site meetings or promotional activities involving VFHY and its partners, when appropriate.

Project Completion and Final Reporting

All grant-funded activities must be completed by August 16, 2027. The Final Report and final invoice/reimbursement request must be submitted to VFHY no later than August 30, 2027.

- Final Financial Report - The final invoice/reimbursement must be submitted to VFHY no later than August 30, 2027.

- Final Report - The Final Report includes questions about the grant project/program over the course of the entire period. This report is completed online utilizing the VFHY Grants Portal. The final report must be submitted to VFHY no later than August 30, 2027.

A project will be considered complete when all approved activities have been finished and VFHY has approved the required programmatic and financial documentation.

2.3 Partnerships and Coordination

Applicants are encouraged to leverage partnerships to achieve project outcomes. If an applicant has collaborating partners, a Memorandum of Agreement (MOA) for each partner listed in the application must be included. These must be MOAs, not letters of support. Each MOA must be dated and must clearly describe the commitments of each partner for at least the initial grant period. Documents with original signatures or a verified digital signature (e.g. DocuSign, Adobe) are acceptable. Signatures that are computer-generated without digital verification are not acceptable.

Only one file can be uploaded in this field in the VFHY Grants Portal, so applicants should combine all MOAs and required approvals into a single file before uploading. If the project has no partners or collaborating agencies, MOAs are not required. In that case, provide a brief statement confirming that no partners are involved.

2.4 Geographic Scope

Applicants must propose projects that serve youth residing in one or more of the 76 eligible rural localities listed in this RFA. Applicants are not required to serve all 76 localities and may propose a project serving a single locality or a subset of eligible localities. The localities selected in the application must reflect where participating or benefiting youth reside, not necessarily the location of the applicant's administrative office.

We have presented the 76 localities in two different formats: the Virginia Foundation for Healthy Youth (VFHY) regions and the Rural Health Transformation (RHT) regions.

Virginia Foundation for Healthy Youth (VFHY) Regions

Southwest	Central	North	Southeast
Alleghany County	Appomattox County	Caroline County	Accomack County
Bland County	Bath County	Clarke County	Amelia County
Buchanan County	Buckingham County	Culpeper County	Brunswick County
Carroll County	Buena Vista City	Fauquier County	Charles City County
Covington City	Cumberland County	King George County	Charlotte County
Craig County	Fluvanna County	Warren County	Emporia City
Danville City	Greene County		Essex County
Dickenson County	Highland County		Franklin City
Floyd County	Lexington City		Greensville County
Franklin County	Louisa County		Halifax County
Galax City	Madison County		King and Queen County
Giles County	Nelson County		King William County
Grayson County	Orange County		Lancaster County
Henry County	Page County		Lunenburg County
Lee County	Rappahannock County		Mathews County
Martinsville City	Rockbridge County		Mecklenburg County
Norton City	Shenandoah County		Middlesex County
Patrick County			New Kent County
Pittsylvania County			Northampton County
Pulaski County			Northumberland County
Radford City			Nottoway County
Russell County			Prince Edward County
Smyth County			Richmond County
Tazewell County			Southampton County
Wise County			Surry County
Wythe County			Sussex County
			Westmoreland County

Rural Health Transformation (RHT) Regions

Eastern Shore & Northern Neck	Northern Piedmont	Roanoke/ Alleghany	Shenandoah Valley	Southside	Southwest
Accomack County	Culpeper County	Alleghany County	Bath County	Amelia County	Bland County
Caroline County	Fauquier County	Craig County	Clarke County	Brunswick County	Buchanan County
Charles City County	Fluvanna County	Floyd County	Highland County	Buckingham County	Carroll County
Essex County	Greene County	Franklin County	Page County	Charlotte County	Dickenson County
King and Queen County	Louisa County	Covington City	Rockbridge County	Cumberland County	Giles County
King George County	Madison County	Radford City	Shenandoah County	Greensville County	Grayson County
King William County	Nelson County		Warren County	Halifax County	Lee County
Lancaster County	Orange County		Buena Vista City	Henry County	Pulaski County
Mathews County	Rappahannock County		Lexington City	Lunenburg County	Russell County
Middlesex County				Mecklenburg County	Smyth County
New Kent County				Nottoway County	Tazewell County
Northampton County				Patrick County	Wise County
Northumberland County				Pittsylvania County	Wythe County
Richmond County				Prince Edward County	Galax City
Westmoreland County				Southampton County	Norton City
				Surry County	
				Sussex County	
				Danville City	
				Emporia City	
				Franklin City	
				Martinsville City	
				Appomattox County	

PART III: REQUIRED PERFORMANCE METRICS, MILESTONES, AND COMPLIANCE

3.1 Required Initiative-Specific Metrics

VFHY is required to track these metrics among all funded grantees so they can be compiled and reported. Adults may be included in the required performance metrics when their participation directly supports eligible youth. Grantees must identify whether each metric includes youth, adults, or both, and report youth and adult participants separately when applicable. The project's primary health or wellness outcome must demonstrate improvements among eligible youth.

#	Metric	Explanation of Metric	Agency-Wide Target / Milestone	Reporting/Collection Methodology and Responsible Party
1	Cumulative number of rural residents, by locality, who have onboarded to and engaged with the sub-initiative technology-enabled component	This metric measures the number of participants in each locality who are onboarded to the project's technology-enabled component and receive related support, such as education, coaching, reminders, incentives, progress tracking, or other engagement activities. Applicants may define "onboarded" in a way that fits their proposed model.	At least a 1–3% increase from baseline in targeted rural localities in each of the six rural health regions by FFY 2030.	Information will be collected through regular grant reports. Verified by Grants Administrator by September 1, 2027.
2	% of rural participants actively engaging with the sub-initiative technology-enabled component 3 months after onboarding (if applicable)	This metric measures whether participants continue to use or participate in the project's technology-enabled activities approximately three months after onboarding. "Active engagement" may be defined based on the intervention and could include continued use, participation, interaction, completion of activities, or other meaningful engagement.	Target to be established after Round 1 subawards.	Information will be collected through regular grant reports and verified by VFHY's Grants Administrator as participants reach the required enrollment milestone.
3	% of rural participants reporting improved knowledge, understanding, or confidence in managing their health or making healthy choices after engaging with the sub-initiative technology-enabled component	This metric measures whether participants report greater knowledge, understanding, or confidence related to managing their health, making healthy choices, or using the tools and information provided through the project. This may be measured through participant surveys or another appropriate assessment.	Target to be established after Round 1 subawards.	Information will be collected through regular grant reports. Verified by Grants Administrator by September 1, 2027.
4	% of participants demonstrating improvement in the project's primary	This metric measures the percentage of participants who demonstrate improvement in at least one meaningful health or wellness outcome appropriate to the intervention, such as physical	Project dependent.	Information will be collected through regular grant reports. Verified by Grants

	health or wellness outcome(s)	activity, nutrition, substance use, weight-related health, or another relevant measure. Applicants must identify their primary outcome and explain how improvement will be measured over time.		Administrator by September 1, 2027.

3.1.1 People Served

For Rural Health Innovation Grants, People Served will typically be reported separately as youth served and adults served. Sometimes these categories will be combined.

Adults may be included in the required performance metrics when their participation directly supports eligible youth. Grantees must identify whether each metric includes youth, adults, or both, and report youth and adult participants separately when applicable. The project's primary health or wellness outcome must demonstrate improvements among eligible youth.

- **Youth Served:** The number of youth under age 18 who reside in one of the 76 eligible rural Virginia localities and directly participate in or benefit from the grant-funded project during the reporting period. Youth must be the primary population served by the project.
- **Adults Served:** The number of parents, caregivers, or other adults who participate in the project because of their connection to eligible youth and whose participation directly supports the health and wellness of those youth.

Projects may include adults as part of a family- or caregiver-focused approach, but they may not primarily serve adults without a direct and meaningful connection to the youth served by this grant. VFHY will track youth served and adults served separately.

Grantees must use a reasonable and documented method for tracking or estimating people served. Grantees should avoid counting the same person more than once within the applicable reporting period unless the participant receives multiple distinct interventions. If duplication cannot reasonably be avoided, grantees must note this and describe the methodology used.

Required grant reports will include People Served and applicable demographic and geographic information. Applicants should be prepared to track people served by locality. If a project ends up benefitting people outside of a rural locality, those numbers will be reported separately.

3.2 Required Program Milestones

All milestones will be incorporated into the executed grantee contract.

Milestone/ Phase	Description/Required Activities	Required Deliverables/ Acceptance Criteria	Required By / Due Date
Complete Contract With VFHY	Execute grant contract and complete any required pre-award documentation. Funded activities may begin following contract execution.	Executed grant contract and required documentation.	Before project activities begin.
Launch Rural Health Innovation Project	Begin implementation, testing, or expansion of the approved consumer-facing digital health project, including participant onboarding and engagement activities as applicable.	Confirmation that the approved project has launched and participant enrollment/onboarding has begun or is ready to begin.	Likely Between February and April 2027.
Report Project Participation and Outcomes	Track and report required participation, engagement, and outcome measures, including the applicable performance metrics.	Complete required VFHY progress reports and supporting documentation for reported measures.	According to the reporting schedule established in the grant contract.
Measure Three-Month Engagement	For participants with at least three months of enrollment, measure continued engagement with the project's digital health tools or technology-enabled activities.	Report the percentage of applicable participants actively engaged after three months, using the grantee's approved methodology.	Beginning three months after participant enrollment, as applicable.
Complete Funded Project Period	Complete approved grant activities and document project implementation, people served, outcomes, and expenditures.	Completion of approved activities verified through reports and other grant-monitoring documentation.	August 16, 2027
Submit Final Documentation	Submit final programmatic and financial documentation to VFHY.	Final report, final invoice, required performance measures, and any other required closeout documentation.	August 30, 2027

3.3 Remedies for Noncompliance

If a grantee materially fails to comply with the federal statutes, regulations, or terms and conditions of the federal award, including the performance and reporting milestones set forth in this RFA and the executed grantee contract, the Virginia Foundation for Healthy Youth, after providing written notice and a reasonable opportunity to cure where appropriate, may impose one or more of the following remedies in accordance with 2 CFR 200.339 and 2 CFR 200.340:

Remedies for noncompliance with federal rules and program requirements:

- Temporarily withholding cash payments pending correction of the deficiency;
- Disallowing all or part of the cost of the activity or action not in compliance;
- Wholly or partly suspending or terminating the subaward;
- Initiating suspension or debarment proceedings under 2 CFR Part 180;
- Withholding further awards for the project or program;
- Requiring repayment of funds expended in violation of the terms and conditions;
- Other legally available remedies.

Remedies for noncompliance with performance and reporting timelines:

- Requiring submission of a corrective action plan within 30 days of written notice;
- Imposing heightened monitoring, including increased reporting frequency and site visits;
- Designating the grantee as "high risk" under 2 CFR 200.208, with associated specific conditions;
- Reducing future budget periods or declining to renew the subaward;
- Termination of the subaward for cause.

A grantee may contest any adverse action through the dispute process set forth in the executed grantee contract and applicable Code of Virginia provisions.

PART IV: APPLICATION REQUIREMENTS AND INSTRUCTIONS

4.1 Required Application Components

Read the entire RFA Instructions and related information before completing an application. To complete the application, go to the VFHY Online Grant Portal directly or connect from the Rural Health Innovation Grants page on the VFHY website. If your organization does not already have an account, you will be prompted to create a new one before you can start the application. In the Grants Portal, select **RFA #852P028 – Rural Health Innovation Grants (2027).**

Applicants must complete each required section of the online application and upload all required attachments. All questions must be answered to ensure a complete application.

Major Sections in VFHY's Online Grants Portal	Brief Description
PROJECT SUMMARY	Narrative Questions
ORGANIZATION BACKGROUND	Narrative Questions & Uploaded Documentation
PROJECT DETAILS	Narrative Questions & Uploaded Documentation
PEOPLE SERVED	Narrative Questions
BUDGET	Narrative Questions & Uploaded Budget
AUTHORIZED REPRESENTATIVE	Signature

4.2 Project Approach Narrative

The following questions should be answered in full in the VFHY Online Grant Portal.

PROJECT SUMMARY

Project Name
Select a name to distinguish your program. For example: Thriving Families: A Southwest Virginia Digital-First Nutrition Support Network

VFHY Region
Select the VFHY region in which your grant-funded work will primarily take place.

RHT Region
Select the RHT region in which your grant-funded work will primarily take place.

Project Summary
Briefly describe the proposed project, who it would benefit, and why it is important. This should be a short, polished description of your project.

ORGANIZATION BACKGROUND

Organization
Select the category that best describes your organization's legal and tax status.

Organizational History and Past Performance
Describe your organization's history and background. Briefly describe up to three comparable projects or programs from the past five years that your organization has implemented, including the project scope, funding source and amount, your organization's role, and key outcomes. Organizations without comparable project or program experience are still eligible to apply.

Adverse Action Disclosures
Applicants must disclose, within the past five years, any of the following:

- Terminations for default, convenience following non-performance, or non-renewal due to performance concerns on any federal- or state-funded award.
- Active or resolved suspensions or debarments under federal or state requirements.
- Material findings, questioned costs, or unresolved Single Audit findings.
- Adverse audit findings.

Financial Audit and Financial Documentation
Because Rural Health Innovation Grants are federal subawards, VFHY is required to conduct a risk assessment of organizations selected for funding.
Has your organization completed a Federal Single Audit or other independent financial audit within the past three years? If yes, upload your most recent Federal Single Audit or audited financial statements. If no, upload your most recent organizational financial documents, such as:

- Balance sheet
- Income statement
- Statement of cash flows
- Current organizational budget

Not having a Federal Single Audit or independently audited financial statements does not make your organization ineligible for funding. VFHY reserves the right to request additional documentation during the application process or prior to making awards.

Audit Findings
Did your organization’s most recent audit identify any material findings, questioned or disallowed costs, corrective actions, or unresolved findings? If yes, briefly explain.

Professional References
Please provide contact information for three professional references who can speak to your organization's experience, performance, and ability to successfully manage projects similar to the one proposed. For each reference, include: name and title, organization, email address and phone number, and relationship to your organization and relevant project, if applicable.
References may include previous funders, project partners, or other individuals familiar with your organization's work.

PROJECT DETAILS

Statement of Need
Describe the youth health or wellness need your project will address. Why is this need especially important among the rural youth you intend to serve? Include relevant data, research, or other evidence demonstrating the need and any barriers to improving youth health.

Project
Describe your proposed project in detail. What activities, services, or interventions will you deliver, how

will they work, and what will participating youth experience? Explain why you selected this approach and how it is expected to improve youth health and wellness. Describe if and how adults will be impacted.

Prevention
How will your proposed project help prevent chronic disease or other health problems among rural youth? Describe how your approach will promote healthy behaviors, improve health literacy, or help youth navigate and connect with health and wellness resources and services. If your project serves youth with existing medical conditions, explain how it emphasizes prevention, education, self-management, or care navigation rather than providing medical treatment or clinical services. Explain how your proposed project connects to at least one of VFHY's mission areas identified in Section 1.1.

Technology-Enabled Approach
Describe the technology your project will use and how it will support the proposed intervention. Why is this technology appropriate for your target population, and what does it contribute beyond what could be achieved without it? Identify the specific technology and proposed vendor, if known. Explain whether the technology is already available to your organization or will need to be purchased, developed, or otherwise acquired.

Evidence and Effectiveness
What evidence suggests that your proposed approach will be effective? Describe any relevant research, established practices, previous implementations, or demonstrated results that support your project. If the approach is new or innovative, explain the evidence or rationale supporting its potential effectiveness.

Implementation Plan
Explain how your organization will implement the project, including major activities, timelines, milestones, and the roles of key staff and partners. Identify significant implementation challenges and how you would address them.

Capacity of Organization
Include your organization's history, annual operating budget or revenue, approximate number of individuals served, and number of staff. If you use outside vendors for a typical project, explain your process for identifying and managing subcontracts, and how your organization typically holds a subcontractor accountable for a project. What resources, relationships, or capabilities are already in place?

Funding Expenditure Timeline and Readiness
Describe your organization's plan and readiness to expend the full amount of requested grant funds during the initial grant period. Provide a timeline for major expenditures, including personnel, technology purchases, vendor contracts, and other significant costs. Identify any procurement, hiring, contracting, or implementation activities that could delay expenditures and explain how you will address those challenges. How confident are you that your organization can complete all grant-funded activities by August 16, 2027?

Health and Wellness Outcomes
What improvements in youth health behaviors, health literacy, and/or the ability to navigate and connect with health and wellness resources and services do you expect your project to produce? Explain why

these outcomes are important for the participants you intend to serve. Provide specific targets and measurement methods in the Project Evaluation Plan.

Project Evaluation Plan
Complete and attach the Project Evaluation Plan to describe how your project will measure, collect, and report each of the four required performance metrics identified in Section 3.1.
Metric 1 projections should be consistent with the Youth Impacted and Adults Impacted figures in your application. If the numbers differ from those included in the required performance metrics, briefly explain why.

Participant Data and Privacy
What participant information will your project collect or maintain? Describe how your organization and any technology partners will protect sensitive information, particularly information involving minors, and comply with applicable privacy and security requirements. Disclose whether any participant data will be shared with, sold to, or otherwise made available to third parties, including for advertising, marketing, or commercial purposes. If so, explain what information will be shared, with whom, for what purpose, and what safeguards will be in place.

Key Personnel
Identify the key personnel who will lead and carry out the proposed work. For each person, provide their name, title, project role, whether they are full- or part-time, relevant qualifications or experience, and the approximate percentage of time or hours per month they will dedicate to the project.

At minimum, identify:

- A project manager responsible for the success of the project
- A finance manager responsible for tracking expenses, invoicing, and related financial responsibilities

Memorandum of Agreement
If the project includes collaborating partners, upload a Memorandum of Agreement (MOA) for each partner. Each MOA must describe the commitments of each partner for at least the initial grant period. If the project has no partners or collaborating agencies, provide a brief statement confirming that no partners are involved. Only one file can be uploaded in this field in the Grants Portal, so applicants should combine all MOAs and required approvals into a single file before uploading. These must be MOAs, not letters of support. Each MOA must be dated and must clearly describe the commitments of each partner for at least the initial grant period. Documents with original signatures or a verified digital signature (e.g. DocuSign, Adobe) are acceptable. Signatures that are computer-generated without digital verification are not acceptable.

Sustainability: After the Initial Grant Period
How would you sustain your project's activities and benefits if VFHY does not renew your grant for a second funding period?

Long-Term Sustainability
If your project receives sustained funding, how could it become sustainable beyond the five-year RHTP funding period? Describe opportunities to integrate the approach into existing programs, services, or systems, including potential funding sources and partnerships.

PEOPLE SERVED

Youth Impacted: Year 1
If funded, how many **youth** will be impacted by this project between February 2027 and August 2027?

Adults Impacted: Year 1
If funded, how many **adults** will be impacted by this project between February 2027 and August 2027?.

See "How should we count participants who participate in multiple interventions when reporting youth/adults?" in the FAQ section of the website.

Rural Localities
Select all the eligible rural localities where the people impacted by your project reside. You will report people served from these localities if you are funded.

Projected Participation by Locality
For each rural locality your project intends to serve, estimate the number of youth and adults who will participate in the technology-enabled intervention during the initial grant period. Explain how you developed these estimates and how you will track and verify participation by locality, including how you will avoid duplicate counts within the same intervention.

Youth Population
Describe the population of youth who would be served by your program or project. Are they at elevated risk for chronic disease? If so, how?

Recruitment and Engagement
Describe the youth and adults your project will serve and how you will reach, recruit, and engage them. What strategies will you use to maintain participation over time? Explain how your approach will address barriers to participation, particularly among youth facing greater health or economic challenges. Describe how participants will be onboarded to the technology-enabled component and how your project will address barriers such as device and internet access, accessibility needs, and limited digital literacy.

Youth Impacted (Future)
Following the initial grant period, how many youth do you estimate will be impacted by this project during the next full year (October 2027–September 2028)? Assume that you will receive similar grant award.

Adults Impacted (Future)
Following the initial grant period, how many adults do you estimate will be impacted by this project during the next full year (October 2027–September 2028)? Assume that you will receive similar grant award.

See "How should we count participants who participate in multiple interventions when reporting youth/adults?" in the FAQ section of the website.

BUDGET

Total Funding Requested
Provide the total amount you are requesting from VFHY.

Budget
Complete and upload the Budget Form. List the amount requested for each line item, provide detailed explanations, and show calculations for all funds requested.
If VFHY needs any other context to understand your budget, provide it here.

Supporting Cost Documentation
Upload quotes, estimates, detailed vendor price lists, proposals, or other documentation supporting your major project costs, particularly technology, software, equipment, and contracted services. Documentation should identify the proposed vendor, where applicable, and provide sufficient detail to demonstrate how costs were calculated.

Supporting documentation is strongly encouraged for major technology and contractual expenses but is not necessary for routine supplies or personnel costs. Documentation should be current and, when applicable, dated within the last six months. Applicants may apply without this documentation, but VFHY will consider the information available when evaluating whether proposed costs are reasonable. VFHY may request additional documentation.

If you receive a grant:
Submitting a vendor quote or identifying a preferred vendor in your application does not automatically mean you can purchase from that vendor. Before making purchases or signing contracts, grantees must follow their organization's purchasing policies and all applicable federal, state, and local procurement requirements.

Generally, the following rules apply:

- $15,000 or less: Competitive quotes are generally not required, but costs must be reasonable and the organization must document that the price is reasonable.1
- Over $15,000 up to $350,000: Grantees generally must obtain and compare quotes from multiple vendors before making a purchase.
- Over $350,000: A formal competitive procurement process requiring public notice is generally required, unless an allowable exception applies.

The applicable threshold is based on the total value of the purchase or contract, not individual invoices or payments. Purchases may not be divided into smaller transactions to avoid procurement requirements.

Other Federal Funding
Check this box if grant funds will be combined with other federal grant funds for the same project. If checked, VFHY will work with you to determine whether additional procurement requirements apply.

Budget Certification
Certify that no pre-award costs, major construction costs, lobbying costs, or other prohibited expenditures are included in the budget.

AUTHORIZED REPRESENTATIVE

_____

Authorized Organizational Representative Certification
Enter the name of your organization's Authorized Representative below.
By signing, the Authorized Organizational Representative certifies that all information in this application is true, accurate, and complete; that the organization accepts the conditions of a Virginia RHTP subrecipient award; and that the organization will comply with 2 CFR Part 200 and all applicable federal and state requirements.
The Authorized Representative also certifies that they acknowledge receipt of any addenda issued. To be eligible for a grant award, the organization must also agree to:

- Complete all grant-funded work no later than August 16, 2027.
- Submit the Final Report and Final Invoice no later than August 30, 2027.

By signing below, the Authorized Representative confirms that they have reviewed and agree to these requirements.

4.3 Budget Requirements

Applicants must complete and upload the Budget Form as a Microsoft Excel file. The budget must provide a detailed project budget and clearly show how each requested cost was calculated. All costs must be reasonable, necessary, allocable to the proposed project, adequately documented, and consistent with this RFA. Applicants should provide sufficient detail, formulas, and calculations to explain how each amount was determined. For each budget line item, show how the amount was calculated, such as hourly rate × hours, cost per session × number of sessions, or unit cost × quantity. If you want to provide any additional context that we might need in order to better understand your budget, you may do so in the narrative text box, labeled Budget, found in the Online Grants Portal where you upload your budget.

Applicants should complete all applicable Personnel & Fringe, Equipment, Supplies, Contractual, Travel, and Other Direct Costs Subtabs. Before submitting the application, applicants should verify that all applicable subtabs are complete, calculations are accurate, and the Budget Summary reflects the total amount requested.

Subtabs

- **Instructions:** Provides instructions for use of the Budget Form.

- **Budget Summary:** Automatically calculates the total request based on the amounts entered in the individual budget subtabs.

- **Budget Guidance & Definitions:** Provides more detailed explanations of each budget category and related requirements.

- **Personnel & Fringe:** Identify the position, staff member if known, annual salary, and percentage of staff time dedicated to the project. You may choose to hire a new staff member or expand the hours of an existing employee, for example from 20 hours per week to 40 hours per week. If hiring or expanding staff time, include those costs here. If you instead hire someone as a contractor, include those costs under Contractual. Fringe benefits must be based on the organization's established fringe rate and may not exceed 40%. Additionally, salary costs charged to this award may not exceed an annualized rate of $228,000 per individual – the federal Executive Schedule Level II rate for 2026 – and must be prorated based on the individual's time dedicated to the project and the period worked.

- **Equipment**: List each equipment item separately and explain how it supports the proposed project. Examples include technology hardware costing $10,000 or more per unit. Include the purpose of the equipment, per-unit cost, number of units, and total cost. Only items with a per-unit cost of $10,000 or more should be included as Equipment. If equipment is already included in a service contract, do not also list it here.

- **Supplies:** List all supplies needed to carry out the proposed project. Include a clear description of each item, per-unit cost, quantity, and total cost requested. Supplies are tangible items with a per-unit cost of less than $10,000. Examples may include educational materials, technology hardware, and other consumable or project-specific items that directly support the proposed project. Do not include costs that are more appropriately categorized as Equipment or Contractual. If supplies are already included in Contractual, do not also list them here.

- **Travel:** Itemize anticipated travel expenses necessary to carry out the proposed project. Eligible costs may include mileage reimbursement, transportation, lodging, meals and incidental expenses (per diem), parking, tolls, and other reasonable project-related travel expenses. For each trip, identify the purpose, destination, applicable reimbursement rates, number of travelers, and estimated costs. Travel expenses must be reasonable, necessary, directly attributable to the project, and consistent with the organization's established travel policies and applicable federal requirements under 2 CFR 200.475.

- **Contractual:** List all contractor agreements, services, consultant agreements, and other contractual costs necessary to support the project. Examples include software subscriptions, app licenses, digital health platforms, and contracted technology services. For each item, provide a description of the services to be performed. Some of your project costs may be paid through contracts. If so, include those costs here. If you hire someone as an employee of your organization, include those costs under Personnel & Fringe. If a contractor’s price includes equipment or materials that cannot reasonably be separated from the overall contract price, those costs may remain under Contractual. **Do not enter the same cost under more than one budget category**.

- **Other Direct Costs:** Use this section for allowable direct costs that do not fit within the Personnel, Fringe Benefits, Travel, Equipment, Supplies, or Contractual categories. Provide a clear description, quantity, unit cost, and total cost for each item.

Supplanting is not allowed, meaning grant funds may not replace funds already available to the organization for staff, equipment, materials, or other costs required to carry out an existing program or project. **Administrative costs, including indirect costs and general operating expenses, will not be funded.** No matching funds or cost sharing are required. Incentives are items provided to youth participants beyond the materials required to conduct the program and may not exceed $25 per participant.

Additionally, any incentive items may not contain branding related to the organization or any affiliates and the incentives must only be provided for participating in a program. Incentive items may not be provided as general giveaways nor provided to any youth prior to their participation in the grant-funded program. Incentives must be appropriate and reasonable. Gift cards are not permitted.

4.4 Key Personnel & Staffing

In the application, applicants must identify the key personnel who will lead and carry out the proposed work.

4.5 Past Performance

In the application, applicants must identify comparable projects they have completed in the past and submit professional references.

Adverse Action Disclosures

In the application, applicants must disclose, within the past 5 years, any of a set list of adverse actions. Failure to disclose any of the actions will be grounds for rejection of the application or termination of any resulting subaward. Disclosure is not an automatic bar to award; it informs VFHY's risk evaluation under 2 CFR 200.206 and the imposition, if any, of specific award conditions under 2 CFR 200.208

PART V: REVIEW CRITERIA AND SCORING

5.1 Review Process

All applications will be reviewed by VFHY staff with input from subject matter experts, including DMAS. Best Value concepts will be used for the evaluation and award. Best Value means the overall combination of quality, price, and various elements of required services that in total are optimal relative to a public body's needs. Various elements may include location, target population, demonstrated need, high risk youth, health disparities, and type of program or project. VFHY will consider awards to other than the highest technically acceptable application.

Following the initial application review, VFHY may invite selected applicants to participate in an interview to discuss their proposed projects, clarify application details, and answer questions from the review committee. Interviews will be conducted at VFHY's discretion and are not guaranteed for all applicants. VFHY may also conduct reference checks, including contacting professional references provided by applicants, to assess past performance and organizational capacity.

Evaluation Criteria:

Applications will be evaluated using the following Best Value rating method:

- **Acceptable:** Applicant's application demonstrates a very good understanding of goals and objectives of the RFA. There may be strengths and weaknesses, however strengths outweigh the weaknesses.

- **Marginal:** Applicant's application demonstrates a fair understanding of the goals and objectives of the RFA. Weaknesses are present and may outweigh strengths that exist. Weaknesses can be corrected.

- **Unacceptable:** Applicant's application fails to demonstrate an understanding of the goals and objectives of the RFA and is generally deemed unresponsive to the RFA. The application has

one or more significant weaknesses that outweigh the strengths. Weaknesses will be very difficult to correct or are not correctable.

Award Criteria:

Selection will be made of applicants deemed to be fully qualified and best suited among those submitting applications on the following:

- The ratings from the reviewers' evaluations
- The Best Value requirements
- The amount of funding available

Negotiations will be conducted with the Applicants so selected. After negotiations have been conducted with each Applicant so selected, the agency will award contracts to those Applicants. Price will be considered but need not be the sole determining factor.

The Virginia Foundation for Healthy Youth may cancel this Request for Best Value Applications or reject applications at any time prior to an award and is not required to furnish a statement of the reason why a particular application was not deemed to be the most advantageous. (See Section, 2.2-4359 D of the *Code of Virginia*.) Awards are contingent on availability of funds through CMS/Virginia Rural Health Transformation Program and/or appropriations made by the General Assembly, and/or as approved by the VFHY Board of Trustees. Awards are contingent upon the availability of federal funds received from CMS, continued federal approval, and the grantee's satisfactory performance and compliance with applicable federal, state, DMAS, and VFHY requirements.

Conflict of Interest: Before reviewing any application, each reviewer must complete and sign a Conflict-of-Interest Disclosure form identifying any financial, employment, familial, or organizational relationship with any applicant or its key personnel within the past 24 months. Any reviewer with a conflict will be recused from scoring or discussing the affected application. VFHY will document all disclosures and recusals as part of the official procurement file. Applicants who believe a conflict exists may submit a written request for review to the VFHY Director of Programs within five (5) business days of the application deadline.

PART VI: AWARD TERMS, REPORTING, AND COMPLIANCE REQUIREMENTS

6.1 Federal Regulatory Framework

All awards under this RFA are federal subawards. Grantees must comply with:

- 2 CFR Part 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance);
- Code of Virginia and applicable VFHY procurement policies;
- Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.);

- Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794);
- Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.);
- Section 1557 of the Patient Protection and Affordable Care Act (42 U.S.C. 18116);
- Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.) where applicable;
- Anti-Lobbying Act and Byrd Amendment (31 U.S.C. 1352) for awards over $100,000;
- Drug-Free Workplace Act;
- Applicable provisions of 2 CFR Part 300;
- HHS Grants Policy Statement;
- CMS Rural Health Transformation Program Terms and Conditions;
- The federal Notice of Award and applicable amendments;
- CMS guidance, amendments, and clarifications;
- The applicable upper-tier Subrecipient Agreement and special RHTP terms and conditions; and
- Any additional requirements imposed by DMAS or the issuing organization to satisfy federal award obligations.

6.2 Reporting Schedule

- Final Financial Report - The final invoice/reimbursement must be submitted as directed by VFHY no later than August 30, 2027.
- Ongoing reporting as determined by VFHY staff - These reports will be a key part of progress monitoring.
- Final Report - The Final Report includes additional questions about the grant program over the course of the entire period. This report is completed online utilizing the VFHY Grants Portal. The final report must be submitted as directed by VFHY no later than August 30, 2027.

Late, incomplete, or inaccurate reports may result in withholding of payments, corrective action, or termination of the award.

6.3 Grantee Monitoring

VFHY will conduct ongoing monitoring of all Grantees. Monitoring activities may include:

- Reviews of financial reports, progress reports, invoices, and supporting documentation;
- Site visits to assess program operations, records, and internal controls;
- Follow-up on financial reviews, corrective action plans, and identified compliance deficiencies as applicable.
- Risk assessments before award and annually thereafter to determine the appropriate level of monitoring.

Grantees must cooperate fully with all monitoring activities and provide requested documentation within timeframes specified by VFHY. Failure to cooperate constitutes non-compliance and may result in corrective action.

6.4 Stevens Amendment Acknowledgement Requirements

The Stevens Amendment (Section 507 of P.L. 104-208, as continued in subsequent appropriations acts) requires that any document, statement, press release, or other publication describing a project or program funded in whole or in part with RHTP funds clearly state both the dollar amount and the percentage of total program costs financed with federal money.

Grantees must include the following acknowledgement in any publications, including websites, reports, press releases, and presentations:

> **If the subaward is funded entirely with federal funds (no non-federal sources):**
>
> *"This subaward [is/was] supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling (award amount) with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CMS/HHS or the U.S. Government."*
>
> **If the subaward is partially funded with non-governmental sources:**
>
> *"This subaward [is/was] supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling (XX) with [XX] percent funded by CMS/HHS and $[XX amount] and [XX] percent funded by non-government source(s). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CMS/HHS or the U.S. Government."*

Planned external public communications related to grant-funded activities must be submitted to VFHY for any required DMAS and CMS review and approval before release.

6.5 Invoicing Process and Documentation

Awards will be paid on a reimbursement basis. Grantees may submit invoice/reimbursement requests monthly to their Grants Administrator using the approved budget categories of Personnel, Fringe, Equipment, Supplies, Contractual, Travel, and Other Direct Costs. Requests must identify expenditures by budget category and provide sufficient detail to show that costs are consistent with the approved grant budget. VFHY will process approved invoice/reimbursement requests within 30 days.

VFHY may verify invoice/reimbursement requests and request receipts or other supporting documentation during the grant period. Grantees must maintain receipts and supporting documentation for all grant expenditures but are not required to submit receipts with every monthly reimbursement request. The final invoice/reimbursement request must be submitted no later than August 30, 2027. Incomplete, inaccurate, unsupported, or unallowable requests may result in a request for a revised invoice/reimbursement and/or payment delayed until the issue is resolved.

6.6 Final Reconciliation and Closeout

All grant-funded activities must be completed by August 16, 2027. The final invoice/reimbursement request and Final Report must be submitted to VFHY no later than August 30, 2027. The final invoice must reflect all allowable grant expenditures and reconcile to the approved budget. All expenditures included in the final reimbursement request must have been incurred and paid by the grantee before the final reimbursement request is submitted. Any unobligated funds will remain with VFHY, and any overpayments or disallowed costs must be returned to VFHY.

The Final Report must include required performance information and project metrics. Grantees must retain all grant-related financial, programmatic, and procurement records for at least five years following submission of the final expenditure report. VFHY may make post-closeout adjustments or recover costs later determined to be unallowable or unsupported.

6.7 Prohibited Uses of Funds

The following expenditures are expressly prohibited and may not be charged to this award under any circumstances:

- Pre-award costs.
- Meeting matching requirements for any other federal funds or local entities.
- Services, equipment, or supports that are the legal responsibility of another party under federal, state, or tribal law such as vocational rehabilitation or education services. Such legal responsibilities include, but are not limited to, modifications of a workplace or other reasonable accommodations that are a specific obligation of the employer or other party.
- Goods or services not allocable to the approved project.
- Supplanting existing state, local, tribal, or private funding of infrastructure or services, such as staff salaries.
- Construction
- The cost of independent research and development, including their proportionate share of indirect costs in accordance with 2 CFR 300.477.
- Profit to any recipient even if the recipient is a for-profit organization. Profit is any amount in excess of allowable direct and indirect costs.
- Funds related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or executive order proposed or pending before the Congress or any state government, state legislature or local legislature or legislative body. See also 45 CFR part 93, 2 CFR 200.450, Lobbying, and applicable Appropriations Law.
- Paying the salary or expenses of any grant recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or executive order proposed or pending before the Congress or any state government, state legislature, or local legislature or legislative body.
- Lobbying, but recipients can lobby at their own expense if they can segregate federal funds from other financial resources used for lobbying.
- Certain telecommunications and video surveillance equipment. See 2 CFR 200.216.
- Costs of promotional items and memorabilia, including models, gifts, and souvenirs.

- Costs of advertising and public relations designed solely to promote the non-Federal entity.
- Meals, except in limited circumstances such as: (i) subjects and patients under study; (ii) where specifically approved as part of the project or program activity (not grantee-specific), e.g., children's services programs.

6.8 Record Retention and Audit Requirements

Grantees must retain all grant-related records (financial, programmatic, procurement) for a minimum of five (5) years following submission of the final expenditure report, or longer if required by a federal audit or litigation hold. If federal expenditures equal or exceed $1,000,000 in any fiscal year, grantees are subject to the Single Audit requirements of 2 CFR Part 200, Subpart F. VFHY must receive copies of all Single Audit reports pertaining to the subaward.

6.9 Data Integrity and Intellectual Property

Grantees must protect the confidentiality of all project-related data that includes personally identifiable information (PII) or protected health information (PHI). Recipients must assume full responsibility for the accuracy of all data and reports submitted to VFHY. CMS holds a royalty-free, nonexclusive, and irrevocable license to reproduce, publish, or use materials, systems, and items developed or refined under the award for federal government purposes per 2 CFR 200.315(b).

6.10 Prior-Approval Triggers

Grantees must obtain written prior approval from VFHY before taking any of the following actions. Grantees should submit prior-approval requests at least 15 days in advance of the proposed action, with sufficient supporting documentation.

Prior-approval requests are required for:

- Any change in scope, objectives, or key personnel identified in the approved application;
- Disengagement of the Project Director or Principal Investigator from the project for more than three (3) consecutive months, or a 25% or greater reduction in their level of effort;
- Grantees must obtain prior written approval from VFHY before making budget changes that cumulatively move more than 5% of the total approved grant amount or $50,000, whichever is less, during a budget period. This applies to changes between budget categories and changes to individual expenses within the same category;
- Carryover of unobligated balances from one budget period to the next;
- Subaward, transfer, or contracting out of any work under the federal award not previously identified in the approved application;
- Pre-award costs (which are otherwise prohibited under this RFA);
- No-cost extensions of the period of performance;
- Acquisition of equipment with a unit cost of $10,000 or more not specifically itemized in the approved budget;
- Changes in the approved cost-sharing or matching arrangement, if any;

The list above reflects the prior-approval requirements set forth in 2 CFR 200.308 and applicable CMS RHTP Program Terms and Conditions, as in effect on the date of this RFA. VFHY may impose additional prior-approval requirements based on the grantee's risk assessment.

6.11 Whistleblower Protections

Grantees must inform employees in writing of the whistleblower protections under 41 U.S.C. 4712 in the predominant native language of the workforce and must include the applicable requirement in each lower-tier subaward.

6.12 Trafficking in Persons

Grantees, their employees, lower-tier Grantees, contractors, and their employees must comply with 22 U.S.C. 7104(g) and 2 CFR Part 175, Appendix A. Prohibited conduct includes severe forms of trafficking in persons, procurement of a commercial sex act, forced labor, and acts that directly support or advance trafficking. Suspected violations must be reported immediately through the channels specified by the issuer, DMAS, CMS, or HHS.

6.13 Selection of Contractors

Procurements made with subaward funds must follow 2 CFR 200.317 through 200.327 and applicable state, local, Tribal, and organizational requirements. Grantees must use documented procurement procedures, select responsible contractors, include applicable contract provisions from Appendix II to 2 CFR Part 200, check exclusion status when required, and retain records documenting the procurement method, selection or rejection, contract type, and basis for price.

6.13A Build America, Buy America

All projects involving the alteration, maintenance, or repair of "infrastructure" as defined in 2 CFR Part 184, including any buildings or real property, must comply with Build America, Buy America (BABA) requirements. BABA requires that iron or steel products, manufactured products, and covered materials used for the project are produced in the United States. The Buy America preference must be included in all subawards, contracts, and purchase orders for work performed or products supplied under the award.

6.14 Confidentiality, Privacy, and Security

Grantees must protect all personally identifiable information (PII), protected health information (PHI), and electronic PHI used or maintained in carrying out the award. Before beginning activities involving sensitive data, grantees must implement appropriate administrative, technical, and physical safeguards; comply with applicable federal and Virginia privacy and security requirements; promptly report actual or suspected incidents; and cooperate with required investigation, mitigation, and notification activities.

6.15 Health Information Technology and Cybersecurity

Where the subrecipient (or any lower-tier subrecipient or contractor) (i) has ongoing access to HHS information or technology systems, AND (ii) handles personally identifiable information or protected health information from HHS, the subrecipient shall develop, maintain, and implement a written cybersecurity plan consistent with the HHS Administrative and National Policy Requirements applicable to the federal award. The subrecipient shall furnish the plan to VFHY upon request and shall update the plan to reflect material changes in systems, threats, or controls. The subrecipient shall include the

substance of this section in each lower-tier subaward and procurement contract that triggers conditions (i) and (ii) above, and shall ensure that each such lower-tier subrecipient or contractor maintains a written cybersecurity plan that meets equivalent requirements.

6.16 Intangible Property, Inventions, Copyright, and Property Reporting

Grantees must comply with applicable requirements for intangible property, copyrights, patents, inventions, equipment, supplies, and federally owned property, including 2 CFR 200.313 through 200.315 and 37 CFR Part 401, where applicable. Grantees must maintain records for equipment and other property purchased with grant funds and provide those records to VFHY upon request.

6.17 Mandatory Disclosures

In accordance with 2 CFR 200.113, grantees must promptly disclose credible evidence of violations of federal criminal law involving fraud, conflict of interest, bribery, or gratuity violations that may affect the federal award.