Brief Summary
Virginia Rural Health Transformation Program RFA -
Provider Interoperability: Where Connection Meets Care (RFA-RHTP-2026-01)

Program Overview

- **Issuing Entities:** Virginia Health Care Foundation (VHCF) in partnership with Virginia Department of Medical Assistance Services (DMAS).
- **Funding Source:** CMS / HHS Cooperative Agreement under the federal Rural Health Transformation Program (Assistance Listing 93.798).
- **Available Funding:** ~$14,000,000 total across Virginia (no minimum/ maximum request; requested funding should meet needs of proposed project).
- **Performance Period:** October 1, 2026 – September 30, 2027.
- **Contact**: Ben Barber, VHCF Chief Rural Health Officer, at ben@vhcf.org.
- **Technical Assistance and Implementation Support**: Facilitated by VHCF
- **Successful applicants should be "implementation ready"**

Key Deadlines & Timeline

- **Application Deadline:** August 31, 2026, at 5:00 PM Eastern.
- **Review Period:** September 1 – September 30, 2026.
- **Notice of Awards:** October 1, 2026.
- **Submission Portal:** Online via the VHCF Application Portal.

Objectives & Funding Areas

Projects must align with at least one of four core technology areas:

1. **Network Capacity:** Upgrade internet bandwidth and reduce latency for reliable data transmission.
2. **EHR Modernization:** Adopt or upgrade to ONC/ASTP-certified platforms aligned with CMS Health Tech criteria.
3. **Cybersecurity:** Remediate high/critical HIPAA security risks and maintain a defensible security posture.
4. **Data Exchange:** Establish active electronic data connections with external providers, HIEs, and public health agencies.

Eligibility Requirements

- **Organizational:** Legally organized entities in good standing (nonprofits, public health entities, Tribal entities, hospitals, clinics, FQHCs, RHCs, educational institutions, or associations).
- **System Registrations:** Active SAM.gov registration with a Unique Entity Identifier (UEI) and no exclusions.
- **Geographic Scope:** Physically located in or providing direct services to federally designated rural Virginia localities (76 counties and independent cities)

Performance Milestones

Milestone 1: Project Kickoff *(Oct 2026 – Dec 2026)*	Finalize pre-implementation steps and vendor contracts. • *Deliverables:* Executed vendor contract(s) and finalized implementation timeline.
Milestone 2: Implementation *(Jan 2027 – Jun 2027)*	Deploy technology, configure systems, train staff, and launch. • *Deliverables:* Attestations and proof of operational technology and staff training.
Milestone 3: Closeout *(Jul 2027 – Sep 2027)*	Evaluate outcomes and transition to long-term operations. • *Deliverables:* Final progress/sustainability report and VCHI evaluation data.

Reporting & Metrics

1. **Monthly Financials:** Due within **7 days** after month-end to support cost reimbursement.
2. **Quarterly Progress:** Due within **15 days** after each quarter (starting March 2027) covering milestones, risks, and technical assistance needs.
3. **Final Report:** Cumulative programmatic and financial report due within **15 days** post-period.
4. **Metric Tracking:** Must track baseline vs. year-end metrics for the chosen funding area (e.g., Mbps bandwidth, CEHRT status, count of HIPAA risks, data connections) plus unique patient volume disaggregated by rural locality.

Application Package

1. **Project Narrative: (16 Pages Max; 11pt Arial, Double-Spaced)**
2. **Budget & Narrative:** Official VHCF Excel template.
3. **Attachments:** Key staff resumes, Letters of Support/MOUs, SAM.gov proof, and most recent audit.

Payment Terms & Financial Guidelines

- **Reimbursement Basis:** Monthly cost-reimbursement. Subrecipients invoice VHCF within 7 days; funds are disbursed after DMAS approval of up to 30 days.
- **No Indirect Costs:** Negotiated Indirect Cost Rate Agreements (NICRA), de minimis rates, and F&A costs are **prohibited**. Only allocable direct costs may be budgeted.
- **Prohibited Uses:** Include pre-award costs, construction, supplanting existing funds, lobbying, promotional items, and capital land/building improvements.