

**Regional Care Conveners and Navigation Networks Program  
Notice of Funding Opportunity (NOFO)**

**Part 1. Full Text of the Announcement**

**A. Program Description and Goals**

The Louisiana Department of Health (LDH), through the Office of Rural Health Transformation and Sustainability, is issuing this Notice of Funding Opportunity (NOFO) to support the development of regional care conveners and navigation networks to coordinate physical, behavioral, and social service providers through hub organizations and deploy community and school-based navigators connecting residents to care. Funding prioritizes proven convener models that deliver measurable outcomes in targeted RHTP areas for rural populations and strengthen long-term sustainability.

This program is designed to serve as a central infrastructure layer responsible for aligning stakeholders and integrating systems ensuring successful program execution. Core functions include the following:

- Network Orchestration – align and facilitate collaboration amongst schools, partners, and MCOs.
- Data Integration and Reporting – standardize and report across stakeholders
- Population Engagement – ensure student activation at school or engagement with adults in identified target population
- Program Oversight and Accountability – track outcomes for engagement, cost, quality and risk for CMS reporting

Funding will prioritize convener models that align with RHTP strategies, including value based payment models that may be utilized for sustainability, if results are proven. Applicants must demonstrate clear expertise and background in operation of convener models.

A Cooperative Endeavor Agreement (CEA) with LDH will be utilized as the funding mechanism for this program for selected sub-recipients. Through this agreement, sub-recipients shall invoice the LDH for reimbursement in the manner specified in the agreement.

## **B. Financial Management and System of Internal Controls:**

Funding for this opportunity is made available through the U.S. Department of Health and Human Services (HHS) Center for Medicare and Medicaid Services (CMS) Cooperative Agreement. All terms and conditions of the Cooperative Agreement for Rural Health Transformation Program (RHTP) Centers for Medicare & Medicaid Services that apply to the Louisiana Department of Health (LDH) also apply to subrecipients and subrecipient agreements awarded under this NOFO.

If selected for funding, the subrecipient must:

1. Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.
2. Comply with applicable Federal statutes, regulations, and the terms and conditions of the Federal award.
3. Comply with applicable State statutes and regulations.
4. Cover eligible activity costs upfront and receive reimbursement through the grant process.
5. Take prompt action when instances of noncompliance are identified including noncompliance identified in audit findings.
6. Be prepared to execute the Cooperative Endeavor Agreement within two weeks of receiving the mutually agreed upon agreement.

## **C. Eligibility Information**

### *1. Eligible Use of Funds*

**Award Size:** \$500,000 - \$2,000,000 annually (based on project scope)

Funding supports resources to implement the convener model and to engage relevant partners. These projects may be multi-year. Project plans must allocate projected expenses monthly. Indirect/administrative costs may not exceed 1.5% of the total direct costs.

The following are examples of funding opportunities that may be proposed:

- Network Development – support for activities leading to the development of a network of participants to enroll in the program.
- Rural Clinic Infrastructure – setting up and resourcing rural clinics for the convener model and related startup costs

- Workforce Development – training of relevant staff to meet specific needs of the program
- Outreach and Engagement – support for educational and awareness activities to potential program enrollees
- Data integration and monitoring – resources for establishing data collection and reporting for initiatives, including technical assistance for partners and data sharing tools, in collaboration with interoperability standards
- Staffing – for convener model governance and implementation

## 2. Ineligible Use of Funds

- Funds for construction and renovation cannot be requested, but expenditures on such items can be included as match.

## 3. *Eligible Organizations*

Applicants must meet all of the following:

- Organizations must qualify as rural under the Louisiana Rural Health Transformation Program definition and methodology. To confirm your agency is rural, visit [Louisiana Rural Health Transformation Funding Opportunities](#)
- Demonstrate financial, infrastructure, or access-related need to rural patients through a documented assessment.

## 4. *“In Kind” Requirements and Sustainability Plan*

- Applicants are required to demonstrate a mandatory minimum cost share/matching contribution of 10% of the total project cost and long-term sustainability beyond the funded investment.
- Matching support may include cash contributions or in-kind contributions reflecting organizational commitment, partnerships with local health systems or MCOs, philanthropic contributions, or alignment with broader financing strategies such as value-based reimbursement or Medicaid participation.
- Projects that leverage matching funds to enable ongoing revenue generation, reduce operating costs, or support scalable service models will be viewed more favorably.
  - Applicants must describe the anticipated post-grant utilization, staffing support model, reimbursement strategy, payer alignment, anticipated revenue generation, and long-term support plans.
  - Sustainability plans should clearly explain how the proposed investment will remain operational, financially viable, and integrated into routine care delivery workflows following the conclusion of grant funding.

- Projects that demonstrate scalable and sustainable service models, improved operational efficiency, reduced long-term costs, enhanced reimbursement opportunities, or measurable support for ongoing rural healthcare access and care coordination will be viewed more favorably during application review.

#### 5. *Priority Funding Areas*

Projects will be prioritized based on alignment with the following:

##### **A. Access and Service Stability**

- Leveraging established entities for a population health, whole person initiatives for Beneficiaries

##### **B. Coordination among different program stakeholders**

- Projects should clearly identify the program stakeholders involved in the convener and demonstrate how partnerships will be established.

##### **C. High-Need Population Impact**

- Enhancing service delivery to rural, high-poverty, or medically underserved populations
- Enhancing service delivery to patients with chronic conditions or complex care needs

#### **D. Other Requirements**

##### *1. Participation Requirements*

Organizations participating in this program are required to comply with the following:

- Submit an initial application for participation in the program, including completion of a Statement of Work. See Appendix A: Statement of Work Requirements
- Agree to comply with mandated state and federal audit requirements including Site reviews and random verification by LDH and monitoring entities, as required
- Execute project and expend requested funds within defined timelines
- Submit quarterly and annual reports to LDH that include measurable outcomes aligned with RHTP priorities
- Demonstrate engagement with rural providers and other rural community stakeholders

##### *2. Reimbursement Requirements*

Upon approval of the application, sub-recipients will receive a Cooperative Endeavor Agreement outlining the terms and conditions of the award.

Subrecipients will be required to incur expenses before requesting funds. **After expenses are incurred**, reimbursement requests will be submitted to LDH via invoice. Invoices must include an itemization of actual expended costs that are allowable, allocable, and reasonable project expenses with supporting receipts and records.

Expenditures will be approved for reimbursement upon satisfactory completion or progress to meet related contractually defined deliverables/tasks and delivery of mutually agreed upon data reporting.

LDH reserves the right to ask for additional clarification to confirm payment before reimbursement.

3. *Supplanting/Non-Supplanting*

Federal funds must be used to supplement (add to), enhance, or expand existing services for program activities and not replace those funds that have been appropriated for the same purpose. A subrecipient may not use Federal grant funds to defray any costs that the recipient is already obligated to pay. The possibility of supplanting will be the subject of careful application review, possible pre-award review, post-award monitoring, and audit of any finding.

Subrecipients must disclose any existing or proposed federal, state, local, or private funding sources that support the same capital improvement project as this program. LDH reserves the right to coordinate, reduce, or deny duplicate payments to prevent overlapping use of funds for the same position or incentive purpose.

**E. Application and Submission Information**

**Applications for Year 1 Funding must be received no later than August 14, 2026.** Funds awarded for Year 1 must be expended by September 30, 2027.

<b>July 2, 2026</b>	Notice of Funding Opportunity Issued
<b>July 9, 2026</b>	Deadline to Submit Written Questions <a href="#">Submit Questions Here</a>
<b>July 17, 2026</b>	Answers to Written Questions Posted
<b>August 14, 2026</b>	Application Submission Deadline for Year 1 Funds
<b>Mid August 2026</b>	Application Evaluation Period for Year 1 Funds

<b>Late August</b>	Notice of Intent to Contract Announcements
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Please apply for this NOFO [here](#)

Applicants will be required to provide the following information **AND** attach a Statement of Work compliant with Appendix B. Statement of Work Requirements.

Information required for application:

- Organization Name
- Organization Type
- Program Contact Name
- Program Contact Phone Number
- Program Contact Email Address
- Physical Address, City, State, Zip Code
- Tax Identification Number
- Louisiana Department of Revenue Number
- Justification for rural designation in alignment with the RHTP definition and methodology
- Parishes Served
- Brief Description of Proposed Project
- Total amount of funds requested

**F. Required Registrations for Applicants**

All organizations are required to provide the following documents if chosen for award:

- a. Federal Tax Identification Number
- b. IRS Form W-9 (Taxpayer Identification and Certification)
- c. Louisiana Vendor Profile Data Form. State of Louisiana Self-service Request for Vender <https://www.doa.la.gov/Pages/osrap/VendorPayments.aspx>
- d. Board Resolution designating signature authority (if applicable)
- e. Disclosure of Ownership from the Louisiana Secretary of State (if applicable)
- f. Applicable Louisiana Department of Health License (current and in good standing)
- g. SAM (System for Award Management) Number and current expiration date

**G. Application Review Information and Notice of Award**

Submission of an application does not guarantee funding.

Applications will be evaluated using a standardized scoring framework:

<b>Criteria</b>	<b>Max Points</b>
Documented Need & Rural Impact	30
Project Feasibility & Readiness	25
Impact on Access, Quality, and Outcomes	25
Sustainability & Long-Term Benefit	10
Budget & Cost Effectiveness	10
<b>Total</b>	<b>100</b>

Optional bonus points may be awarded for projects:

- Addressing Priority Funding Areas
- Serving high-poverty or high-disparity populations
- Expanding essential services

Scoring will be conducted through structured survey-based review tools to ensure consistency and transparency.

LDH may request additional information, clarifications, or supporting documentation during the application review process. Eligible applicants will receive a formal Notice of Intent to Contract outlining the Cooperative Endeavor Agreement process and requirements. LDH reserves the right to approve, partially fund, defer, or deny any application based on available resources and program considerations.

## Appendix A

### Overview Information

<b>Participating Organization:</b>	Louisiana Department of Health, Office of Rural Health Transformation and Sustainability (LDH) <a href="http://www.ldh.la.gov/page/rural-health-transformation-program">www.ldh.la.gov/page/rural-health-transformation-program</a>
<b>Funding Opportunity Title:</b>	Rural Health Transformation Program (RHTP) Regional Care Conveners and Navigation Networks Program, Budget Year 1
<b>Announcement Type:</b>	RHTP – New Grants
<b>Federal Award Identification (CFDA) Number:</b>	RHTCMS332085
<b>Federal Award Amount:</b>	RHTP Budget Year 1: \$208,374,447.57
<b>Period of Performance:</b>	12/29/2025 through 10/30/2030 Project Periods are determined on a case-by-case basis
<b>Funding Opportunity Purpose:</b>	The primary purpose of the Regional Care Conveners and Navigation Networks Program is to develop regional care conveners and navigation networks to help align providers and reduce fragmented care delivery across acute care, behavioral health, and social services in rural communities. This program is authorized by Section 71401 of Public Law 119-21.
<b>Application Types Accepted:</b>	New Applications
<b>Due Dates:</b>	To be considered for Year 1 Funds (August 1, 2026-September 30, 2027), applications must be received no later than August 14, 2026.
<b>Funds Available:</b>	Care Convener and Navigation Networks Budget Year 1: \$5,200,000.00

## Appendix B.

### Statement of Work Requirements

Formatting requirements:

- Font: Use Times New Roman or Arial, size 11 or 12-point font; 10-point font is considered acceptable for tables
- Margins: Maintain one-inch margins on all sides
- Line spacing: Use single-spaced or 1.5-spaced text
- Page numbers: Number all pages consecutively in the bottom right corner

**Section I. Applicant Information:** Include information on the applicant’s organization, physical location, number of rural residents served annually, services offered, and other relevant information.

**Section II. Program Description:** The program description should include:

1. A statement of need supported by data that includes an overview of the organization’s readiness to begin the project including partners involved
2. A project description and project plan outlining the project’s scope, objectives, tasks, milestones and resources. Attachments with additional details can be included.
3. A feasible sustainability plan

**Section III. Performance Metrics & Outcomes:** Proposals must clearly define performance metrics and the measurable outcomes expected to assess program success. Grantees will be required to report quarterly on progress to meet the project milestones and outcome measures as part of their reporting obligations, including but not limited to the following:

- Number of new access points per year
- % members with completed annual wellness visit
- Rate of avoidable hospital admissions and readmissions
- Emergency department utilization for members
- Average total cost of care for members
- SDOH data and outcomes
- Number of medicaid, school-age children impacted in years 1-3
- Number of participating providers using TIN/NPI

**Section IV. Projected Budget Schedule and Budget Narrative**

Applicants must provide a detailed projected budget schedule and accompanying budget narrative that clearly identifies all proposed project costs, implementation timelines, and funding sources.

The budget narrative should describe how each expense directly supports the proposed telehealth infrastructure project, aligns with the goals and objectives of the Rural Health Transformation Program (RHTP), and represents an allowable, reasonable, and necessary use of funds.

Applicants must clearly identify grant-funded expenses, matching contributions, and any additional leveraged funding sources.

See attached [RHTP\\_Budget\\_Workbook\\_Care Conveners.xls](#)