

Supporting Statement A
Rural Health Transformation (RHT) Program Reporting
CMS-10949, OMB 0938-TBD (New)

The contents of this Supporting Statement and the associated attachments have been reviewed to ensure that they are consistent with the Trump administration's policies, goals, and objectives.

Background

On July 4, 2025, President Trump signed Public Law 119-21, which the Centers for Medicare & Medicaid Services (CMS) refers to as the "Working Families Tax Cut" (WFTC) legislation, into law. The legislation authorized the Rural Health Transformation (RHT) Program, marking a significant federal investment of \$50 billion over five years and is designed to empower as many as 50 State awardees to catalyze transformative improvements within their rural healthcare ecosystems. The principal objective is to enhance healthcare access, quality, and outcomes through innovative, system-wide change, thereby investing in the health of rural communities for future generations.

Funding for approved State awardees is determined through a formal scoring and allocation process. The financial architecture of the program is composed of two primary streams: baseline funding, distributed equally among all awardees, and performance-based workload funding, which is allocated based on the scoring of specific rural and technical score factors within each State's application and their subsequent annual performance.

To ensure continued eligibility and funding, State awardees must adhere to key program requirements, including the submission of annual and quarterly reports. This data serves multiple critical functions: it details State progress against their goals, informs the annual rescoring process used to determine funding for subsequent years, and provides valuable data for broader program analysis. CMS will award funding in five budget periods:

- Budget period 1: December 29, 2025 through October 30, 2026 (10 months)
- Budget period 2: October 31, 2026 through October 30, 2027
- Budget period 3: October 31, 2027 through October 30, 2028
- Budget period 4: October 31, 2028 through October 30, 2029
- Budget period 5: October 31, 2029 through October 30, 2030

CMS will re-calculate each approved State's technical score and corresponding workload funding amount for each subsequent budget period based on the information and data the approved State provides in the required annual reporting each year.

In these reports, States will provide updates on programmatic milestones, report on performance and evaluation metrics, and detail the expenditure of funds. CMS will provide States with relevant guidance on how to complete the annual and quarterly reports including a checkpoint guidance document, sample project plan template, and informational webinars.

Overall, we estimate an annual burden of 20,000 hours across all 50 states at a cost of \$1,709,200 (see section 12 for details).

A. Justification

1. Need and Legal Basis

This information collection is grounded in the RHT Program's authorizing legislation under Section 71401 of Public Law 119-21, the WFTC legislation signed into law on July 4, 2025, and added to 42 U.S.C. 1397ee, Section 2105 of the Social Security Act.¹ This framework is designed to promote robust oversight, fiscal accountability, and data-driven performance management across all awardees. Adherence to these reporting mandates is a condition of continued eligibility and is fundamental to the integrity and success of the program.

2. Information Users

The primary purpose of this information collection is to support the effective administration, oversight, and assessment of the RHT Program. The data will be used to monitor State awardees' progress against their approved workplan milestones and to monitor compliance with the terms and conditions of the award. The information is essential for the annual reassessment of each State's technical score, which directly determines their performance-based workload funding for subsequent budget periods. This reporting provides visibility into how programmatic funds are spent by States, including allocation by subrecipients (e.g., State agencies, Tribal entities, etc.), distribution across initiatives, and compliance with program-specific limitations. Additionally, in the initial Annual Report, States will provide the definition of a "rural area" they used for the purposes of determining the most appropriate entity type in their reporting. States will use this same definition to determine rural entities throughout the duration of the RHT Program; therefore, it does not need to be provided in subsequent reporting. Lastly, State-reported data provides a valuable basis for broader program analysis, enabling CMS to identify trends, share lessons learned, and inform future technical assistance.

The information will be used primarily by CMS program staff and leadership who are responsible for the administration and oversight of the RHT Program. The data collection and review methodology consists of two main cycles: a quarterly process to monitor short-term progress and a formal annual reassessment. The annual reassessment involves the calculation of performance scores, which serve as the basis for funding allocation decisions as detailed above.

3. Use of Information Technology

Awardees must submit all required information for the first annual reporting period, which covers December 29, 2025, to July 31, 2026. Submissions must be made in the provided standardized Microsoft Excel format and uploaded to GrantSolutions no later than August 31,

¹ SEC. 71401 of Public Law 119-21, the Big Beautiful Bill, signed into law on July 4, 2025, and added to 42 U.S.C. 1397ee, Sec. 2105 of the Social Security Act.

2026*.

For all subsequent reporting periods, the program will transition to a dedicated web-based reporting tool, which is currently in early development by the CMCS-MDCT Team. Please note submission to GrantSolutions will still be required by the program and State awardees for each subsequent year of the year program, as the platform serves as the official system of record.

Please note that instructional verbiage within the web-based tool (MDCT RHTP) may undergo minor refinements based on ongoing user testing and feedback. Any such adjustments will be strictly limited to improving clarity and user experience, and will not alter the nature, scope, or substance of the actual data elements or information collection from respondents. This collection does not require a signature from respondents.

4. Duplication of Efforts

This information collection will not duplicate any other reporting effort, as the information cannot be obtained from another source.

5. Small Businesses

This collection does not impact small businesses or other small entities.

6. Less Frequent Collection

Per the RHT Program's Notice of Funding of Opportunity (NOFO), CMS will re-calculate each approved State's technical score and corresponding workload funding amount for each subsequent budget period based on the information and data the approved State provides in the required annual reporting each year.² The data gathered from this annual reporting is critical as it is used directly to determine funding for State awardees in subsequent years.

Quarterly reporting is also required to track progress on State initiatives and monitor performance and compliance. To reduce burden on States, only three quarterly reports are due each year, as the annual report is submitted in place of the fourth quarterly report. Data provided in the quarterly reports rolls up into and informs the annual report.

7. Special Circumstances

- Prepare a written response to a collection of information in fewer than 30 days after receipt of it;
 - Please note the projected 190- to 210-day timeframe for the PRA clearance process may jeopardize the ability of State awardees to submit the first Annual Progress Report by its August 31, 2026* deadline. Under this timeline, the response period for awardees would be reduced to less than 30 days. In the event the PRA process requires the full 210 days, the response window would be eliminated entirely, as

² NOFO, pg. 14

approval would occur on the same day the report is due.

- Retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years;
 - The RHT Program spans 5 years, therefore, progress reports and other program data will be retained for more than three years.

Otherwise, there are no special circumstances that would require an information collection to be conducted in a manner that requires respondents to:

- Report information to the agency more often than quarterly;
- Submit more than an original and two copies of any document;
- Collect data in connection with a statistical survey that is not designed to produce valid and reliable results that can be generalized to the universe of study;
- Use statistical data classification that has not been reviewed and approved by OMB;
- Include a pledge of confidentiality that is not supported by authority established in statute or regulation that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or
- Submit proprietary trade secrets, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.

8. Federal Register/Outside Consultation

The 60-day notice was published in the Federal Register on March 11, 2026 (91 FR 11978). A total of 11 unique and in scope public comments were received and are attached to this collection of information requests along with our response to such comments.

In summary, we CMS increased our burden estimates to be commensurate with the required RHT Program reporting activities. The increased burden estimates also account for the addition of reporting fields intended to ensure State tracking and oversight of subrecipient information and monitoring of program-specific limitations.

Other comments indicated a general desire for more reporting guidance, an interest in capturing subrecipient information, and a consideration for more resources to help conduct reporting. To address this, CMS will provide reporting resources such as, guidance documents, instructions, and webinars to help States complete reporting.

The 30-day notice was published in the Federal Register on July 6, 2026 (91 FR 41039). Comments must be received on/by August 5, 2026.

Non-Substantive Changes

To ensure clarity and alignment for the upcoming reporting period, the following non-substantive changes were made to the State reporting guidance and materials. These updates primarily clarify submission procedures, support respondents in crafting and organizing evidentiary responses, and align updated dates and definitions across all respective documentation. These changes provide additional clarifying information and are not expected to alter the burden estimate for respondents.

The changes are detailed below:

1. Updates to Reporting Guidance & Submission Process

These changes apply to the document previously titled “RHTP State Reporting Expectations Guide V7,” which has been retitled “PRA Resubmission State Reporting Expectations Guide 07.17.26.”

- **Due Date Extension:** The due date for the RHT Program Annual Report has been moved from August 30, 2026, to Monday, August 31, 2026, by 11:59 p.m. EDT. Because August 30, 2026, falls on a Sunday, the RHT Program Annual Report will be due on Monday, August 31, 2026.
- **Report Submission Instructions:** To establish a uniform protocol, the guidance is being updated to specify that all Annual Reports must be submitted exclusively via the "Application Message" function within the Non-Competing Continuation (NCC) application kit application on GrantSolutions.
- **Evidentiary Documentation:** The guidance has been updated to help respondents gather their evidentiary information and streamline the review and upload process. Respondents are encouraged to consolidate evidence either by checkpoint across all initiatives, or into a single Master PDF organized by initiative and checkpoint (uploading Excel files in their native format and referencing them in the PDF). To manage the system's 5-file limit per message, please use standardized subject lines for multiple submissions (e.g., "RHT Program Annual Report_1 of 3").
- **Figure 2 Description Update:** In the "Initiative Form," the description for checkpoint 2.2 has been updated to "Achieve at least one *post-launch* milestone."
- **MDCT Reporting Tool Section:** The "Use of Funds" form and corresponding guidance screenshots will be updated to reflect the reporting template form title of “Obligated and Spent Funds.”

2. Updates to the PRA Resubmission Reporting Template

The following changes apply to the Excel reporting template previously titled “PRA Resubmission Reporting Template_06.12.26.xlsx,” which has been updated and retitled “PRA Resubmission Reporting Template_07.16.2026.xlsx”:

- **Checkpoint 0.2 “Submit project plan to CMS”:** The guidance for checkpoint 0.2 has been revised to remove the sentence: "CMS will provide a list of milestones identified from the

approved State application." Further clarification added for defining "industry-standard project plan."

- Checkpoint 1.2 "Launch Initiative" & Evidence Progression: Updated guidance clarifies that an Executed Contract is acceptable evidence for Checkpoint 1.2.
- Checkpoint 2.1 "Continued Initiative Activities": Updated evidence and guidance to specify an in-progress project plan or similar implementation tracking document is sufficient for this checkpoint.
- Checkpoint 2.2 "Achieve at least one post-launch milestone": Updated evidence and guidance to specify an in-progress project plan or similar implementation tracking document is sufficient for this checkpoint.
- Checkpoint 3.2 "Achieve at least one post-launch milestone": Updated evidence and guidance to specify an in-progress project plan or similar implementation tracking document is sufficient for this checkpoint.
- Checkpoint 5.2 "Achieve at least one post-launch milestone": Updated evidence and guidance to specify a project plan or similar implementation tracking document is sufficient for this checkpoint.
- Alignment for Checkpoint 2.2: In the initiative-specific tabs, the language for checkpoint 2.2 has been updated to "Achieve at least one post-launch milestone."
- Entity Type Definition Update: To provide additional clarity, the entity type list has been updated to leverage the refined definition for Non-Rural Provider: "All licensed healthcare professionals and facilities that are not located in a designated rural area and are not a health system."

3. Obligated and Spent Funds Reporting Guide

These changes apply to the document previously titled "PRA Resubmission Obligated and Spent Funds Reporting Guide 06.12.2026 v2," which has been updated and retitled "PRA Resubmission Obligated and Spent Funds Reporting Guide 07.16.2026.docx":

- The core instructions remain unchanged, with modifications limited to minor updates to illustrative examples and supplementary clarifications.

4. RHTP MDCT Reporting Tool:

Development of the RHTP MDCT Reporting Tool is ongoing, with a tentative deployment targeted for November 2026 to facilitate State quarterly reporting. During the upcoming User Acceptance Testing (UAT) and training phases, minor, non-substantive adjustments may be made to the system. Crucially, these updates will be strictly limited to user experience enhancements and interface clarifications; there will be no changes to the actual data elements collected. CMS will report any such updates for subsequent approval closer to the official deployment date.

9. Payments/Gifts to Respondents

Payments or gifts will not be provided to respondents.

10. Confidentiality

Assurances of confidentiality will not be provided to respondents. The information being requested for this data collection is intended to be publicly available upon request.

11. Sensitive Questions

There are no sensitive questions associated with this collection. Specifically, the collection does not solicit questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private.

12. Burden Estimates

Wage Estimates

To derive average costs, we are using data from the U.S. Bureau of Labor Statistics' May 2025 National Occupational Employment and Wage Estimates for all salary estimates (http://www.bls.gov/oes/current/oes_nat.htm). In this regard, the following table presents BLS' mean hourly wage, our estimated cost of fringe benefits and other indirect costs (calculated at 100 percent of salary), and our adjusted hourly wage.

Occupation Title	Occupation Code	Mean Hourly Wage (\$/hr)	Fringe Benefits and Other Indirect Costs (\$/hr)	Adjusted Hourly Wage (\$/hr)
Social and Community Service Managers	11-9151	42.73	42.73	85.46

As indicated, we are adjusting our employee hourly wage estimates by a factor of 100 percent. This is necessarily a rough adjustment, both because fringe benefits and other indirect costs vary significantly from employer to employer, and because methods of estimating these costs vary widely from study to study. Nonetheless, we believe that doubling the hourly wage to estimate total cost is a reasonable estimation method.

Collection of Information Requirements and Associated Burden Estimates

State awardees are required to complete the data collection quarterly and annually. The fourth quarterly report for each will be waived in place of the annual report.

Annual Reports The reporting template will be disseminated to all 50 State awardees. The annual reporting periods and due dates are listed in Table1, below.

We estimate it will take 160 hours at \$85.46/hr for a Social and Community Service Manager to complete each annual report. In aggregate, we estimate an annual burden of 8,000 hours (50

States x 160 hr/State) at a cost of \$683,680 (8,000 hr x \$85.46/hr).

Table 1. Annual Progress and Final Report Due Dates

Report	Reporting Period Start	Reporting Period End	Due Date
Annual Report # 1	December 29, 2025	July 31, 2026	August 31, 2026*
Annual Report # 2	August 1, 2026	July 31, 2027	August 30, 2027
Annual Report # 3	August 1, 2027	July 31, 2028	August 30, 2028
Annual Report # 4	August 1, 2028	July 31, 2029	August 30, 2029
Annual Report # 5	August 1, 2029	July 31, 2030	August 30, 2030
Final Report	December 29, 2025	October 30, 2030	February 27, 2031

* Please note: the established program Terms and Conditions and previous communications stated that programmatic reporting is due on August 30. Because August 30, 2026, falls on a Sunday, the RHT Program Annual Report will be due on Monday, August 31, 2026.

Quarterly Reports The reporting template will be disseminated to all 50 State awardees. The quarterly reporting periods and due dates are listed in Table2, below.

We estimate it will take 80 hours at \$85.46/hr for a Social and Community Service Manager to complete each quarterly report. In aggregate, we estimate an annual burden of 12,000 hours (50 States x 80 hr/State x 3 reports/year) at a cost of \$1,025,520 (12,000 hr x \$85.46/hr).

The fourth quarterly report for each will be waived in place of the annual report.

Table 2. Quarterly Progress Report Due Dates

Report	Reporting Period Start	Reporting Period End	Due Date
Quarterly Report # 1	August 1, 2026	October 30, 2026	November 29, 2026
Quarterly Report # 2	October 31, 2026	January 30, 2027	March 1, 2027
Quarterly Report # 3	January 31, 2027	April 30, 2027	May 30, 2027

Quarterly Report # 4	August 1, 2027	October 30, 2027	November 29, 2027
Quarterly Report # 5	October 31, 2027	January 30, 2028	February 29, 2028
Quarterly Report # 6	January 31, 2028	April 30, 2028	May 30, 2028
Quarterly Report # 7	August 1, 2028	October 30, 2028	November 29, 2028
Quarterly Report # 8	October 31, 2028	January 30, 2029	March 1, 2029
Quarterly Report # 9	January 31, 2029	April 30, 2029	May 30, 2029
Quarterly Report # 10	August 1, 2029	October 30, 2029	November 29, 2029
Quarterly Report # 11	October 31, 2029	January 30, 2030	March 1, 2030
Quarterly Report # 12	January 31, 2030	April 30, 2030	May 30, 2030
Quarterly Report # 13	August 1, 2030	October 30, 2030	November 29, 2030

Please note: Any deadline falling on a weekend will revert to the next business day.

Burden Summary

The total annual respondent burden is 20,000 hours across all 50 states at a cost of \$1,709,200.

Requirement	Number of Respondents	Total Responses	Time per Response (hr)	Total Time (hr)	Labor Cost (\$/hr)	Total Annual Cost (\$)
Annual Progress Report	50	50 (50 x 1 report/year)	160	8,000	85.46	683,680
Quarterly Progress Reports	50	150 (50 x 3 reports/year)	80	12,000	85.46	1,025,520

TOTAL	50	200	varies	20,000	85.46	1,709,200
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Collection of Information Instruments and Instruction/Guidance Documents

These activities are to be completed via standardized Excel forms in budget period 1 and submitted through GrantSolutions, the official grants management platform for the RHT Program. To allow CMS time to recalculate technical scores and associated funding, the annual progress report is due approximately 60 days before the end of each budget period. For all subsequent reporting periods, the RHT Program will transition from Excel forms to a dedicated web-based reporting tool. This tool is currently in early development by the CMCS-Medicaid Data Collection Tool (MDCT) Team and will enable reports to be exported for their subsequent upload to GrantSolutions.

To enable the submission of the first quarterly report, the new web-based tool is tentatively planned to go live by the report's due date of November 29, 2026. Please note, there is no change in information collected in this reporting period and subsequent reporting periods. The quarterly reporting periods are as follows: August 1-October 30, October 31-January 30, and January 31-April 30. To reduce reporting burden with the annual progress reports, there is no quarterly progress report submission for May 1-July 31. Please note that this timeframe is incorporated into the annual reporting period.

- RHT Program Reporting Template (New)

The reporting template is utilized for both the quarterly and annual reports. The quarterly report content is a subset of the annual report.

- RHT Program Project Plan Template (New)
- RHT Program Reporting Expectations Guide (New)
- RHT Program Funds Reporting Guide (New)
- Screenshots (New)

13. Capital Costs

CMS does not anticipate that any capital costs will be required for this collection.

14. Cost to Federal Government

The table below shows estimates of the average annual cost of the project to the Federal government.

CMS staff costs are based on OPM's 2025 GS wage tables³ and account for data collection, quarterly review of data, assessing need for FMAP reductions, and comparison to Advanced Planning Documents (APDs). The average annual cost accounts for a 3.3% annual inflation rate

and assumes the data collection will be active through federal fiscal year 2031, 5 years total, however this is subject to change based on budgetary decisions and the rate at which States come into compliance with RHT Program requirements.

Category	Title	Rate (\$/hr)	Avg Annual Hours	Annual Cost (\$)
CMS Staff	Division Director (GS-15, step 10)	184.32 (\$92.16/hr x 2)	5	921.60
CMS Staff	Deputy Division Director (GS-14, step 10)	156.70 (\$78.35/hr x 2)	10	1,567
CMS Staff	Data Analyst (GS-13, step 10)	132.60 (\$66.30/hr x 2)	160	21,216
CMS Staff	Data Analyst (GS-13, step 10)	132.60 (\$66.30/hr x 2)	160	21,216
CMS Staff Subtotal				44,921
Contractors	Reporting and Data Support (6 staff)	120	1200	144,000
TOTAL Federal Cost				188,921

Accounts for a 3.3% annual inflation rate and assumes collection will be active through FFY 2030 (5 years total)

^ All CMS staff costs assume a step level of 5.

15. Changes to Burden

Not applicable. Since this is a new information collect request, there are no program changes or adjustments.

16. Publication/Tabulation Dates

The results of this collection will not be published.

17. Expiration Date

The OMB control number and expiration date will be displayed on the first page (top-right

corner) of each instrument.

18. Certification Statement

There is no exception to the certification statement identified in Item 19, "Certification for Paperwork Reduction Act Submissions," of OMB Form 83-1.

B. Collection of Information Employing Statistical Methods

This collection of information does not employ statistical methods.



RURAL HEALTH TRANSFORMATION (RHT) PROGRAM:

OBLIGATED AND SPENT FUNDS REPORTING GUIDE

Last Updated: ~~June 12~~ July 17,
2026



Table of Contents

Introduction	1
Overview	32
Entering First-Tier Entities	32
Summary Columns	43
Use of Funds Tab	75
Overview	75
Obligation Aggregation and Splitting	76
Program-Specific Limitations	12 10
Use of Funds Tab Glossary	15 12
Downstream Obligations Tab	16 13
Overview	16 13
Structure.....	16 13
Reporting Instructions	17 14
Distribution Reporting	22 19
Overview	22 19
Structure.....	22 19
Reporting Instructions	23 20
Considerations for Future Reporting Periods	24 21
Appendix A: Recording a New Obligation or Spend Event	25 22
Appendix B: Conditional Formatting Rules.....	26 23
First-Tier Entities Tab.....	27 23
Use of Funds Tab	27 24
Downstream Obligations Tab	30 26
Distribution Reporting Tab.....	31 28
Appendix C: Table of Figures	33 30



Introduction

The Obligated and Spent Funds Reporting section of the Excel Reporting Template includes four tabs that must all be completed and submitted for each Annual and Quarterly Report: First-Tier Entities, Use of Funds, Downstream Obligations, and Distribution Reporting. The Entity Type Guidance tab is for reference only, to support categorization of subrecipients and contractors. This document provides guidance on how to complete these reporting requirements.

General Guidance

On the Obligated and Spent Funds Reporting tabs, States should only fill in editable cells. Light blue cells are protected because they contain formulas, so States do not need to edit them for any reason. For all Obligated and Spent Funds Reporting tabs, the State is expected to fill in information for all unprotected (white) cells for each row of information, except as noted below.

The reporting for a given expense should be completed in the order that the tabs appear in the Excel Reporting Template. Some information will be automatically populated in subsequent tabs. For example, the user must list relevant subrecipient and contractor names on the First-Tier Entities tab for them to appear in the dropdown on the Use of Funds tab. Users must also define the initial obligations to each first-tier entity on the Use of Funds tab before they may be allocated in more detail on the Downstream Obligations tab. The amount of dollars spent against the obligations listed on the First-Tier Entities or Downstream Obligations tabs must be populated to record further distribution of those dollars on the Distribution Reporting Tab.

Throughout the guide, “entity” is used to broadly refer to the subrecipients and contractors that receive obligated or spent funds related to the RHT Program. For the purposes of the Obligated and Spent Funds Reporting process, both subrecipients and contractors are treated the same way in terms of the State awardee’s reporting requirements. This guide uses “tier” to distinguish between entities with different numbers of degrees of separation from the State awardee in terms of their financial relationship with respect to RHT Program funds. For example, a “first-tier entity” would be [an](#) entity that is allocated obligated or spent funds directly from the State awardee. If a first-tier entity either acts as a pass-through entity to obligate funds to a subrecipient or spends money on a contractor, that subrecipient or contractor would be a “second-tier entity”, etc.

When a new financial relationship pertaining to RHT Program obligated or spent funds is created or identified by the State awardee, it must be reflected in the Obligated and Spent Funds Reporting section of the Excel Reporting Template. Appendix A includes a detailed



process that States may reference to help determine where the information should be captured.



First-Tier Entities Tab

Overview

This tab captures key information about first-tier entities and serves two functions. First, the State must list all of their first-tier entities in column C and assign an entity type for each one in column D. The list of first-tier entities provided in column C of the First-Tier Entities tab will then populate a dropdown list in the Use of Funds tab. Second, the remaining columns on this tab will be automatically populated to display information about the first-tier entities based on the other tabs in the Obligated and Spent Funds Reporting section that may be used by States and CMS.

Entering First-Tier Entities

In column C, enter the name of every entity that directly received funds from the State awardee and then use the dropdown in column D to select the most appropriate entity type for the first-tier entity. Use the descriptions on the Entity Type Guidance tab to assist in determining the most appropriate entity type.

Many types of organizations and entities may be a first-tier entity, including specific agencies within the State Health and Human Services Department, other government agencies, specific healthcare providers or health systems, contractor organizations, etc. See Figure 1 for the list of example first-tier entities of State XY that will be referenced throughout the remainder of this document.

Figure 1: First-Tier Entity Data Entry

Entity ID	First-Tier Entity (Subrecipient or Contractor)	Entity Type
1	XXXX	Health System
2	XY Workforce Development Board	State Labor Agency
3	XXXX Tribe	Tribal Government
4	XXXX Technologies	Other Health IT Vendors or Health IT Consultant
5	XYZ Supplier	Other
6	AAA Contractor	Other Consulting/Contractor
7	XY State Health Department	State Health and Human Services Agency
8	XYZ Agency	State Health and Human Services Agency



When a first-tier entity name is populated, it will automatically be assigned an Entity ID. These Entity IDs are used on the Downstream Entities and Distribution Reporting tabs.

First-tier entities should be entered in sequential rows (do not leave blank rows) and should not be re-ordered or removed. Since the Entity IDs are dynamically assigned, moving or deleting an entity from this list could create issues for the data on other linked tabs. A State may enter a first-tier entity on this tab even if no funds have yet been provided to the entity or if funding has been retracted after an obligation is made. A first-tier entity should not appear more than once in the First-Tier Entities tab. Even if a first-tier entity receives multiple payments it should only appear once. The additional payment information should be recorded in the Use of Funds tab.

The First-Tier Entities tab supports up to 300 line items; States should contact their PO for additional guidance if they exceed this number of first-tier entities.

Summary Columns

The remaining light blue (protected) columns on this tab provide summary information for each first-tier entity based on the data that is entered on other linked tabs. This information is automatically populated and for reference only; States may find this information helpful for completing the Downstream Obligations tab or validating the disaggregated information entered on the Use of Funds tab.

Figure 2: First-Tier Entities Funds Received

Entity ID	...	Obligated Funds by Budget Period					Total Obligated Funds	Obligated Funds Available
		Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5		
1	...	\$20,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$20,000,000.00	\$0.00
2	...	\$10,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,000,000.00	\$0.00
3	...	\$29,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$29,000,000.00	\$4,826,500.00
4	...	\$18,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18,000,000.00	\$15,600,000.00
5	...	\$72,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$72,000,000.00	\$0.00
6	...	\$10,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,000,000.00	\$10,000,000.00
7	...	\$6,300,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,300,000.00	\$5,931,574.87
8	...	\$3,000,000.00	\$3,000,000.00	\$0.00	\$0.00	\$0.00	\$6,000,000.00	\$0.00

The first six columns (E through **HJ**) of this section display the sum of funds that have been obligated to the first-tier entity in each budget period as well as the sum across all budget periods. The Obligated Funds Available column calculates the amount of funds that are available for the entity to transfer to a downstream entity via a sub-obligation. This is



calculated as the total funds obligated to the first-tier entity, less any funds that are already sub-obligated to a downstream entity (reported on the Downstream Obligations tab) and less any funds that have already been spent on the entity by the State awardee.

$$\text{Obligated Funds Available} = \text{Total Obligated Funds} - \text{Sum of Downstream Sub-Obligations} - \text{Sum of Spent Funds Against Obligation}$$

Note: These Obligated Funds Available could ~~be~~ either be funds that the entity has yet to sub-obligate to a downstream entity at the time of reporting, the amount of unspent obligated funds for an entity (such as a contractor) working directly with the State awardee, or could be funds for which the first-tier entity is the terminal entity, ~~but not all obligations.~~ In conclusion, if the value in this column is greater than zero that means there is currently an obligation from the State have to that entity that has been neither fulfilled, such as a contractor working directly with the State awardee nor sub-obligated. This column is meant to be a useful tool for the States to determine how much funding is eligible to ~~the~~ be sub-obligated by the first-tier entity on the Downstream Obligations tab. Several example scenarios for State XY are described below:

- Entity #1 is a Health System that was obligated \$20 million. State XY has added the full \$20 million to its general ledger and the health system has received the funds, making them spent funds. Because the spend event has already occurred in this example, any distributions that the health system makes to its component hospitals will be made on the Distribution Reporting tab and XXXX Health System will not have any sub-obligations on the Downstream Obligations tab.
- Entity #2 is a State Labor Agency that was obligated \$10 million and has already sub-obligated the entire sum based on entries on the Downstream Obligations tab. Entity #2 therefore has \$0 of Obligated Funds Available.
- Entity #3 is XXXX Tribe, a Tribal Government entity that was obligated ~~\$3229~~ million.
 - In contrast to Entity #2, XXXX Tribe has only obligated \$24.08 million of its obligation on the Downstream Obligations tab.
 - Additionally, XXXX Tribe has set aside \$200,000 of its obligation to be spent internally on program administration expenses on the Use of Funds tab. At the time of reporting, \$93,500 has been spent by State XY, added to the State's general ledger, and sent directly to XXXX Tribe for these administrative costs.
 - Altogether, XXXX Tribe therefore has Obligated Funds Available of ~~\$3229~~ million – \$24.08 million – \$93,500 = \$4,826,500. This is a combination of the remaining \$106,000 that they expect to receive as Spent Funds from State XY (to cover administrative expenses) and the remaining \$4.72 million that they intend to sub-



obligate to downstream entities, but those sub-obligations have not been defined at the time of reporting.

- Entity #4 is a health technology contractor that will be the terminal entity of those funds (i.e., no sub-obligations will be created). In this example, State XY will spend funds as it pays XXXX Technologies' invoices, increasing the value of the Funds Spent Against Obligation column over time. At the time of reporting \$2.4 million has been spent against the \$18 million obligation (indicated on the Use of Funds tab), resulting in Obligated Funds Available of \$15.6 million.
- Entity #7 is the State Health Agency itself. In order to track funds that are spent internally within the State awardee organization (such as on new staff hired to provide RHT Program oversight activities), it must be entered as a separate entity. The total amount budgeted (obligated) for this purpose is \$6.3 million and \$368,425.13 has been spent by State XY (on wages, etc.) for this purpose at the time of reporting (indicated on the Use of Funds tab), resulting in Obligated Funds Available of \$5,931,574.87.

The final two columns of the First-Tier Entities tab display the initiatives and use of funds categories for which the first-tier entity has received funding, as shown in Figure 3. These columns are automatically populated based on information provided by the State on the Use of Funds tab.

Figure 3: First-Tier Entities Initiatives and Use of Funds Categories

Entity ID	...	Initiatives	Use of Funds Categories
1	...	1	Behavioral Health, Provider Payments
2	...	1, 3	Innovative Care, Training and Technical Assistance, Workforce
3	...	2, 3	Appropriate Care Availability, N/A (Program Administration Expense), Provider Payments
4	...	4	Consumer Tech, IT Advances
5	...	1, 2, 3	Capital Expenditures and Infrastructure
6	...	All	N/A (Program Administration Expense)
7	...	All	N/A (Program Administration Expense)
8	...	3	IT Advances



Use of Funds Tab

Overview

Line items in the Use of Funds tab represent aggregated, split, or exact obligations that the State has made to their first-tier entities. Obligations in the Use of Funds tab can be aggregated or split on four variables: first-tier entity (selectable from a dropdown that is populated based on the First-Tier Entities tab), initiative number, budget period, and use of funds category.

If multiple obligations are made using one budget period's award to the same first-tier entity, initiative, and use of funds category, then those obligations can be aggregated into one line item. Conversely, if one obligation is split among multiple first-tier entities, initiatives, budget period awards, or use of funds categories then it should be split into multiple line items. Examples of aggregating and splitting obligations into line items can be found in the Obligation Aggregation and Splitting section.

Additionally, the Use of Funds tab has fields for the dollar value of the obligation that is attributable to program-specific limitations¹ (administrative costs, capital expenditure and infrastructure, provider payments, EMR replacement, and rural tech catalyst fund). For each line item, States should enter the amount that is attributable to each program-specific limitation or attest that no program-specific limitations apply. Examples of attributing funds to program-specific limitations can be found in the Program-Specific Limitations section.

Note that the Obligation ID column is not editable and is pre-populated. The Obligation IDs are the State's two-letter abbreviation followed by a whole number; each Obligation ID is unique to a line item. The Obligation ID is not used elsewhere in the Excel Reporting Template.

Entries in the Use of Funds tab should be entered in sequential rows (do not leave blank rows). The Use of Funds tab supports up to 2,500 line items. States should contact their PO for additional guidance if they are at risk of exceeding this number of line items.

A glossary of each field in the Use of Funds tab can be found in the Use of Funds Glossary section.

Obligation Aggregation and Splitting

The examples below demonstrate how to split obligations to each first-tier entity by initiative number, budget period, and use of funds category. Note that obligations

¹ Notice of Funding Opportunity pg. 19.



submitted for the first Annual Report will all be tied to the first budget period’s award as a State may not obligate funds from awards that they have not received.

1) **Similar Obligations**

If two \$1.5 million obligations were made using the first budget period’s award for Initiative #3 to the same entity (XYZ Agency) and only one use of funds category applies (IT Advances), then these obligations could be combined into one line as follows:

Figure 4: Similar Obligations Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds
XY24	\$3,000,000.00	\$0.00	XYZ Agency	Transfer to XYZ Agency for funding pharmaceutical IT improvements	3	1	IT Advances

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2) Multiple Initiatives

If a \$72 million obligation was made using the first budget period's award to one entity (XYZ Supplier) and only one use of funds category applies (Capital Expenditures and Infrastructure) but the obligation will be spread between three initiatives, then the obligation should be split into three lines according to how much money is attributable to each initiative. If \$38 million is budgeted for Initiative #1, \$10 million for Initiative #2, and \$24 million for Initiative #3, the three lines would be as follows:

Figure 5: Multiple Initiatives Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds
XY16	\$38,000,000.00	\$38,000,000.00	XYZ Supplier	Capital expenditures on infrastructure renovations for XXXX.	1	1	Capital Expenditures and Infrastructure
XY17	\$10,000,000.00	\$10,000,000.00	XYZ Supplier	Capital expenditures on infrastructure renovations for XXXX.	2	1	Capital Expenditures and Infrastructure
XY18	\$24,000,000.00	\$24,000,000.00	XYZ Supplier	Capital expenditures on infrastructure renovations for XXXX.	3	1	Capital Expenditures and Infrastructure

3) Multiple Use of Funds Categories

If a \$20 million obligation was made using the first budget period's award to one entity (Health System XXXX) for Initiative #1 and applies to two use of funds categories (Provider Payments and Behavioral Health), then the obligation should be split into two lines according to how much money is budgeted to be spent on activities relating to each use of funds category.² If State XY works with Health System XXXX to determine that \$16 million will go towards Provider Payments with the remainder budgeted for Behavioral Health, then the two lines would be as follows:

Figure 6: Multiple Use of Funds Categories Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds
XY1	\$16,000,000.00	\$16,000,000.00	XXXX	Funds paid to XXXX health care provider for expanding behavioral health services.	1	1	Provider Payments
XY2	\$4,000,000.00	\$4,000,000.00	XXXX	Funds paid to XXXX health care provider for expanding behavioral health services.	1	1	Behavioral Health

4) Multiple Initiatives and Use of Funds Categories

If a \$10 million obligation was made using the first budget period's award to XY Workforce Development Board that is to be split between two initiatives and three use of funds categories (Training and Technical Assistance, Workforce, and Innovative Care), then the obligation should be split into six lines according to how

² Note that two Use of Funds Categories (Provider Payments and Capital Expenditures and Infrastructure) have specific reporting requirements based on the Program-Specific Limitations.



much money is budgeted for each unique combination of initiative number and use of funds category. Here the State determines that (1) 60% of the funds are attributable to the Workforce use of funds category and the remaining 40% is evenly divided between Innovative Care and Training and Technical Assistance, and (2) that the funds should be evenly divided between initiatives #1 and #3, so the six lines could look as follows:

Figure 7: Multiple Initiatives and Use of Funds Categories Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds
XY3	\$1,000,000.00	\$0.00	XY Workforce Development Board	Funds distributed to the State workforce development board to provide workforce	1	1	Training and Technical Assistance
XY4	\$3,000,000.00	\$0.00	XY Workforce Development Board	Funds distributed to the State workforce development board to provide workforce	1	1	Workforce
XY5	\$1,000,000.00	\$0.00	XY Workforce Development Board	Funds distributed to the State workforce development board to provide workforce	1	1	Innovative Care
XY6	\$1,000,000.00	\$0.00	XY Workforce Development Board	Funds distributed to the State workforce development board to provide workforce	3	1	Training and Technical Assistance
XY7	\$3,000,000.00	\$0.00	XY Workforce Development Board	Funds distributed to the State workforce development board to provide workforce	3	1	Workforce
XY8	\$1,000,000.00	\$0.00	XY Workforce Development Board	Funds distributed to the State workforce development board to provide workforce	3	1	Innovative Care

For each budget period, the obligation should always be split into as many lines as required to cover the unique combinations of initiative number and use of funds for each first-tier entity. If a State has any doubt, it is better to split an obligation into more specific line items.

For future reports in which funds from multiple budget periods are available, the budget period variable must also be a unique variable. Therefore, a unique combination of the four variables of first-tier entity, initiative number, budget period, and use of funds category is required for each line item. Importantly, **the budget period variable indicates the budget period award from which funds that have been or will be spent to fulfill an obligation are drawn, not the date the payment was made.** For example, a payment made to fulfill an obligation during the second budget period timeframe could have been budgeted as part of the first budget period award and therefore the obligation should be marked as budget period one on the Use of Funds tab. Additionally, an obligation may include funds from multiple budget period awards and then should be split into multiple line items (see the example below).

5) Multiple Budget Periods

In budget period two, if a \$6 million obligation with one entity (XYZ Agency) for Initiative #3 is budgeted to be drawn equally from State XY's budget period one awards and only one use of funds category applies (IT Advances), then the obligation should be split into two lines as follows:



Figure 8: Multiple Budget Periods Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds
XY24	\$3,000,000.00	\$0.00	XYZ Agency	Transfer to XYZ Agency for funding pharmaceutical IT improvements	3	1	IT Advances
XY25	\$3,000,000.00	\$0.00	XYZ Agency	Transfer to XYZ Agency for funding pharmaceutical IT improvements	3	2	IT Advances

Additional Examples:

There is an “N/A (Program Administration Expense)” option within the use of funds dropdown. This option may be selected if the State determines no use of funds categories apply to the obligation because it is a purely administrative expense. If this use of funds category is selected for the line item, then the Obligation Amount should also be entered in the Administrative Costs program-specific limitation field (see the Program-Specific Limitations section of this document for more details).

6) “N/A (Program Administration Expense)” Use of Funds

If a \$10 million obligation was made from the first budget period’s award to one entity (AAA Contractor) for administrative expenses to support Initiatives #1, #2, #3, and #4, no other use of funds categories applies, and the State determines that Initiative #1 will require twice as much administrative support as each of the other initiatives, then the obligation could be written as follows:

Figure 9: “N/A (Program Administration Expense)” Use of Funds Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds	Administrative Costs
XY19	\$4,000,000.00	\$0.00	AAA Contractor	Payment to contractor XXXX to provider program administration support across all initiatives.	1	1	N/A (Program Administration Expense)	\$4,000,000.00
XY20	\$2,000,000.00	\$0.00	AAA Contractor	Payment to contractor XXXX to provider program administration support across all initiatives.	2	1	N/A (Program Administration Expense)	\$2,000,000.00
XY21	\$2,000,000.00	\$0.00	AAA Contractor	Payment to contractor XXXX to provider program administration support across all initiatives.	3	1	N/A (Program Administration Expense)	\$2,000,000.00
XY22	\$2,000,000.00	\$0.00	AAA Contractor	Payment to contractor XXXX to provider program administration support across all initiatives.	4	1	N/A (Program Administration Expense)	\$2,000,000.00

Additionally, there is an “All” option within the initiative number dropdown. This “All” initiatives option may be selected if an obligation (or part of a split obligation) applies to all of the State’s initiatives. Since State XY only has four initiatives, if the State instead did not wish to define a precise distribution of funds across the initiatives for the AAA Contractor example above, the obligation could be written in one line as follows:

Figure 10: Initiative Number “All” Option Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds	Administrative Costs
XY19	\$10,000,000.00	\$0.00	AAA Contractor	Payment to contractor XXXX to provider program administration support across all initiatives.	All	1	N/A (Program Administration Expense)	\$10,000,000.00

7) Funds Remaining Within the Awardee Agency



If \$6.3 million from the first budget period funding is allocated by the State for personnel costs within the awardee agency, this should be recorded as an obligation using the “N/A (Program Administration Expense)” and should capture the State agency as the first-tier entity. The State could choose to allocate personnel costs more precisely between their initiatives using multiple line items, but if the State chooses to use “All” for the initiative number to divide the funds evenly across all of its initiatives, the obligation could be written in one line as follows:

Figure 11: Funds Remaining Within the Awardee Agency Example

Obligation ID	Obligation Amount	Funds Spent Against Obligation	First-Tier Entity (Subrecipient or Contractor)	Description	Initiative Number	Budget Period	Use of Funds	Administrative Costs
XY23	\$6,300,000.00	\$368,425.13	XY State Health Department	Personnel costs within State health department to operate program	All	1	N/A (Program Administration Expense)	\$6,300,000.00

Program-Specific Limitations

Program-specific limitations are outlined in the Notice of Funding Opportunity (NOFO). The limitations are summarized in Figure 12.

Figure 12: Program-Specific Limitations and Amount of Award

Program-Specific Limitation	Amount of Award
Administrative Costs	10%
Provider Payments (Category B)	15%
Capital Expenditures and Infrastructure (Category J)	20%
EMR Replacement	5%
Rural Tech Catalyst Fund	10% or \$20 million, whichever is less

Each program-specific limitation has a corresponding column in the Use of Funds tab. For each line item, enter the amount of funds that should be counted towards each program specific limitation (blanks are treated as zero). It is possible that no program-specific limitations apply to the line item; in that case, column **NO** in the Use of Funds tab should be used to attest that no program-specific limitation applies. The State may fill out multiple program-specific limitation fields for a single line item, but funds should not be double-counted across multiple program-specific limitations; each dollar may be assigned to at most one program-specific limitation. The funds assigned to program-specific limitation categories should therefore sum to no greater than the total line-item amount.

Two of the program-specific limitations overlap with use of funds categories: Provider Payments and Capital Expenditures and Infrastructure. The full Obligation Amount of a line item must be assigned to either the respective program-specific limitation field or the



Administrative Costs program-specific limitation field if one of those use of funds categories is selected. Similarly, if “N/A (Program Administration Expense)” is selected as the use of funds category, then the full Obligation Amount must be populated in the Administrative Costs program-specific limitation field.



Program-Specific Limitation Examples:

1) One Program-Specific Limitation Applies

If a \$1 million line item had \$50,000 attributable to Administrative Costs and no other program-specific limitation applies to the line item, then \$50,000 should be entered in the Administrative Costs column and the rest of the program-specific limitations should be left blank (including the confirmation cell).

Figure 13: One Program-Specific Limitation Example

Obligation ID	Obligation Amount	...	Funding Amounts of Program-Specific Limitations (\$)					Confirmation: No Program-Specific Limitation Applies
			Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	
XY3	\$1,000,000.00	...	\$50,000.00					

2) Multiple Program-Specific Limitations Apply

If a \$16 million line item to Health System XXXX had \$600,000 attributable to Administrative Costs and \$15.4 million attributable to Provider Payments, then each of those respective columns should be populated and the rest of the program-specific limitations should be left blank (including the confirmation cell).

Figure 14: Multiple Program-Specific Limitations Example

Obligation ID	Obligation Amount	...	Funding Amounts of Program-Specific Limitations (\$)					Confirmation: No Program-Specific Limitation Applies
			Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	
XY1	\$16,000,000.00	...	\$600,000.00		\$15,400,000.00			

3) No Program-Specific Limitations Apply

If a line item had no funds attributable to program-specific limitations, then all program-specific limitation columns should be left blank and the confirmation column dropdown of “No limitation applicable” should be selected.

Figure 15: No Program-Specific Limitations Example

Obligation ID	Obligation Amount	...	Funding Amounts of Program-Specific Limitations (\$)					Confirmation: No Program-Specific Limitation Applies
			Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	
XY14	\$9,000,000.00	...						No limitation applicable
XY15	\$9,000,000.00	...						No limitation applicable



Use of Funds Tab Glossary

A description of each field in the Use of Funds tab is provided below:

- **Obligation ID:** An ascending line-item ID composed of the State abbreviation followed by a whole number. This number will continue counting throughout each Quarterly/Annual Report for the duration of the program.
- **Obligation Amount:** The amount attributed to the line item, which may have been split/aggregated across the First-Tier Entity, Initiative Number, Budget Period, and Use of Funds fields.
- **Spent Funds Against Obligation:** The amount of funds that have been spent by the State on the first-tier entity to partially or completely satisfy the obligation listed in the Obligation Amount column.
- **First-Tier Entity:** The name of the entity associated with the line item. This column contains a dropdown that is populated using the entities listed on the First-Tier Entities tab.
- **Description:** A description of the line item provided by the State.
- **Initiative Number:** The initiative number associated with the line item.
- **Budget Period:** The budget period award from which the line item was obligated.
- **Use of Funds:** The use of funds category associated with the line item.

Funding Amounts of Program-Specific Limitations:

- **Administrative Costs:** The amount of the line item attributable to the Administrative Costs program-specific limitation.³ This field must be populated with the full Obligation Amount if “N/A (Program Administration Expense)” is selected as the use of funds category.
- **Capital Expenditures and Infrastructure:** The amount of the line item attributable to the Capital Expenditures and Infrastructure program-specific limitation as described in the NOFO. If “Capital Expenditures and Infrastructure” is selected as the use of funds category, the full Obligation Amount of the line item must be distributed between this field and the Administrative Costs field.
- **Provider Payments:** The amount of the line item attributable to the Provider Payments program-specific limitation as described in the NOFO. If “Provider Payments” is selected as the use of funds category, the full Obligation Amount of the line item must be distributed between this field and the Administrative Costs field.

³ Section 71401 of Public Law 119-21, NOFO pg.42



- **EMR Replacement:** The amount of the line item attributable to the EMR Replacement program-specific limitation as described in the NOFO.
- **Rural Tech Catalyst Fund:** The amount of the line item attributable to the Rural Tech Catalyst Fund program-specific limitation as described in the NOFO.
- **Confirmation: No Program-Specific Limitation Applies:** Select “No limitation applicable” if no program-specific limitation is attributable to the line item. This field must be left blank if any of the program-specific limitations are populated.

Downstream Obligations Tab

Overview

The goal of the Downstream Obligation tab is to provide CMS with greater visibility into how RHT Program funds are distributed across entity types over time. Each line item is a record of an obligation from one entity to another and indicates the quantity of funds that have been spent to satisfy those obligations. States should work with their downstream entities to ensure visibility into how their funds are being obligated. Additional rows of data and updates to the Obligation Amount and Spent Funds Against Obligation values should be made on the Downstream Obligations tab as new information is available to the State through their monitoring of entities.

Note that once funds are spent, no more obligations or sub-obligations may be created based on those funds from the perspective of CMS. Any additional distribution of funds after they have been spent (such as a health system receiving funding from a State agency and then distributing it among its owned rural healthcare facilities or a contractor using funds it received from the State to pay a sub-contractor) would instead be recorded on the Distribution Reporting tab.

Structure

As with other tabs in the Obligated and Spent Funds Reporting section of the Excel Reporting Template, only the unprotected (white) cells will be populated by the State. The protected (light blue) cells are determined by formulas. Figure 16 displays the columns that are used on the Downstream Obligations tab.

Figure 16: Downstream Obligations Tab Headers

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available



As each row represents a sub-obligation, the table is laid out such that the columns B and C display the Parent ID and Parent Entity from which the obligation is made, while columns D–F define the new Entity ID, Name, and Entity Type of the entity to which funds are being obligated. Columns G–I are analogous to the columns of the same names on the Use of Funds or First-Tier Entities tabs: Column G quantifies the obligation represented by the line item, column H is a space for the State to record the amount of funds that have been spent to satisfy the sub-obligation defined by the line item, and column I is a calculated field that displays the obligation amount less the sum of downstream obligations and the funds that have been spent to satisfy the obligation.

Reporting Instructions

This section of the guide begins with a step-by-step example of filling out the downstream obligation information for XY Workforce Development Board to familiarize the user with how to use the tab. Following this step-by-step example are additional considerations and a description of the conditional formatting rules that exist to help users accurately fill out the required information.

The data entry process consists of the following steps:

- 1) **Enter the first Parent ID in column B.** The parent entity is the entity that is choosing to sub-obligate some or all of their obligated funds. This value should be an existing Entity ID. For the first line items, the only existing Entity IDs that the State may enter as Parent IDs will be those assigned in column B of the First-Tier Entities tab.

This example will cover the distribution of XY Workforce Development Board’s obligated funds. Figure 17 shows State XY entering “2” in the Parent ID column as that is the Entity ID that was assigned to the XY Workforce Development Board. The Parent Entity in column C of the Downstream Obligations tab automatically populates with the entity name.

Figure 17: Entering First-Tier Entity as Parent ID

Entity ID	First-Tier Entity (Subrecipient or Contractor)	FROM	
		Parent ID	Parent Entity
1	XXXX		
2	XY Workforce Development Board	2	XY Workforce Development Board
3	XXXX Tribe		

The file will also automatically populate a new Entity ID (column D) generated by this obligation. Because this is the first entry denoting an obligation from Entity #2, the downstream entity is defined as Entity ID 2.1.

Figure 18: Downstream Entity ID Automatic Population

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1					

- 2) **Enter Downstream Entity Name and Entity Type.** In this example, the XY Workforce Development Board is fulfilling its role in Initiatives #1 and #3 by arranging for funds to be made available to regional workforce development boards that operate in rural areas of State XY. The first obligation made is to obligate \$5 million to Regional Workforce Development Board 1. The State enters the Downstream Entity and Entity Type, using the descriptions on the Entity Type Guidance tab to assist in determining the most appropriate entity type. In this case, Regional Workforce Development Board 1 fits best in the “Other Local Government” category.

Figure 19: Populating Downstream Entity and Entity Type

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1					

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government			

- 3) **Enter the Obligation Amount.** XY Workforce Development Board chooses to budget \$5 million for Regional Workforce Development Board 1 and enters this value in column G. Since no funds have been spent at this point, \$0 is entered in column H, completing the row.

Figure 20: Entering Obligation Amount

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government	\$5,000,000.00	\$0.00	\$5,000,000.00



Note that the Obligated Funds Available column automatically populates with full \$5 million Obligation Amount. If funds are spent against this obligation or if additional downstream entities are added that use “2.1” as the Parent ID, those spent funds ~~of~~^{or} sub-obligations will reduce the 2.1 Obligated Funds Available by the same amount.

- 4) **Complete the remaining second-tier entities.** XY Workforce Development Board is not the terminal entity of any of the RHT Program funds. It was obligated \$10 million total on the Use of Funds tab and obligates the remaining \$5 million to Regional Workforce Development Board 2 and XY Tribal Training Program.

Figure 21: Populating Additional Second-Tier Entities

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government	\$5,000,000.00	\$0.00	\$5,000,000.00
2	XY Workforce Development Board	2.2	Regional Workforce Development Board 2	Other Local Government	\$4,000,000.00	\$0.00	\$4,000,000.00
2	XY Workforce Development Board	2.3	XY Tribal Training Program	Other Tribal Organization	\$1,000,000.00	\$1,000,000.00	\$0.00

For both line items, State XY enters “2” as the Parent ID as these funds are being obligated by XY Workforce Development Board. This causes the Entity IDs to automatically populate as 2.2 and 2.3. Each of these is then assigned to a Downstream Entity and Entity Type and the remaining \$5 million are distributed between 2.2 and 2.3 in the Obligation Amount column. Unlike 2.1 and 2.2, the \$1 million budgeted for 2.3 is transferred to an account owned by XY Tribal Training Program, so State XY also enters that \$1 million has been disbursed as spent funds against the \$1 million sub-obligation. This leaves XY Tribal Training Program with \$0 in Obligated Funds Available.

To confirm that all of XY Workforce Development Board’s obligated funds have been obligated to downstream entities, the First-Tier Entity tab can be used to confirm that it has \$0 remaining of the \$10 million in funding that it received.

Figure 22: First-Tier Entities tab Remaining Funds

Entity ID	First-Tier Entity (Subrecipient or Contractor)	...	Total Obligated Funds	Obligated Funds Available
2	XY Workforce Development Board	...	\$10,000,000.00	\$0.00

- 5) **Populate additional tier(s) of entities.** The Downstream Obligations tab can support any number of tiers of entities. In this example, each of the Regional Workforce Development Boards (Subrecipients 2.1 and 2.2) have additional



downstream entities. To populate the rows, State XY enters “2.1” or “2.2” as the Parent ID and the new Entity IDs (2.1.1, 2.2.1, and 2.2.2) are automatically populated. In this example, the rows are sequential, but this is not required. The Entity IDs will be assigned in the order that a given Parent ID is entered, regardless of the number of rows between such entries.

Figure 23: Entity #2 Downstream Entities Population Example

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government	\$5,000,000.00	\$0.00	\$1,500,000.00
2	XY Workforce Development Board	2.2	Regional Workforce Development Board 2	Other Local Government	\$4,000,000.00	\$0.00	\$0.00
2	XY Workforce Development Board	2.3	XY Tribal Training Program	Other Tribal Organization	\$1,000,000.00	\$1,000,000.00	\$0.00
2.1	Regional Workforce Development Board 1	2.1.1	XYZ Rural Technical School	Community College/Technical School	\$3,500,000.00	\$180,000.00	\$3,320,000.00
2.2	Regional Workforce Development Board 2	2.2.1	XXX Organization	Other Rural Healthcare Workforce Training	\$2,500,000.00	\$2,000,000.00	\$500,000.00
2.2	Regional Workforce Development Board 2	2.2.2	YYY Organization	Other Rural Healthcare Workforce Training	\$1,500,000.00	\$1,500,000.00	\$0.00

These downstream obligations are subtracted from the Obligated Funds Available for 2.1 and 2.2. Because Regional Workforce Development Board 2 sub-obligated all \$4 million that it received to XXX Organization and YYY Organization, it has \$0 in Obligated Funds Available. In contrast, Regional Workforce Development Board 1 sub-obligated only \$3.5 million of the \$5 million that it received, so it has \$1.5 million in Obligated Funds Available. In future reports, these \$1.5 million could be (1) transferred to an account owned by Regional Workforce Development Board 1 and added to the Spent Funds Against Obligation, (2) added to the Obligation Amount that they are sub-obligating to 2.1.1., or (3) could be sub-obligated to a different downstream entity by adding one or more rows with 2.1 as the Parent ID.

The State also fills in the spent funds information, which are the quantities of funding that have ~~already~~ been ~~actually~~ disbursed to 2.1.1, 2.2.2, and 2.2.2. In the case of 2.2.2, Regional Workforce Development Board 2 spent \$1.5 million and disbursed the full amount to YYY Organization, meaning that there is \$0 in Obligated Funds Available. For 2.1.1 and 2.2.1, the downstream entities have entered into contracts with the regional boards and funds will be spent as needed to pay XYZ Rural Technical School and XXX Organization for engaging in initiative implementation activities.

All funds that are obligated to XY Tribal Training Program have already been paid out as spent funds. Therefore, XY Tribal Training Program cannot create any additional sub-obligations to downstream entities. If XY Tribal Training Program reports a downstream entity, such as a partner workforce development organization to which



it pays \$200,000 of RHT Program funds, that information would be reported on the Distribution Reporting tab rather than the Downstream Obligations tab.

Additional Considerations

- 1) **Any number of tiers of sub-obligations may be reported.** While the preceding step-by-step example only progressed to a third tier of entities, the State may continue to populate additional levels of Entity IDs in the Parent ID column to generate additional tiers of entities. If Subrecipient 2.1.1 XYZ Rural Technical School enters into a contractual with a community-based organization to implement RHT Program initiative activities, State XY could add 2.1.1 as the Parent ID to generate Entity ID 2.1.1.1, and so on. For more complex initiatives or downstream entity organizational structures, additional tiers could be created following the same recursive process. The State should work with its downstream entities to report the obligations made between its downstream entities as accurately and completely as possible in each reporting period.
- 2) **Downstream entities do not need to all be listed sequentially.** While it is required that the Parent ID is assigned either on the First-Tier Entities tab or in an earlier (lower row number) row on the Downstream Obligations tab, the State does *not* need to establish all second-tier entities before progressing to third-tier entities, etc. In Figure 24, State XY defines all of Entity #2's downstream sub-obligations in a different order than in Figure 23 (previous page), but the calculations and functionality remain the same.

Figure 24: Downstream Obligations Row Order Flexibility

FROM		TO			Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type			
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government	\$5,000,000.00	\$0.00	\$1,500,000.00
2	XY Workforce Development Board	2.2	Regional Workforce Development Board 2	Other Local Government	\$4,000,000.00	\$0.00	\$0.00
2.2	Regional Workforce Development Board 2	2.2.1	XXX Organization	Other Rural Healthcare Workforce Training	\$2,500,000.00	\$2,000,000.00	\$500,000.00
2	XY Workforce Development Board	2.3	XY Tribal Training Program	Other Tribal Organization	\$1,000,000.00	\$1,000,000.00	\$0.00
2.2	Regional Workforce Development Board 2	2.2.2	YYY Organization	Other Rural Healthcare Workforce Training	\$1,500,000.00	\$1,500,000.00	\$0.00
3	XXXX Tribe	3.1	Tribal Clinic 1	Tribal Healthcare Provider	\$6,500,000.00	\$0.00	\$6,500,000.00
3	XXXX Tribe	3.2	Tribal Clinic 2	Tribal Healthcare Provider	\$4,000,000.00	\$0.00	\$4,000,000.00
2.1	Regional Workforce Development Board 1	2.1.1	XYZ Rural Technical School	Community College/Technical School	\$3,500,000.00	\$180,000.00	\$3,320,000.00

- 3) **The values in the Obligated Funds Available column in the Downstream Obligations tab are tied specifically to the line item.** If Regional Workforce Development Board 1 were to receive an additional \$1 million from a different first-tier entity as a separate line item, the Obligated Funds Available for each row would be tracked separately. There is no aggregation across line items with the same



Downstream Entity in the Downstream Obligations tab. This makes the Obligated Funds Available column on this tab slightly distinct from the Obligated Funds Available column on the First-Tier Entities tab, which *does* aggregate across all inflows and outflows.

Distribution Reporting

Overview

The goal of the Distribution Reporting tab is to provide CMS visibility into how spent funds are further distributed across entity types over time. The tab operates very similarly to the Downstream Obligations tab. The only distinction is that **the Downstream Obligations tab tracks obligations between downstream entities *until the funds are spent* to satisfy the obligation, while the Distribution Reporting tab is used to track transfers of funds to downstream entities *after they have been spent*.** To avoid repetition, this section of the guide will explain the Distribution Reporting tab primarily by comparison with the Downstream Obligations tab.

Structure

The first five columns of the Distribution Reporting tab (B–F) operate almost identically to the Downstream Obligations tab: the user enters the Parent ID in column B, the Parent Entity is automatically populated in column C, a new Entity ID is defined in column D, and the user enters the entity’s name **in column E** and **entity** type in column F. The only distinction, as displayed in Figure 25, is that Entity IDs on the Distribution Reporting tab begin with a “D” before the decimalized notation. Note: this means it is possible, for example, for there to be an Entity ID #1.1 defined on the Downstream Obligations tab and Entity ID #D1.1 on the Distribution Reporting tab that are assigned to two different organizations.

Figure 25: Distribution Reporting Tab Structure and Entity ID Assignment

FROM		TO				
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Funds Received	Remaining Funds
1	XXXX	D1.1	Hospital 1	Rural Emergency Hospital	\$1,000,000.00	\$200,000.00
1	XXXX	D1.2	Hospital 2	Critical Access Hospital	\$850,000.00	\$850,000.00
1	XXXX	D1.3	Hospital 3	Critical Access Hospital	\$675,000.00	\$475,000.00

The primary operational distinction between the two tabs is that, because funds have already been spent, there is only one dollar-denominated column: Funds Received. This is the value of the spent funds that have been transferred from the parent entity to the entity



defined in the line item. A transfer between entities may take several forms. For example, both a health system distributing disbursed funds to its owned hospitals and a contractor paying a subcontractor to perform a service using disbursed funds would be reported in the same way.

The final column is Remaining Funds. This is the funds received minus the sum of any transfers to downstream entities. In Figure 25 (above), Hospital 1 (D1.1) received \$1 million from XXXX health system and has transferred \$800,000 downstream, leaving it with \$200,000 of remaining funds. In contrast, Hospital 2 (D1.2) received \$850,000 and has not transferred any downstream. This may change in future reporting periods in Hospital 2, for example, transfers funds to a clinic or pharmacy that it owns, but it may also be the case that Hospital 2 will be the terminal recipient of those funds.

Reporting Instructions

The Parent ID entered in a line item must meet two conditions (1) it must be previously defined (similar to the Downstream Obligations tab) and (2) it must be associated with an entity that has access to spent funds. This means that the Parent ID may be an Entity ID defined in one of three locations:

- 1) A first-tier entity that has received Spent Funds Against Obligation in the Use of Funds Tab. In Figure 26, this includes the payments from XYZ Supplier (ID #5) to its three sub-contractors in D5.1, D5.2, and D5.3, and its payment to Quality Organization ABC in D5.4.
- 2) A downstream entity of any tier that has received Spent Funds Against Obligation in the Downstream ~~Entities~~Obligations tab. In Figure 26, this includes the distribution of funds from Health System 1 (B8.4) to two of its owned hospitals as well as the transfers from Health System 2 (B8.5) to two of its owned pharmacies.
- 3) A downstream entity of any tier that has positive Remaining Funds in a previous row on the Distribution Reporting tab. In Figure 26, this includes both the transfers from Pass-through Hospitals 1 and 2 (D8.4.1 and D8.4.2) to their owned pharmacies as well as the payments from Sub-contractor 2 (D5.2) to its four sub-sub contractors.



Figure 26: Distribution Reporting Tab Example

FROM		TO				
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Funds Received	Remaining Funds
8.4	Health System 1	D8.4.1	Pass-through Hospital 1	Critical Access Hospital	\$400,000.00	\$0.00
D8.4.1	Pass-through Hospital 1	D8.4.1.1	Hospital 1 Pharmacy	Rural Pharmacy	\$400,000.00	\$400,000.00
8.4	Health System 1	D8.4.2	Pass-through Hospital 1	Other Rural Hospital	\$400,000.00	\$0.00
D8.4.2	Pass-through Hospital 1	D8.4.2.1	Hospital 2 Pharmacy	Rural Pharmacy	\$400,000.00	\$400,000.00
8.4	Health System 1	D8.4.3	Hospital 3	Other Rural Hospital	\$250,000.00	\$0.00
8.5	Health System 2	D8.5.2	Pharmacy 1	Rural Pharmacy	\$350,000.00	\$350,000.00
8.5	Health System 2	D8.5.3	Pharmacy 2	Rural Pharmacy	\$250,000.00	\$250,000.00
5	XYZ Supplier	D5.1	Sub-contractor 1	Other	\$25,000,000.00	\$25,000,000.00
5	XYZ Supplier	D5.2	Sub-contractor 2	Other	\$12,000,000.00	\$2,100,000.00
5	XYZ Supplier	D5.3	Sub-contractor 3	Other	\$18,500,000.00	\$18,500,000.00
5	XYZ Supplier	D5.4	Quality Organization ABC	Quality Improvement Organization	\$3,800,000.00	\$3,800,000.00
D5.2	Sub-contractor 2	D5.2.1	Sub-contractor 4	Other	\$3,500,000.00	\$3,500,000.00
D5.2	Sub-contractor 2	D5.2.2	Sub-contractor 5	Other	\$2,700,000.00	\$2,700,000.00
D5.2	Sub-contractor 2	D5.2.3	Sub-contractor 6	Other	\$1,200,000.00	\$1,200,000.00
D5.2	Sub-contractor 2	D5.2.4	Sub-contractor 7	Other	\$2,500,000.00	\$2,500,000.00

Note that, while the D8.4.1 and D8.4.2 are operating entirely as passthrough entities by transferring 100% of the funds they received from Health System 1 to their owned pharmacies, Sub-contractor 2 is the remaining recipient of \$2.1 million of the \$12 million that it received from XYZ supplier.

Considerations for Future Reporting Periods

The Obligated and Spent Funds Reporting tabs will continue to be completed and submitted by States in each Annual and Quarterly Report for the duration of the program. Below are considerations for how each tab will change over time.

First-Tier Entities: As States continue to implement their initiatives and receive additional funding in future budget periods, new first-tier entities may be identified and added to the list. This tab also displays the funds that were obligated to each first-tier entity received in each budget period as well as their obligated funds available, which can be used by POs and the State to track spending and guide monitoring activities.

Use of Funds: Because line items on this tab must be unique based on first-tier entity name, initiative number, budget period, and use of funds category, future budget periods will necessitate the creation of additional line items. Additionally, the program-specific limitations are tracked for each budget period. States will continue to populate new rows on this tab throughout the program.



Downstream Obligations: There are four types of changes that will occur between reporting periods:

- 1) The State may establish new first-tier entities to continue their initiative implementation. If any of those new first-tier entities create sub-obligations, it will result in additional line items.
- 2) A State's existing downstream entities may establish additional sub-obligations and report them to the State, which will also result in additional line items.
- 3) The Obligated Amount of an existing row may increase if additional funds are obligated to a given downstream entity from the same parent entity, especially if the parent entity receives additional obligated funds from a new budget period award.
- 4) As funds are spent, the State will update the Spent Funds Against Obligation column for whichever obligation is partially or completely fulfilled by the expenditure.

Distribution Reporting: There are three types of changes that will occur between reporting periods, which parallel the first three types of changes on the Downstream Obligations tab:

- 1) The State may establish new first-tier entities to continue their initiative implementation. If any of those new first-tier entities or their downstream entities further transfer any spent funds, it will result in additional line items.
- 2) A State's existing downstream entities may transfer spent funds to new entities, which will also result in additional line items.
- 3) The Funds Received of an existing row may increase if additional funds are transferred to a given downstream entity from the same parent entity, especially if the parent entity receives additional spent funds from a new budget period award.

Appendix A: Recording a New Obligation or Spend Event

1. Is the entity allocated obligated or spent funds directly from the State awardee?
 - This information is recorded on the Use of Funds tab. If this is the first time that the entity is allocated obligated or spent funds directly from the State awardee, the entity's name and type should first be added to the First-Tier Entities tab.
 - If the entity has already been allocated obligated or spent funds directly from the State awardee for the same budget period, initiative number, and use of funds category, the State may update the Obligation Amount, Funds Spent Funds Against Obligation, and Funds Amount of Program-Specific Limitations columns on the Use of Funds tab to reflect the changed amount. Otherwise, the State should add a new line item on the Use of Funds tab.



2. If “no” to question #1, does the new financial relationship relate only to obligated funds, such as via a pass-through entity?
 - This information is recorded on the Downstream Obligations tab. All obligations of RHT Program funds other than allocations to first-tier entities must be recorded on this tab.
 - If the entity has already been allocated obligated funds from the same parent entity, the State should update only the Obligation Amount column for the existing line item for this financial relationship.
 - Otherwise, the State should create a new line item on the Downstream Obligations tab to record the obligation.
3. If “no” to question #2, does this new financial relationship relate to the State spending funds (including to partially or completely satisfy an existing obligation) and adding an item to the State’s general ledger?
 - This information is recorded in the Downstream Obligations tab. All spending of RHT Program funds other than spending on first-tier entities must be recorded on this tab.
 - If the entity has already received obligated funds from the same parent entity and spending is occurring to partially or completely satisfy the obligation, the State should update only the Funds Spent Against Obligation column for the existing line item for this financial relationship.
 - Otherwise, the State should create a new line item on the Downstream Obligations tab and include the amount of spent funds in both the Obligation Amount and Funds Spent Against Obligation columns.
4. If “no” to question #3, does the new financial relationship relate to a further distribution, transfer, or payment of already spent RHT Program funds to a different entity?
 - This information is recorded on the Distribution Reporting tab.
 - If the entity has already received a distribution, transfer or payment of spent funds from the same parent entity, the State should update only the Funds Received column for the existing line item for this financial relationship.

Appendix B: Conditional Formatting Rules

All of the data entry tabs in the Obligated and Spent Funds Reporting section have conditional formatting rules to assist with data entry. Cells will highlight yellow based on a variety of rules pertaining to either missing or incorrect values. The conditional formatting rules for each tab are described below.

First-Tier Entities Tab

- 1) **The Entity Type dropdown may not be used to select a category label.** The State should only use the indented entity types in the dropdown list; the category labels are only an organizational tool. In Figure 27, State XY incorrectly set XXXX's Entity Type as "Healthcare Providers", which is a category label rather than an entity type. This should be updated to "Health System", which is a valid selection.

Figure 27: First-Tier Entities Conditional Formatting – Entity Type

Entity ID	First-Tier Entity (Subrecipient or Contractor)	Entity Type
1	XXXX	Healthcare Providers

- 2) **Obligated Funds Available cannot be negative.** In Figure 28, State XY has entered a higher sum of \$11 million in transfers from XY Workforce Development Board to downstream entities in the Downstream Obligations tab, but only assigned a sum of \$10 million in transfers from the State XY to XY Workforce Development Board on the Use of Funds tab.

Figure 28: First-Tier Entities Conditional Formatting – Remaining Funds

Entity ID	First-Tier Entity (Subrecipient or Contractor)	...	Total Obligated Funds	Obligated Funds Available
1	XXXX	...	\$20,000,000.00	\$0.00
2	XY Workforce Development Board	...	\$10,000,000.00	-\$1,000,000.00

Use of Funds Tab

- 1) If the spent funds against obligation amount is greater than the obligation amount, the spent funds field will highlight yellow.

Figure 29: Use of Funds Conditional Formatting – Spent Funds Exceeds Obligation

Obligation ID	Obligation Amount	Funds Spent Against Obligation
XY1	\$16,000,000.00	\$19,000,000.00

- 2) A numeric value must be entered into the Spent Funds Against Obligation column. Once a value has been added to Obligation Amount, a value must also be entered to show the portion of that obligation that has been spent to satisfy the obligation. In



Figure 30, State XY should enter a 0 in the cell if none of the \$16 million obligation has been spent at the time of reporting.

Figure 30: Use of Funds Conditional Formatting – Spent Funds Value Missing

Obligation ID	Obligation Amount	Funds Spent Against Obligation
XY1	\$16,000,000.00	

- 3) If an amount is entered into the Capital Expenditures and Infrastructure or Provider Payments Program-Specific Limitations fields and the use of funds category does not align, the use of funds field will highlight yellow.

Figure 31: Use of Funds Conditional Formatting – Use of Funds/Program-Specific Limitation Misaligned

				Funding Amounts of Program-Specific Limitations (\$)					
Obligation ID	Obligation Amount	...	Use of Funds	Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	Confirmation: No Program-Specific Limitation Applies
XY3	\$1,000,000.00	---	Training and Technical Assistance	\$50,000.00	\$50,000.00				
XY4	\$3,000,000.00	---	Workforce	\$150,000.00		\$100,000.00			

- 4) If no program-specific limitations apply, the confirmation field must be populated with “No limitation applicable”; otherwise, the confirmation cell will highlight yellow and should be filled with “No limitation applicable”.

Figure 32: Program-Specific Limitations Conditional Formatting – Confirmation Needed

			Funding Amounts of Program-Specific Limitations (\$)					
Obligation ID	Obligation Amount	...	Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	Confirmation: No Program-Specific Limitation Applies
XY14	\$9,000,000.00	...						

- 5) If an amount is entered in a program-specific limitation field and the confirmation field is populated as “No limitation applicable”, then the confirmation field will highlight yellow and either the amount should be removed from the program-specific limitation field or the confirmation of “No limitation applicable” should be removed.



Figure 33: Program-Specific Limitations Conditional Formatting – Errant Confirmation

				Funding Amounts of Program-Specific Limitations (\$)					
Obligation ID	Obligation Amount	...	Use of Funds	Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	Confirmation: No Program-Specific Limitation Applies
XY3	\$1,000,000.00	---	Training and Technical Assistance	\$50,000.00					No limitation applicable

- 6) If amounts attributed to program-specific limitations sum to greater than the Obligation Amount in the line item, then all program-specific limitation fields will highlight yellow and the amounts should be edited to be no greater than the obligated funds in the line item.

Figure 34: Program-Specific Limitations Conditional Formatting – Sum Exceeds Obligated Funds

				Funding Amounts of Program-Specific Limitations (\$)					
Obligation ID	Obligation Amount	---	Use of Funds	Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	Confirmation: No Program-Specific Limitation Applies
XY24	\$2,000,000.00	---	IT Advances	\$800,000.00			\$1,920,000.00		

- 7) If the “N/A (Program Administration Expense)” use of funds category is selected for the line item, then the program-specific limitation Administrative Costs field will highlight yellow until the full Obligation Amount is entered.

Figure 35: Program-Specific Limitations Conditional Formatting – Administrative Costs

				Funding Amounts of Program-Specific Limitations (\$)					
Obligation ID	Obligation Amount	---	Use of Funds	Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	Confirmation: No Program-Specific Limitation Applies
XY19	\$4,000,000.00	---	N/A (Program Administration Expense)	\$3,000,000.00					
XY20	\$2,000,000.00	---	N/A (Program Administration Expense)						No limitation applicable

- 8) If the Provider Payments use of funds category is selected for the line item, then the program-specific limitation Provider Payments field will highlight yellow until the full Obligation Amount is accounted for between the Provider Payments and Administrative Costs fields.

Figure 36: Program-Specific Limitations Conditional Formatting – Provider Payments

				Funding Amounts of Program-Specific Limitations (\$)					
Obligation ID	Obligation Amount	---	Use of Funds	Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	Confirmation: No Program-Specific Limitation Applies
XY1	\$16,000,000.00		Provider Payments			\$15,400,000.00			

- 9) If the Capital Expenditures and Infrastructure use of funds category is selected for the line item, then the program-specific limitation Capital Expenditures and Infrastructure field will highlight yellow until the full Obligation Amount is accounted



for between the Capital Expenditures and Infrastructure and Administrative Costs fields.

Figure 37: Program-Specific Limitations Conditional Formatting – Capital Expenditures and Infrastructure

Obligation ID	Obligation Amount	Use of Funds	Funding Amounts of Program-Specific Limitations (\$)					
			Administrative Costs	Capital Expenditures and Infrastructure	Provider Payments	EMR Replacement	Rural Tech Catalyst Fund	Confirmation: No Program-Specific Limitation Applies
XY16	\$38,000,000.00	Capital Expenditures and Infrastructure						

Downstream Obligations Tab

- The Parent ID must be an Entity ID defined on either the First-Tier Entities tab or in an earlier row on the Downstream Obligations tab.** In Figure 38, neither 10 nor 2.1.2 are defined and are therefore the Parent ID field is highlighted yellow. State XY only defined eight first-tier entities, so ID #10 has not yet been defined and in the example above, 2.1 and 2.1.1 were defined, but because there was only one downstream transfer from 2.1 (to 2.1.1), 2.1.2 was never defined.

Figure 38: Downstream Obligations Conditional Formatting – Parent ID

FROM	
Parent ID	Parent Entity
10	
2.1.2	

- A sub-obligation may not result in the parent entity's Obligated Funds Available being negative.** In Figure 39, the Obligation Amounts in 2.2.1 and 2.2.2 have been modified to sum to \$4.5 million, while the entity 2.2 line item only has an Obligation Amount of \$4 million. Both the negative Obligated Funds Available field and the Obligation Amounts of all immediately downstream entities are highlighted yellow.

Figure 39: Downstream Obligations Conditional Formatting – Downstream Sum Exceeds Parent 1

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government	\$5,000,000.00	\$0.00	\$1,500,000.00
2	XY Workforce Development Board	2.2	Regional Workforce Development Board 2	Other Local Government	\$4,000,000.00	\$0.00	-\$500,000.00
2	XY Workforce Development Board	2.3	XY Tribal Training Program	Other Tribal Organization	\$1,000,000.00	\$1,000,000.00	\$0.00
2.1	Regional Workforce Development Board 1	2.1.1	XYZ Rural Technical School	Community College/Technical School	\$3,500,000.00	\$180,000.00	\$3,320,000.00
2.2	Regional Workforce Development Board 2	2.2.1	XXX Organization	Other Rural Healthcare Workforce Training	\$3,000,000.00	\$2,000,000.00	\$1,000,000.00
2.2	Regional Workforce Development Board 2	2.2.2	YYY Organization	Other Rural Healthcare Workforce Training	\$1,500,000.00	\$1,500,000.00	\$0.00



This also applies to the first-tier entity. If the 2.1 Obligation Amount is instead changed to \$6 million, the sum of 2.1, 2.2, and 2.3 would be \$11 million, which is greater than the \$10 million that was obligated to XY Workforce Development Board. This total amount obligated to each first-tier entity (e.g. \$10 million for XY Workforce Development Board) is reported on the First-Tier Entities tab based on entries in the Use of Funds tab.

Figure 40: Downstream Obligations Conditional Formatting – Downstream Sum Exceeds Parent 2

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government	\$6,000,000.00	\$0.00	\$2,500,000.00
2	XY Workforce Development Board	2.2	Regional Workforce Development Board 2	Other Local Government	\$4,000,000.00	\$0.00	\$0.00
2	XY Workforce Development Board	2.3	XY Tribal Training Program	Other Tribal Organization	\$1,000,000.00	\$1,000,000.00	\$0.00

- 3) **The Entity Type dropdown may not be used to select a category label.** The State should only use the indented entity types in the dropdown list; the category labels are only an organizational tool. In Figure 41, State XY incorrectly set Subrecipient 2.1's Entity Type as "Local Government Agencies", which is a category label rather than an entity type.

Figure 41: Downstream Obligations Conditional Formatting – Entity Type

FROM		TO		
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Local Government Agencies

- 10) **A numeric value must be entered into the Spent Funds Against Obligation column.** Once a value has been added to Obligation Amount, a value must also be entered to show the portion of that obligation that has been spent to satisfy the obligation. In Figure 42, State XY should enter a 0 in the cell if none of the \$5 million obligation has been spent at the time of reporting.

Figure 42: Downstream Obligations Conditional Formatting – Spent Funds Value

FROM		TO					
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Obligation Amount	Funds Spent Against Obligation	Obligated Funds Available
2	XY Workforce Development Board	2.1	Regional Workforce Development Board 1	Other Local Government	\$5,000,000.00		\$1,500,000.00

Distribution Reporting Tab

- 1) **The Parent ID must be an Entity ID defined on the First-Tier Entities tab, Downstream Obligations tab, or in an earlier row on the Distribution Reporting tab.** In Figure 43, neither 10 nor 2.1.2 are defined and therefore the Parent ID field is



highlighted yellow. State XY only defined eight first-tier entities, so ID #10 has not yet been defined and in the example above, 2.1 and 2.1.1 were defined, but because there was only one downstream transfer from 2.1 (to 2.1.1), 2.1.2 was never defined.

Figure 43: Distribution Reporting Conditional Formatting – Parent ID

FROM	
Parent ID	Parent Entity
10	
2.1.2	

2) A transfer may not result in the parent entity's Remaining Funds being negative.

In Figure 44, Funds Received by D5.2.1 has been changed from \$3.5 million to \$6.5 million, making the sum of Funds Received by all immediate downstream entities of D5.2 \$12.9 million, while the D5.2 line item only has a Funds Received of \$12 million. Both the negative Remaining Funds field and the Funds Received fields of all immediately downstream entities are highlighted yellow.

Figure 44: Distribution Reporting Conditional Formatting – Downstream Sum Exceeds Parent 1

FROM		TO				
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Funds Received	Remaining Funds
5	XYZ Supplier	D5.1	Sub-contractor 1	Other	\$25,000,000.00	\$25,000,000.00
5	XYZ Supplier	D5.2	Sub-contractor 2	Other	\$12,000,000.00	-\$900,000.00
5	XYZ Supplier	D5.3	Sub-contractor 3	Other	\$18,500,000.00	\$18,500,000.00
5	XYZ Supplier	D5.4	Quality Organization ABC	Quality Improvement Organization	\$3,800,000.00	\$3,800,000.00
D5.2	Sub-contractor 2	D5.2.1	Sub-contractor 4	Other	\$6,500,000.00	\$6,500,000.00
D5.2	Sub-contractor 2	D5.2.2	Sub-contractor 5	Other	\$2,700,000.00	\$2,700,000.00
D5.2	Sub-contractor 2	D5.2.3	Sub-contractor 6	Other	\$1,200,000.00	\$1,200,000.00
D5.2	Sub-contractor 2	D5.2.4	Sub-contractor 7	Other	\$2,500,000.00	\$2,500,000.00

3) A transfer may not result in the sum of a parent entity's transfers exceeding its

Spent Funds Against Obligation. In Figure 45, the Funds Received by Quality Organization ABC was entered at \$38 million instead of \$3.8 million, resulting in the sum of D5.1–D5.4 exceeding the \$72 million that State XY has disbursed to XYZ supplier, as recorded on the Use of Funds tab. The Funds Received fields of all immediately downstream entities are highlighted yellow.

Figure 45: Distribution Reporting Conditional Formatting – Downstream Sum Exceeds Parent 2

FROM		TO				
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type	Funds Received	Remaining Funds
5	XYZ Supplier	D5.1	Sub-contractor 1	Other	\$25,000,000.00	\$25,000,000.00
5	XYZ Supplier	D5.2	Sub-contractor 2	Other	\$12,000,000.00	\$2,100,000.00
5	XYZ Supplier	D5.3	Sub-contractor 3	Other	\$18,500,000.00	\$18,500,000.00
5	XYZ Supplier	D5.4	Quality Organization ABC	Quality Improvement Organization	\$38,000,000.00	\$38,000,000.00

- 4) **The Entity Type dropdown may not be used to select a category label.** The State should only use the indented entity types in the dropdown list; the category labels are only an organizational tool. In Figure 46, State XY incorrectly set Subrecipient D5.4's Entity Type as "Other Entity Types", which is a category label rather than an entity type.

Figure 46: Distribution Reporting Conditional Formatting – Entity Type

FROM		TO		
Parent ID	Parent Entity	Entity ID	Downstream Entity (Subrecipient or Contractor)	Entity Type
5	XYZ Supplier	D5.1	Sub-contractor 1	Other Entity Types

Appendix C: Table of Figures

Figure 1: First-Tier Entity Data Entry	32
Figure 2: First-Tier Entities Funds Received	43
Figure 3: First-Tier Entities Initiatives and Use of Funds Categories	65
Figure 4: Similar Obligations Example	86
Figure 5: Multiple Initiatives Example.....	97
Figure 6: Multiple Use of Funds Categories Example.....	97
Figure 7: Multiple Initiatives and Use of Funds Categories Example	108
Figure 8: Multiple Budget Periods Example	118
Figure 9: "N/A (Program Administration Expense)" Use of Funds Example	119
Figure 10: Initiative Number "All" Option Example	119
Figure 11: Funds Remaining Within the Awardee Agency Example	121
Figure 12: Program-Specific Limitations and Amount of Award	121
Figure 13: One Program-Specific Limitation Example.....	141
Figure 14: Multiple Program-Specific Limitations Example	141
Figure 15: No Program-Specific Limitations Example	141
Figure 16: Downstream Obligations Tab Headers	161
Figure 17: Entering First-Tier Entity as Parent ID	171
Figure 18: Downstream Entity ID Automatic Population	181
Figure 19: Populating Downstream Entity and Entity Type.....	181
Figure 20: Entering Obligation Amount.....	181
Figure 21: Populating Additional Second-Tier Entities	191

Figure 22: First-Tier Entities tab Remaining Funds.....	1916
Figure 23: Entity #2 Downstream Entities Population Example.....	2017
Figure 24: Downstream Obligations Row Order Flexibility.....	2118
Figure 25: Distribution Reporting Tab Structure and Entity ID Assignment.....	2219
Figure 26: Distribution Reporting Tab Example	2426
Figure 27: First-Tier Entities Conditional Formatting – Entity Type	2723
Figure 28: First-Tier Entities Conditional Formatting – Remaining Funds	2724
Figure 29: Use of Funds Conditional Formatting – Spent Funds Exceeds Obligation	2724
Figure 30: Use of Funds Conditional Formatting – Spent Funds Value Missing	2824
Figure 31: Use of Funds Conditional Formatting – Use of Funds/Program-Specific Limitation Misaligned	2824
Figure 32: Program-Specific Limitations Conditional Formatting – Confirmation Needed	2825
Figure 33: Program-Specific Limitations Conditional Formatting – Errant Confirmation	2925
Figure 34: Program-Specific Limitations Conditional Formatting – Sum Exceeds Obligated Funds	2925
Figure 35: Program-Specific Limitations Conditional Formatting – Administrative Costs.....	2926
Figure 36: Program-Specific Limitations Conditional Formatting – Provider Payments	2926
Figure 37: Program-Specific Limitations Conditional Formatting – Capital Expenditures and Infrastructure	3026
Figure 38: Downstream Obligations Conditional Formatting – Parent ID	3027
Figure 39: Downstream Obligations Conditional Formatting – Downstream Sum Exceeds Parent 1	3027
Figure 40: Downstream Obligations Conditional Formatting – Downstream Sum Exceeds Parent 2	3127
Figure 41: Downstream Obligations Conditional Formatting – Entity Type.....	3128
Figure 42: Downstream Obligations Conditional Formatting – Spent Funds Value	3128
Figure 43: Distribution Reporting Conditional Formatting – Parent ID	3228
Figure 44: Distribution Reporting Conditional Formatting – Downstream Sum Exceeds Parent 1	3229
Figure 45: Distribution Reporting Conditional Formatting – Downstream Sum Exceeds Parent 2	3329
Figure 46: Distribution Reporting Conditional Formatting – Entity Type.....	3329

Stage	Checkpoint
Stage 0 – Planning	0.1 Establish governance
	0.2 Submit project plan to CMS
Stage 1 – Project Preparation	1.1 CMS approval of project plan
	1.2 Launch initiative
Stage 2 – Early	2.1 Continue initiative activities
	2.2 Achieve at least one post-launch milestone

Stage 2 – Early
Implementation

2.3 Establish metric reporting methodology

2.4 Submit updated project plan to CMS

Stage 3 – Midway
Implementation

3.1 CMS approval of updated project plan

3.2 **Complete Q2 2028 milestones**

3.3 **Report initial metric progress to CMS**

Stage 4 – Preparation for
Completion

4.1 Share final deliverables plan with CMS

4.2 CMS approval of final deliverables plan

	4.3 Complete post-program planning
Stage 5 – Full Implementation	5.1 Submit final deliverables to CMS
	5.2 Complete all 2030 milestones
	5.3 Report updated metric progress to CMS

¹ Change Control and CMS Review:

Submission and CMS review/approval of project plan, milestone submitted to CMS for review and approval before being finalized experience, funding adjustments, or extenuating circumstance

² Milestone Review Considerations:

CMS review of milestones is intended to ensure milestones pro plan, reflect meaningful implementation activities, are reasonable expect milestones to change absent implementation experience

Examples of Acceptable Evidence	Weight	
Organizational chart	5%	10%
Project plan	5%	
CMS approval	5%	10%
Go-live memo, public announcement, evidence of payment, executed contract	5%	
Progress reports, implementation updates, receipts, other documentation In-progress project plan or similar implementation tracking document	5%	
Utilization report, project plan, dashboards In-progress project plan or similar implementation tracking document	5%	

Metric targets, baseline, and data collection methodology	5%	20%
Updated project plan	5%	
CMS approval	5%	
Utilization report, project plan, dashboards In-progress project plan or similar implementation tracking document	10%	25%
Report with initial metric progress and/or reporting methods	10%	
Draft report, reporting template/outline	5%	
CMS approval	5%	20%

Sustainability plan, lessons learned, external funding, legislation	10%	
Final report, dashboards	5%	15%
Utilization report, project plan, dashboards Project plan or similar implementation tracking document	5%	
Report with values and reporting method for all metrics	5%	

e, and metric changes are program requirements under the NOFO and are not limited to checkpoint scoring and or operationalized. Updates may be submitted during checkpoint reporting (quarterly/annual), or at another time consistent with the NOFO.

provide a reasonable framework for tracking implementation progress over the period of performance. When revisions are reasonably timed and achievable, and are supported by sufficient justification consistent with the NOFO. Changes to the plan, funding adjustments, extenuating circumstances, or other sufficient justification consistent with the NOFO.

Guidance

Provide a simple organizational chart showing the governance and oversight structure for the initiative. The chart should identify oversight and reporting relationships across the program structure, including the State, subrecipients, and sub-subrecipients, as applicable.

States should present the structure at an appropriate level for initiative oversight and are not expected to list every individual subrecipient entity where groups or categories can be reasonably consolidated. Submissions should remain concise and focused on oversight roles and reporting relationships relevant to program administration.

Provide operational information in a structured format consistent with industry-standard project planning practices. The State should submit a project plan for each initiative. The initiative project plans should include each milestone from the approved State application and the respective completion dates. The State may choose to include additional tasks beyond the required milestones in the project plans, if desired. States may leverage the project plan template provided by CMS to create their initiative project plans or may use their preferred format as long as it accurately maps the application milestones to completion dates. **Industry-standard project planning is typically performed in Excel or a similar structured format rather than in narrative form, and the State should include data fields similar to those in the project plan template (e.g., milestone/task, start and end dates, status, task owner, etc.).**

CMS approval means the project plan is complete enough for implementation and aligns with the NOFO, standard and program terms and conditions, and the approved State application.² The State should retain the CMS approval communication for its records.

Provide evidence that the initiative has moved from planning to execution. Evidence should show that at least one program, activity, subaward, contract, payment, go-live action, or equivalent implementation step is underway; issuing a NOFO or RFP alone is not sufficient. **At least one executed contract may serve as evidence that the initiative has launched.**

Provide evidence that a broad range of initiative activities have continued after launch. Evidence should demonstrate implementation beyond initial startup activities and should reasonably reflect continued implementation across the initiative, rather than only a single activity or small selection of activities. **An in-progress project plan or similar implementation tracking document showing multiple tasks in progress during the reporting period may support this checkpoint.**

Provide evidence that at least one post-launch milestone from the approved State application has been completed. The milestone should reflect substantive implementation progress tied to the approved project plan, and the documentation should clearly connect the evidence to the milestone achieved. This milestone must directly relate to the substance of the initiative, as opposed to administrative or project management milestones such as issuing RFPs, establishing governance, etc. **An in-progress project plan or similar implementation tracking document showing the milestone as complete may support this checkpoint, provided the milestone is tied to the approved project plan and reflects substantive implementation progress.**

Submit this update after subrecipients have been selected and established. At this stage, States are expected to provide a more developed and operational metric reporting and analysis methodology than what was proposed in the application. Submissions should reflect finalized metric approaches, including how methodologies are being implemented in practice, rather than projections or planned models.

Submit an updated project plan reflecting implementation progress and any refinements to activities, timelines, milestones, responsible parties, or dependencies, as appropriate to the State's approach. The updated plan should continue to operationalize the milestones approved by CMS and demonstrate how implementation has evolved since the initial project plan submission.

The plan should continue to follow a structured format consistent with standard project planning practices. States may reference provided examples to inform format and level of detail.

CMS approval means the updated project plan adequately reflects implementation experience and remains aligned with the NOFO, terms and conditions, and approved State application. The State should retain the CMS approval communication for its records.

Provide evidence that all milestones scheduled for completion by Q2 2028 have been completed, unless CMS has approved an adjustment. Submissions should confirm that milestone activities have been carried out and are complete. Evidence should clearly reflect fulfillment of the specified milestones and be supported by appropriate documentation.

Report initial progress for each initiative metric. The report should explain the direction and meaning of progress, including whether data are delayed, unavailable, stagnant, improving, or declining, and should describe the reason for any limited or unexpected results.

Share the plan for final deliverables with CMS. The plan should describe what the State will submit at the end of the initiative, the expected format, responsible parties, timeline, and how the deliverables will demonstrate appropriate use of funds and initiative outcomes.

CMS approval means the final deliverables plan is complete, feasible, and aligned with program requirements. The State should retain the CMS approval communication for its records before proceeding toward final deliverable submission.

Provide post-program planning that explains how each activity or benefit of the initiative will be sustained, transitioned, completed, or responsibly closed out after RHT Program funding ends. Evidence may include sustainability plans, funding strategies, transition plans, partner commitments, or closeout plans.

Submit the final deliverables described in the CMS-approved final deliverables plan. Deliverables should be complete, organized, and clearly aligned with the approved plan and any required final reporting expectations.

Provide evidence that all milestones scheduled for completion by 2030 have been completed. Submissions should confirm that milestone activities have been carried out and are complete. Evidence should clearly reflect fulfillment of the specified milestones and be supported by appropriate documentation.

Report final progress for each initiative metric. The report should include complete metric results, the methodology used to calculate them, any validation or quality-control steps, and explanations for trends, limitations, or delayed data where relevant.

activities. States should notify CMS as soon as material changes are anticipated. Material changes must be determined appropriate by CMS and the State. States may propose revisions due to implementation

viewing milestones, CMS may consider whether milestones are aligned with the approved initiative and project. Approved milestones remain subject to Footnote ¹ regarding Change Control and CMS Review. CMS would not



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RURAL HEALTH TRANSFORMATION (RHT) PROGRAM:

A GUIDE TO STATE AWARDEE REPORTING

Last Updated: July ~~me~~ 16~~2~~, 2026

Table of Contents

I. Introduction	42
II. RHT Program Reporting Requirements	53
III. Reporting Cadence & Periods	53
IV. Annual, Quarterly, and Final Reports	64
Annual Reporting	64
Quarterly Reporting	74
Final Report	74
V. Reporting Elements	75
VI. Completing Your Reports	85
VII. Getting Started – Submitting Your Initial Annual Report	96
Instructions	97
1. Initiative Forms	107
2. State Policy Actions Form	174
3. Obligated and Spent Funds Reporting Tabs	224
4. Additional Information Form	224
5. Submitting Evidentiary Documentation	257
6. Submitting Your Initial Annual Report	261
VIII. Subsequent Reporting - MDCT RHTP Platform	292
Instructions	292
1. General Information	302
2. Initiative Attachments	322
3. Initiatives	392
4. State Policy Action Commitments	443
5. Obligated and Spent Funds Reporting	453
6. Sustainability and Highlights	473
7. Review & Submit	493
IX. Appendix	514
A. Reporting Periods – Annual and Quarterly Reporting	514



B. Resources	5341
C. State Progress Reporting Frequently Asked Questions (FAQs)	5341
Reporting Submission Process (Initial Annual Reporting)	5341
Evidentiary Documentation	5342
State Reporting Non-Compliance	5342
D. Table of Figures	5442
I. Introduction	2
II. RHIT Program Reporting Requirements	3
III. Reporting Cadence & Periods	3
IV. Annual, Quarterly, and Final Reports	3
Annual Reporting	3
Quarterly Reporting	4
Final Report	4
V. Reporting Elements	4
VI. Completing Your Reports	5
VII. Getting Started – Submitting Your Initial Annual Report	6
Instructions	6
1. Initiative Forms	7
2. State Policy Actions Form	11
3. Obligated and Spent Funds Reporting Tabs	14
4. Additional Information Form	14
5. Submitting Evidentiary Documentation	16
6. Submitting Your Initial Annual Report	17
VIII. Subsequent Reporting – MDCT RHITP Platform	18
Instructions	18
1. General Information	19
2. Initiative Attachments	20
3. Initiatives	26
4. State Policy Commitments	32

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5. Use of Funds Reporting	33
6. Sustainability and Highlights	35
7. Review & Submit.....	37
IX. Appendix	39
A. Reporting Periods – Annual and Quarterly Reporting.....	39
B. Resources	39
C. State Progress Reporting Frequently Asked Questions (FAQs)	40
Reporting Submission Process (Initial Annual Reporting)	40
Evidentiary Documentation	40
State Reporting Non-Compliance	40
D. Table of Figures	41

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I. Introduction

As partners in a Cooperative Agreement, we have a shared goal: the success of your State's Rural Health Transformation (RHT) Program. Your core responsibility is to comply with all Terms and Conditions in your Notice of Award (NoA). Here's what that looks like in practice:

- ✓ **Fulfilling Requirements:** Submit all required reporting as detailed in your NoA.
- ✓ **Managing Your Work Plan:** Submit performance measures as agreed upon and submit subsequent revisions to your work plan for CMS approval.
- ✓ **Staying Connected:** Collaborate with your Project Officer (PO), and, as applicable, your Grants Management Specialist (GMS) to discuss progress and seek support on reporting activities as needed. An active partnership is key to success!
- ✓ **Subrecipient Oversight:** Confirm that your subrecipients, contractors, and partners are compliant with all administrative and policy requirements, including reporting. Note that the Terms and Conditions of the NoA flow down to subrecipients.

Resources & Support

We are here to help you succeed! To ensure seamless, coordinated support, please copy both your PO and GMS on all correspondence. Direct programmatic questions to your PO, and financial or award administration questions to your GMS.

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The primary goal of this guide is to equip you with the knowledge and tools needed to meet your post-award reporting responsibilities efficiently and effectively. Timely and accurate reporting is the principal way we measure progress, promote accountability, and document the incredible work being done. The information you provide is critical for demonstrating the value of the RHT program and informing program funding decisions.

For additional supplemental information and reference materials, please refer to the [Appendix section](#).

After reviewing this guide, you will be able to prepare the following progress reports that meet RHT Program requirements:

1. **Annual Reports, including the Final Report**
2. **Quarterly Reports**



II. RHT Program Reporting Requirements

While this guide focuses on the successful preparation and submission of Annual and Quarterly Reports, as well as the Final Report, it is important to recognize that these reports are part of a broader landscape of post-award responsibilities. The full scope of federal reporting requirements, as detailed in the [Notice of Funding Opportunity \(NOFO\)](#), includes:

- *Non-Competing Continuation (NCC) Application*
- *Federal Financial Reports (FFR)*
- *Federal Funding Accountability and Transparency Act (FFATA) Reporting*
- *Work Plan Updates*
- *Progress Reports*
- *SAM.gov Records*
- *Payment Management System (PMS) Reports, and*
- *Audit Reporting*

Please refer to the Program Terms and Conditions located within a State's NoA, [NOFO](#), and [CMS website](#) for additional information.

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III. Reporting Cadence & Periods

State awardees are required to submit Annual and Quarterly Progress Reports along with a one-time Final Report. Progress reports must be submitted for all five budget periods (FY26-FY30). These reports are crucial to CMS to make funding decisions for subsequent budget periods.



The first Annual Report, which covers the reporting period from December 29th, 2025, to July 31st, 2026, is due August 31st, 2026. ~~The first Quarterly reporting will commence~~ start in Budget Period 2 of the program. For a comprehensive table of reporting dates, refer to [Appendix A](#).

Initial Resources & Support Annual Report Due Date Change

Please note, the Terms and Conditions and previous communications stated that programmatic reporting is due on August 30. Because August 30, 2026 falls on a Sunday, the RHT Program Annual Report will be due by 11:59 PM EDT on Monday, August 31, 2026. This date aligns with the NCC Kit due date. We are here to help you succeed! To ensure seamless, coordinated support; please copy both your PO and GMS on all correspondence. Direct programmatic questions to your PO, and financial or award administration questions to your GMS.

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IV. Annual, Quarterly, and Final Reports

~~The following is a breakdown of each progress report that is required throughout the RHT Program. The following section details each of the progress reports required throughout the RHT Program.~~

Annual Reporting

The **Annual Report** delivers a summary of programmatic progress over the reporting period. ~~Specific components~~ Aspects of the **Annual Report** will be scored and used to determine subsequent funding. Within this report, States will report ~~progress~~ on the following:

- Initiative Progress [Narrative](#)
- Initiative People Served
- Initiative Metrics
- [Initiative Checkpoints](#)
- State Policy Action (SPA) Commitments
- Obligated and Spent Funds
- Success Stories and Highlights
- Sustainability Planning
- Definition of Rural Area (only Annual Report 1)



Quarterly Reporting

The **Quarterly Report** will encompass ~~all programmatic progress activities achieved/completed~~ during the specified ~~quarter/quarter~~. The information from these quarterly reports will be used to progressively build and update the Annual Report throughout each budget period. The general reporting periods are as follows: August 1–October 30, October 31–January 30, and January 31–April 30. States should refer to [Appendix A](#) for a comprehensive view of all reporting periods and deadlines. [Within this report](#), States ~~will be required to~~ report ~~progress~~ on the following:

- Initiative Progress [Narrative \(optional\)](#)
- [Initiative Checkpoints](#)
- [State Policy Action Commitments](#)
- [Metrics \(optional\)](#)
- **Obligated and Spent Funds**
- **Success Stories and Highlights (optional)**

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Final Report

Upon completion of the RHT Program, States are required to submit a one-time only **Final Report**, due February 27th, 2031. The Final Report serves to comprehensively document all programmatic activities and initiatives executed throughout the RHT Program's entire period of performance. More information regarding the Final Report will be disseminated closer to the end of the respective reporting period.

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V. Reporting Elements

Across all progress reports, States document their progress across several key areas established by CMS. Although not all reported information is used for scoring, every element is essential for comprehensive oversight and support. ~~Narrative updates and participant metrics help CMS understand exactly how State plans are being put into action. Additionally, Obligated and Spent Funds reporting maintains fiscal transparency, while success stories and sustainability planning highlight real-world outcomes and post-funding momentum. The definition of rural, reported only in Annual report #1, provides transparency into the definition of 'rural area' that the State used to determine whether subrecipients were considered to be rural. Ultimately, The following components collectively demonstrate the operational progress, financial stewardship, and impact of the RHT program. these cohesive elements create a complete picture of operational progress, financial stewardship, and long-term impact within the RHT Program.~~



Data elements that determine scoring will be your initiative checkpoints and progress towards State **P**olicy **A**ction **C**ommitments. [Detailed descriptions for each data element are provided below](#)

[The breakdown below provides further guidance for States to understand the specific requirements for each progress report data element:](#)

- **Initiative Progress Narrative:** Progress updates on milestones and the implementation of initiatives.
- **Initiative People Served:** Provides quantitative context to initiatives and the number of people served.
- **Initiative Metrics:** Quantitative updates on the metrics the State is tracking as part of its approved work plan.
- **Initiative Checkpoints:** Provides context on where States are at with their progress towards the initiative-based score factors.
- **State Policy Actions Commitments:** Progress updates on the State awardee's proposed policy actions as detailed in the approved work plan.
- **Obligated and Spent Funds:** Provides fiscal context on the State's RHT Program expenditures and subrecipients.
- **Success Stories:** Highlights success stories that came out of the State's initiatives that showcase real-world impact of the RHT Program.
- **Sustainability Planning:** Updates on how you plan to sustain successful initiatives after the RHT Program funding ends (after FY31).
- **Definition of Rural:** Provide the definition of 'rural area' that the State used to determine whether subrecipients were considered to be rural (*only Annual Report 1*).

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VI. Completing Your Reports

The following section details the submission procedures for the RHT Program's reporting cycle. The initial Annual Report utilizes an Excel-based template structured around four core components, represented as individual tabs. Comprehensive instructions for completing the Excel template for the initial year are detailed in [Section VII. Getting Started – Submitting your Initial Annual Report](#).

Following the initial report, all subsequent reporting will transition to a web-based system housed within the Medicaid Data Collection Tool (MDCT), referred to as the MDCT RHTP platform. This platform provides States with a centralized workspace to submit updates, upload evidentiary documentation, and communicate with their POs. The first submission utilizing this new system will be the [first](#) Quarterly Report due on November 29th, 2026.



Detailed instructions for navigating and completing reports via the MDCT RHTP platform are outlined in [Section VIII. Subsequent Reporting – MDCT RHTP Platform](#).

VII. Getting Started – Submitting Your Initial Annual Report

To facilitate a timely and accurate initial Annual Report submission, States should coordinate closely with their Project Officers (POs) to establish an ongoing, rolling review of the report's various components. Because revisions cannot be accommodated after the August 31st, 2026 submission deadline, this continuous collaboration is critical to ensure all elements are finalized, reviewed, and approved in a timely manner.

In the initial Annual Report, States ~~are to~~ provide the definition of 'rural area' that the State used to determine whether subrecipients were considered to be rural. States will use this same definition to determine rural entities throughout the duration of the RHT Program, ~~therefore, so~~ the definition does not need to be included in subsequent reporting. [States will report their definition of rural in the Additional Information Form.](#)

For example, in this field, a State may report that they define rural using the following definition from the Health Resources & Services Administration (HRSA):

- *Non-metropolitan counties*
- *Outlying metropolitan counties with no population from an urban area of 50,000 or more people*
- *Census tracts with Rural-Urban Commuting Area (RUCA) codes 4-10 in metropolitan counties*
- *Census tracts of at least 400 square miles in area with population density of 35 or fewer people per square mile with RUCA codes 2-3 in metropolitan counties*

Instructions

The Excel Reporting Template is organized into four core sections:

- **Initiative Reporting Section**
 - Checkpoint Guidance Tab
 - Initiative Forms
- **State Policy Actions Form**
- **Obligated and Spent Funds Reporting Section**
 - Entity Type Guidance Tab
 - First-Tier Entities Form



- Use of Funds Form
- Downstream Obligations Form
- Distribution Reporting

- **Additional Information Form**

- Success Stories
- Sustainability Planning
- Rural Definition

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Important Formatting Note: Please do not alter the underlying structure of the Excel Reporting Template, though you may adjust row heights and column widths for readability. To streamline reporting, CMS will pre-populate certain fields—such as Initiative Name and Initiative Number in the Initiative Forms—based on your approved application. Please note that all forms (tabs) must be fully completed for the report to be considered final.

Alongside the Excel Reporting Template, States should submit all supporting evidentiary documentation directly to their PO for review, via email to accompany the initial Annual Report. This submission should include any files demonstrating progress toward initiative checkpoints and State Policy Action **C**ommitments. See [the Submitting Evidentiary Documentation section below for more information](#). **All forms (tabs) must be completed for the submitted report to be considered final.**

The sections below provide additional details for each of the four main components of the Excel Reporting Template.

1. Initiative Forms

The purpose of the Initiative Forms is to report on the progress, metrics, and checkpoint completion for each approved State initiative.

In the Excel Reporting Template, there will be a separate Initiative Form (tab) for each initiative.

Figures 1 and 2 below show a draft Initiative Form completed with a hypothetical example to illustrate the required information.

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Figure 1⁺: Initiative Form (Top)

#	Initiative Name		
1	Rural Mobile Maternal Health Initiative		
Narrative			
Over the past year, we deployed five fully equipped Mobile Maternity Clinics across 12 of our most underserved counties, effectively eliminating geographic barriers to care. This proactive approach has enabled us to deliver over 2,500 prenatal and postpartum visits directly to expectant mothers, driving a 40% increase in first-trimester care initiation. By integrating satellite-enabled telehealth for high-risk specialist consultations and employing local community health workers to build trust, we have not only expanded essential access but fundamentally transformed the maternal health infrastructure for our rural populations.			
Number of People Served			
620			

Figure 422: Initiative Form (Bottom)

Metrics			
#	Metric	Current Value	As of Date
1	Number of Maternal Care Providers	5	7/15/2026
2			
3			
4			
Stage 0 – Planning			
	Checkpoint	Yes/No	Attachment(s)
0.1	Establish governance	Yes	StateX_Init_1_Checkpoint_0.1a.pdf
0.2	Submit project plan to CMS	Yes	StateX_Init_1_Checkpoint_0.2a.xlsx
Stage 1 – Project Preparation			
	Checkpoint	Yes/No	Attachment(s)
1.1	CMS approval of project plan	Yes	StateX_Init_1_Checkpoint_1.1a.msg
1.2	Launch initiative	Yes	StateX_Init_1_Checkpoint_1.2a.pdf
Stage 2 – Early Implementation			
	Checkpoint	Yes/No	Attachment(s)
2.1	Continue initiative activities	Yes	StateX_Init_1_Checkpoint_2.1a.xlsx
2.2	Achieve at least one post-launch milestone	Yes	StateX_Init_1_Checkpoint_2.2a.xlsx
2.3	Establish metric reporting methodology	No	
2.4	Submit updated project plan to CMS	No	
Stage 3 – Midway Implementation			
	Checkpoint	Yes/No	Attachment(s)
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 – Preparation for Completion			
	Checkpoint	Yes/No	Attachment(s)
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 – Full Implementation			
	Checkpoint	Yes/No	Attachment(s)
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	
Over the past year, we deployed five fully equipped Mobile Maternity Clinics across 12 of our most underserved counties, effectively eliminating geographic barriers to care. This proactive approach has enabled us to deliver over 2,500 prenatal and postpartum visits directly to expectant mothers, driving a 40% increase in first-trimester care initiation. By integrating satellite-enabled telehealth for high-risk specialist consultations and employing local community health workers to build trust, we have not only expanded essential access but fundamentally transformed the maternal health infrastructure for our rural populations.			
Number of People Served 620			

Figure 3: Metrics and Checkpoints

Metrics			
#	Metric	Current Value	As of Date
1	Number of Maternal Care Providers	5	7/15/2026
2			
3			
4			
Stage 0 – Planning			
Checkpoint	Yes/No	Attachment(s)	
0.1	Establish governance	Yes	StateX_Init_1_Checkpoint_0.1a.pdf
0.2	Submit project plan to CMS	Yes	StateX_Init_1_Checkpoint_0.2a.xlsx
Stage 1 – Project Preparation			
Checkpoint	Yes/No	Attachment(s)	
1.1	CMS approval of project plan	Yes	StateX_Init_1_Checkpoint_1.1a.msg
1.2	Launch initiative	Yes	StateX_Init_1_Checkpoint_1.2a.pdf
Stage 2 – Early Implementation			
Checkpoint	Yes/No	Attachment(s)	
2.1	Continue initiative activities	Yes	StateX_Init_1_Checkpoint_2.1a.xlsx
2.2	Achieve at least one post-launch milestone	Yes	StateX_Init_1_Checkpoint_2.2a.xlsx
2.3	Establish metric reporting methodology	No	
2.4	Submit updated project plan to CMS	No	
Stage 3 – Midway Implementation			
Checkpoint	Yes/No	Attachment(s)	
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 – Preparation for Completion			
Checkpoint	Yes/No	Attachment(s)	
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 – Full Implementation			
Checkpoint	Yes/No	Attachment(s)	
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	

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Number of People Served			
Please provide the number of people served			
Metrics			
#	Metric	Current Value	As of Date
1	Number of Maternal Care Providers	5	7/15/2026
2			
3			
4			
Stage 0 – Planning			
Checkpoint	Yes/No	Attachment(s)	
0.1	Establish governance	Yes	StateX_Init_1_Checkpoint_0.1a
0.2	Submit project plan to CMS	Yes	StateX_Init_1_Checkpoint_0.2a
Stage 1 – Project Preparation			
Checkpoint	Yes/No	Attachment(s)	
1.1	CMS approval of project plan	Yes	StateX_Init_1_Checkpoint_1.1a
1.2	Launch initiative	Yes	StateX_Init_1_Checkpoint_1.2a
Stage 2 – Early Implementation			
Checkpoint	Yes/No	Attachment(s)	
2.1	Continue initiative activities	Yes	StateX_Init_1_Checkpoint_2.1a
2.2	Achieve at least one milestone	Yes	StateX_Init_1_Checkpoint_2.2a
2.3	Establish metric reporting methodology	No	
2.4	Submit updated project plan to CMS	No	
Stage 3 – Midway Implementation			
Checkpoint	Yes/No	Attachment(s)	
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 – Preparation for Completion			
Checkpoint	Yes/No	Attachment(s)	
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 – Full Implementation			
Checkpoint	Yes/No	Attachment(s)	
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	

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Figure 2 above shows a draft Initiative Form completed with a hypothetical example to illustrate the required information.

Figure 3 below includes the relevant data fields in the Initiative Form, instructions for how to fill out each data field, and an example data value for each field. **Please note, the examples below are notional and should only be used as a guide.**

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Figure 343: Initiative Form Instructions

Data Field	Instructions	Example
Initiative Number	This field will be pre-populated in the Excel Reporting Template.	1
Initiative Name	This field will be pre-populated in the Excel Reporting Template.	Rural Maternal Mobile Health Clinic Initiative

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Narrative	Provide a concise update on the progress of each initiative during the reporting period. Responses should focus on key activities completed, milestones reached, challenges encountered, and any notable outcomes or impacts to date.	<i>Over the past year, we deployed five fully equipped Mobile Maternity Clinics across 12 of our most underserved counties, effectively eliminating geographic barriers to care. This proactive approach has enabled us to deliver over 2,500 prenatal and postpartum visits directly to expectant mothers, driving a 40% increase in first-trimester care initiation. By integrating satellite-enabled telehealth for high-risk specialist consultations and employing local community health workers to build trust, we have not only expanded essential access but fundamentally transformed the maternal health infrastructure for our rural populations.</i>
	This section is intended for progress reporting purposes only and should not repeat the full project narrative from the NCC Kit. Please focus on recent initiative progress and avoid including broad background information unless it is necessary for context.	
	States are encouraged to include any relevant updates that may be important for CMS to understand the status, implementation progress, or emerging results of the initiative.	
Note: The Narrative is optional for quarterly reporting.	Please limit responses to 2,000 characters, or approximately 250–350 words.	
Number of People Served	Provide your best estimate of the number of individuals who have benefited from RHT Program funds during the reporting period. Estimates should be reasonable, supported by available data, and reflect the scope and reach of the initiative. For system-based initiatives that do not provide direct services (e.g., IT systems, Health Information Exchanges), States	620

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	may define the number of people served more broadly. For example: ▪ For health system–level initiatives, the number served may reflect the total population served by the system. ▪ For statewide systems (e.g., HIEs), the number served may reflect the number of patients with data in the system or the total number of state residents. ▪ These estimates do not need to be de-duplicated and do not need to be limited to rural populations if the initiative has a broader reach. ▪ States should aim to provide the most accurate and justifiable estimate possible and may include brief context in the narrative section if helpful for CMS’s understanding. Note: Number of People Served is only reported annually.
Metrics	The metrics for each initiative will be pre-populated based on the information provided in your application or most current information available based on clarifications and clarified in your Initiative Information Report. Note: Metrics are only <u>required</u> to be reported <u>in the annual</u>

	reports and are optional to report in quarterly reports annually.		
Metric Current Value	The latest value for the corresponding metric.	5	Formatted: Centered
Metric As of Date	The date that the current value was measured in the following format: (XX/XX/XXXX).	03/15/2026	Formatted: Centered
Checkpoints	For each stage, the checkpoint number and description are pre-populated.	0.1 Establish Governance	Formatted: Centered
Yes/No	Select "Yes" if the checkpoint is complete; Select "No" if the checkpoint is not yet complete.	Yes	Formatted: Centered
Attachment(s)	Paste in the attachment file names of the evidentiary documentation files that correspond to the relevant initiative and checkpoint. StateX_Init_1_Checkpoint_0.12-2a.pdf StateX_Init_1_Checkpoint_02.2b.xlsx StateX_Init_1_Checkpoint_12.12c.msg <u>Alternatively, States may compile evidentiary documentation into a Master Initiative Attachments PDF and reference the Initiative # and Stage/Checkpoint # section heading in the Master Initiative Attachments PDF.</u> <u>OR</u> <u>"Initiative 1 Checkpoint 0.1 Evidentiary Documentation" section in the Master Initiative Attachments PDF</u>		

2. State Policy Actions Form

The State Policy Actions (SPA) Form is designed to capture the progress and status of the specific policy commitments established in a State's approved application. Please note that States are only eligible to receive credit for policy actions committed to in their initial application.



Figure 4 below shows a draft State Policy Action Commitments Form completed with a hypothetical example to illustrate the required information. **Please note, there are additional fields in a section titled “CMS Review (CMS Use Only)” in the State Policy Actions Form (not pictured in Figure 5 below), which should not be populated by States.**

Figure 544: State Policy Actions Form

Score Factor	Workload Funding Score Factor Criterion	Baseline	Commitment	Current Status	Supporting Evidence	Optional Comments/Notes
B.2.	Presidential Fitness Test	0 Points: A State does not require schools to reestablish the Presidential Fitness Test	100 Points: A State requires schools to reestablish the Presidential Fitness Test that is aligned with federal guidance associated with Executive Order 14327	0 Points: A State does not require schools to reestablish the Presidential Fitness Test	StateX_SPA_B.2	
B.3.	SNAP Food Restriction Waiver Policy	0 Points: State has no pending or approved USDA SNAP food restriction waiver prohibiting the purchase of non-nutritious items or no pending State bill requiring a food restriction waiver be submitted to USDA	100 Points: USDA approved State waiver prohibiting the purchase of non-nutritious items in SNAP	75 Points: State submitted a waiver prohibiting the purchase of non-nutritious items in SNAP and waiver is in processing with USDA	SNAP Food Waiver Legislation: www.legislature.state.X.gov/bills/2026/HB125	
B.4.	Nutrition Continuing Medical Education	0 Points: States that have no requirement for nutrition to be included in continuing medical education (CME) for physicians as well as no pending State bill requiring nutrition to be included in CME for physicians	100 Points: Requirement for nutrition to be included in CME for physicians is currently in place and enforced	0 Points: States that have no requirement for nutrition to be included in continuing medical education (CME) for physicians as well as no pending State bill requiring nutrition to be included in CME for physicians	StateX_SPA_B.4	

Score Factor	Workload Funding Score Factor Criterion	Baseline	Commitment	Current Status	Supporting Evidence	Optional Comments/Notes
C.3.	B.2. Presidential Fitness Test	0 Points: A State does not require schools to reestablish the Presidential Fitness Test	100 Points: A State requires schools to reestablish the Presidential Fitness Test that is aligned with federal guidance associated with Executive Order 14327	0 Points: A State does not require schools to reestablish the Presidential Fitness Test	StateX_SPA_B.2.pdf	
	B.3. SNAP Food Restriction Waiver Policy	0 Points: State has no pending or approved USDA SNAP food restriction waiver prohibiting the purchase of non-nutritious items or no pending State bill requiring a food restriction waiver be submitted to USDA	100 Points: USDA approved State waiver prohibiting the purchase of non-nutritious items in SNAP	75 Points: State submitted a waiver prohibiting the purchase of non-nutritious items in SNAP and waiver is in processing with USDA	SNAP Food Waiver Legislation: www.legislature.state.X.gov/bills/2026/HB125	
	B.4. Nutrition Continuing Medical Education	0 Points: States that have no requirement for nutrition to be included in continuing medical education (CME) for physicians as well as no pending State bill requiring nutrition to be included in CME for physicians	100 Points: Requirement for nutrition to be included in CME for physicians is currently in place and enforced	0 Points: States that have no requirement for nutrition to be included in continuing medical education (CME) for physicians as well as no pending State bill requiring nutrition to be included in CME for physicians	StateX_SPA_B.4.pdf	

C.3.	Overall CON Score	50 Points: 45-79 score from the Cicero report for States with moderate CONs across facility categories	100 Points: 0 score from Cicero report for States with no CONs across facility categories	50 Points: 45-79 score from the Cicero report for States with moderate CONs across facility categories	www.legislature.state.X.gov/bills/2026/HB102	
	CON - Behavioral Outpatient	Restricted	Commitment Made	Restricted		
	CON - Medical Outpatient	Restricted	Commitment Made	Restricted		
	CON - Behavioral Inpatient	Unrestricted	No Commitment			
	CON - Imaging	Unrestricted	No Commitment			
	CON - Medical Inpatient	Restricted	Commitment Made	Restricted		
	CON - Day Services	Restricted	Commitment Made	Restricted		
	CON - Long-term Care Facilities	Restricted	Commitment Made	Restricted		
	CON - Ancillaries	Restricted	Commitment Made	Restricted		
	CON - Other	Restricted	Commitment Made	Restricted		

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The State Policy Actions (SPA) Form is designed to capture the progress and status of the specific policy commitments established in a State's approved application. Please note that States are only eligible to receive credit for policy actions committed to in their initial application.

Figure 4 above shows a draft State Policy Action Commitments Form completed with a hypothetical example to illustrate the required information. **Please note, there are additional fields in a section titled "CMS Review (CMS Use Only)" in the State Policy Actions Form (not pictured in Figure 5 below), which should not be populated by States.**

Figure 5 below outlines the data fields within the State Policy Action (SPA) Form, along with specific instructions for completing each field and illustrative examples. **Note: These examples are strictly notional and are provided solely for guidance.**

Figure 655: State Policy Actions Form Instructions

Data Field	Instructions	Example	Formatted: Centered
Score Factor	This data field is pre-populated with the relevant score factor labels.	B.2.	Formatted: Centered
Workload Funding Score Factor Criterion	This data field is pre-populated with the relevant score factor criterion.	Presidential Fitness Test	
Baseline	This data field is pre-populated with a baseline value for each State Policy Action Commitment. The baseline refers to the category of the	The baseline values are unique to each State Policy Action and will be consistent with the State's State Policy Action Commitment SPA	

	baseline score for the State Policy Action score factor.	commitment report. Examples include: - No points (0) - Partial points (1–99) - Full points (100)
Commitment	This data field is pre-populated , and the value depends on if the relevant State Policy Action Commitment was made and approved by CMS.	If a State Policy Action Commitment was made in the application: - Partial Points (1-99) - Full points (100) - Commitment Made If State Policy Action Commitment was not made in application: - No Commitment
Current Status	Select the current status from the dropdown menu (options reflect the scoring methodology in the NOFO and are dependent on the specific State Policy Action Commitment). If the State Policy Action Commitment was made, the Current Status cell for that Score Factor will appear white and the status can be indicated with the dropdown. If a State Policy Action Commitment was not made, the cell will be greyed out.	For State Policy Action Commitment B.3. (for example) dropdown options include: - Not Yet Started 0 Points: No pending State legislation 25 Points: Active bill in the State legislative process 50 Points: State bill was passed to submit a USDA waiver 75 Points: Waiver is in processing with USDA 100 Points: USDA approved waiver - Commitment abandoned Note: Specific options will depend on each Score Factor.
Supporting Evidence	Provide any links to sources or attachments that confirm the status of the State Policy Action Commitment.	Examples may include: - URL to policy on State website - State legislation attachment
Optional Notes/Comments	Provide any additional context or details around the status of the State Policy Action Commitment, if needed.	The bill, titled “XYZ” was signed into law on July 15, 2026, and becomes effective January 1, 2027. See

"Section 4 PA Licensure Compact"
on Page 16 of the bill.-

3. Obligated and Spent Funds Reporting Tabs

The purpose of the Obligated and Spent Funds Reporting tabs is to track RHT Program spending across initiatives, budget period awards, use of funds categories, subrecipients, and contractors. Please refer to the **Obligated and Spent Funds Reporting Guide** for more information on how to populate the First-Tier Entities, Use of Funds, Downstream Obligations, and Distribution Reporting tabs.

4. Additional Information Form

The purpose of the Additional Information Form is to share qualitative updates on program successes, long-term sustainability planning, and the definition of rural, as defined by the State.

Figures 6, 7, and 8 The figures below show the Additional Information Form completed with a hypothetical example to illustrate the required information.

Figure 766: Success Stories

Success Stories
Please share success stories that you want to highlight as result of your State's implementation of the RHT Program.
In a rural county, a community with no local obstetrician, our new mobile health clinic (Initiative 1) provided prenatal care to 45 expectant mothers. One patient was able to receive all her prenatal checkups locally, avoiding a 3-hour round trip to the nearest city. This consistent care led to the early detection of a complication, ensuring a healthy delivery for both mother and baby.

Figure 877: Sustainability Planning

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Sustainability Planning

What are the most significant updates or changes to your sustainability plan based on the past year's experiences, successes, and challenges?

Based on the high demand for the mobile clinic, we have initiated discussions with the State Medicaid agency to establish a permanent reimbursement pathway for mobile health services. Furthermore, we have secured a partnership with the State University's nursing school to create a clinical rotation program on the mobile unit, which will provide a sustainable staffing pipeline and reduce future personnel costs.

Sustainability Planning

What are the most significant updates or changes to your sustainability plan based on the past year's experiences, successes, and challenges?

Sustainability Planning

What are the most significant updates or changes to your sustainability plan based on the past year's experiences, successes, and challenges?

Based on the high demand for the mobile clinic, we have initiated discussions with the State Medicaid agency to establish a permanent reimbursement pathway for mobile health services. Furthermore, we have secured a partnership with the State University's nursing school to create a clinical rotation program on the mobile unit, which will provide a sustainable staffing pipeline and reduce future personnel costs.

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Figure 898: Rural Definition

Rural Definition
Please provide the definition of 'rural area' that the State used to determine whether subrecipients were considered to be rural.
We defined rural using the following definition from the Health Resources & Services Administration (HRSA). They defined the following area as rural:
Non-metropolitan counties
Outlying metropolitan counties with no population from an urban area of 50,000 or more people
Census tracts with Rural-Urban Commuting Area (RUCA) codes 4-10 in metropolitan counties
Census tracts of at least 400 square miles in area with population density of 35 or fewer people per square mile with RUCA codes 2-3 in metropolitan counties

The figures above show the Additional Information Form completed with a hypothetical example to illustrate the required information.

Figure 9 below outlines the data fields within the Additional Information Form, along with specific instructions for completing each field and illustrative examples. **Note: These examples are strictly notional and are provided solely for guidance.**

Figure 9109: Additional Information Form Instructions

Data Field	Instructions	Example	Formatted: Centered
Success Stories	Provide narrative example(s) of how the RHT Program has positively impacted rural communities in your State. Focus on specific, compelling stories that demonstrate the program's value. Please limit responses to 3,000 characters, approximately 400–500 words.	<i>In a [rural county] with no local obstetrician, our new mobile health clinic (Initiative 1) provided prenatal care to 45 expectant mothers. One patient was able to receive all her prenatal checkups locally, avoiding a 3-hour round trip to the nearest city. This consistent care led to the early detection of a complication, ensuring a healthy delivery for both mother and baby.</i>	
Sustainability Planning	Describe significant updates to your State's plan for continuing the program's impact after the	<i>Based on the high demand for a mobile clinic, we have initiated discussions with the State Medicaid</i>	

	grant period ends. This should be based on your experiences, successes, and challenges from the past year. Please limit responses to 3,000 characters, approximately 400–500 words.	<i>agency to establish a permanent reimbursement pathway for mobile health services. Furthermore, we have secured a partnership with the State University's nursing school to create a clinical rotation program on the mobile unit, which will provide a sustainable staffing pipeline and reduce future personnel costs.</i>
Definition of Rural	Please provide the rural definition the State used to determine whether subrecipients were considered to be rural.	<i>We defined rural using the following definition from the Health Resources & Services Administration (HRSA). They define the following areas as rural:</i> <i>• Non-metropolitan counties</i> <i>• Outlying metropolitan counties with no population from an urban area of 50,000 or more people</i> <i>• Census tracts with Rural-Urban Commuting Area (RUCA) codes 4-10 in metropolitan counties</i> <i>• Census tracts of at least 400 square miles in area with population density of 35 or fewer people per square mile with RUCA codes 2-3 in metropolitan counties</i>

5. Submitting Evidentiary Documentation

For the initial Annual Report, States will submit all evidentiary documentation to their PO for review, via email. To allow ample time for review and feedback, States are strongly encouraged to provide documentation to their POs on a rolling basis prior to the final submission deadline.

Evidentiary documentation is only required for the following two components:

- **Initiative Checkpoints:** Documentation requirements vary depending on the specific checkpoint. States should provide evidence that directly corresponds to and demonstrates completion or progress for each individual checkpoint. Refer to the **Checkpoint Guidance tab** in the Excel Reporting Template for examples of acceptable evidence.



- **State Policy Actions (SPAs) Form:** For each SPA for which there is an update in the Current Status, States must provide evidentiary documentation or a direct URL (e.g., a link to legislation, regulation, or a state register) that demonstrates progress toward the policy commitment. States may include a hyperlink directly within the Excel Reporting Template or submit a corresponding file.

In order to assist your PO in understanding which pieces of evidentiary documentation apply to each checkpoint or State Policy Action, consider the following file name guidelines:

- The file name of each piece of evidentiary documentation should be clearly labeled with the **State Name, Initiative Number, and Stage/Checkpoint Number** (e.g., “StateX_Init_2_Checkpoint_0.1.pdf” or “StateX_SPA_B.2.pdf”).
- If multiple pieces of evidentiary documentation apply to the same initiative, States should indicate this using a, b, c, etc. at the end of the file name (e.g., “StateX_Init_2_Checkpoint_0.1a.pdf” and “StateX_Init_2_Checkpoint_0.1b.docx”).
- If one piece of evidentiary documentation applies to the same checkpoint across multiple initiatives, list the initiatives or provide a number range in the file name (e.g., “StateX_Init_1_2_Checkpoint_0.1.pdf” or “StateX_Init_2-7_Checkpoint_0.1.pdf”).

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6. Submitting Your Initial Annual Report

For the initial Annual Report, States must:

- Complete the Excel Reporting Template.
- Submit all associated evidentiary documentation for all checkpoint and SPA commitment progress for the reporting period.

Prior to the submission deadline, States will compile and upload all respective required materials into GrantSolutions for official recordkeeping. For additional information on uploading how to upload files to GrantSolutions, follow the Reporting and Rescoring webinar guidance.

RHT Program Annual Reports will be submitted as an “Application Message” within the NCC kit application in GrantSolutions after the NCC application has been submitted. Each Application Message may include up to 5 files, with a maximum file size of 1 GB per file. States may submit multiple messages as needed. Supported file formats include: .bmp, .txt, .csv, .jar, .odt, .ods, .odp, .msg, .potx, .pptx, .ppt, .rtf, .tif, .gif, .jpeg, .png, .docm, .docx, .doc, .pdf, .jpg, .xlsx, .xltx, .xls, and .xml. Zip files and other compressed file formats

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are not accepted. For additional information, please follow the guidance in the NCC Kit Letter that was sent to States on June 26, 2026.

Given the evidentiary documentation requirements for each checkpoint and each initiative, some States may have dozens of individual pieces of evidence to submit. There are two options that States can choose from to submit their evidentiary documentation in GrantSolutions: When uploading files to GrantSolutions, States may either (1) upload individual pieces of evidentiary documentation for each checkpoint or collection of checkpoints by sending multiple Application Messages, or (2) consolidate some or all of their evidentiary documentation into a Master Initiative Attachments PDF. Additional implications of each option are described below.

1) Uploading individual attachments for each checkpoint or collection of checkpoints;

2) Consolidating evidentiary documentation into a Master Initiative Attachments PDF and uploading a single file.

1) Uploading Individual Attachments for Each Checkpoint or Collection of Checkpoints Across Multiple Application Messages

~~If a State chooses to upload individual attachments for each checkpoint or collection of checkpoints, it is recommended that States consolidate their evidentiary documentation either by checkpoint across initiatives or by initiative.~~

If a State chooses to upload individual files across multiple Application Messages, they States should submit the Application Message with a standardized subject indicating the total number of messages, knowing that there is a maximum of 5 attachments per message (5 files per message). States are encouraged to group these messages based on a common checkpoint or by initiative. See below for examples of standardized subjects of Application Messages:

- RHT Program Annual Report_1 of 3
- RHT Program Annual Report_2 of 3
- RHT Program Annual Report_3 of 3

States are encouraged to group these messages based on what makes sense for the state. For example, organizing information by a common checkpoint (e.g. for checkpoint 0.2, submitting project plans for all initiatives as one file) or by initiative (e.g. for one initiative, submitting evidence for 0.1, 0.2, 1.1, 1.2, and 2.1 as one file). States are encouraged to group these messages based on a common checkpoint (e.g. submitting project plans for checkpoint 0.2 as separate files for each initiative across one or two consecutive messages) or by initiative (e.g. submitting evidence for 0.1, 0.2, etc. for each of their initiatives sequentially).

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If a State chooses to upload individual attachments for each checkpoint or collection of checkpoints, it is recommended that States consolidate their evidentiary documentation either by checkpoint across initiatives or by initiative.

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2) Consolidating Evidentiary Documentation into a Master Initiative Attachments PDF and Uploading a Single File

If a State chooses to consolidate evidentiary documentation into a Master Initiative Attachments PDF, it is recommended that States should submit ~~upload~~ the consolidated PDF in addition to the Excel ~~Reporting~~ Template in a single Application Message. This consolidated PDF should be ordered by initiative number and then by stage/checkpoint number, with headings added to the PDF that clearly indicate to which checkpoint each page is mapped.:-

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~~If a States chooses this option, this will change how States they fill out the "Attachments" section of the Initiative Form in the Excel Reporting Template. In the "Attachments" section of the Initiative Form tabs of the Excel reporting template, States should reference the Initiative number# and Sstage/Ccheckpoint #number section heading of the Master Initiative Attachments PDF. The Master Initiative Attachments PDF should be organized by initiative and then by checkpoint. If the some evidentiary documentation is in Excel or another file format that is less conducive to PDF conversion, then just upload it as an Excel and reference the Excel file in the Master Initiative Attachments PDF the State may choose to upload these other files separately and include the file name as a placeholder in the Master Initiative Attachments PDF. only include a subset of their evidentiary document in the Master Initiative Attachments PDF and upload/reference these other files separately.~~

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~~Prior to the submission deadline, States will compile and upload all respective materials into GrantSolutions for official recordkeeping. For this final submission to GrantSolutions, you should:-~~

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- ~~• Note that some evidentiary files will need to be converted to PDF format prior to uploading.~~
- ~~• Keep the exact same base file name used in your original files (e.g., if you sent the native file StateX_Init_1_Checkpoint_0.2.xlsx to your PO, upload the converted version to GrantSolutions as StateX_Init_1_Checkpoint_0.2.pdf).~~

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VIII. Subsequent Reporting - MDCT RHTP Platform

Disclaimer: The structure and functionality of the MDCT RHTP platform may change between the publication of this guide and the first quarterly reporting period in which the MDCT RHTP platform will be used. The figures below are draft, while we do not expect any change in reporting requirements, some of the content may differ when released to states than what is shown at the time of publication of this document. An updated guidance document will be distributed to States that reflects all changes made. For example, the naming convention originally “Use of Funds” has been changed to “Obligated and Spent Funds” which is not yet reflected in the figures within this section.

Following the initial Annual Report submission via the Excel Reporting Template, the RHT Program will transition subsequent reporting to the MDCT RHTP platform, beginning with the first Quarterly Report. To ensure a seamless transition, comprehensive training and technical assistance will be provided to support States in adopting the new platform.

Disclaimer

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For continuity and ease of use, data submitted from the initial Annual Report will be pre-populated within [the MDCT RHTP platform-RHTP](#), serving as a convenient baseline reference for all future reporting.

States should continue to collaborate closely with their POs to review and finalize report components within the platform. Please note that after submission, States will not be able to access their report for revision.

For any technical questions regarding access, functionality, or system issues with the MDCT RHTP application, please reach out to the MDCT Help Desk at MDCT_help@cms.hhs.gov. The help desk hours are 9am–5pm ET, Monday-Friday (excluding holidays).

The guidance below details the procedures for submitting both Annual and Quarterly Reports via the MDCT RHTP platform. Throughout subsequent reporting cycles, States should continue to leverage the Checkpoint Guidance and other supporting materials to complete their submissions.

Instructions

The platform's reporting interface consists of seven pages where States will input their progress data. ~~Each page includes instructions for completion. The seven pages in the~~ [The respective MDCT RHTP platform pages include are:](#)



1. General Information
2. Initiative Attachments
3. Initiatives
4. State Policy **Action** Commitments
5. **Obligated and Spent Funds**~~Use of Funds~~
6. Sustainability and Highlights
7. Review & Submit

{State: Name of the report submission}

✔ Last saved XX:XXpm

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Figure 14010: General Information

Authorized Organizational Representative (AOR)

Enter the name for CMS to contact with questions about this report.

Authorized Organizational Representative (AOR) Contact email

Enter the email address for the AOR.

Principal Investigator or Program Director

Enter the name for CMS to contact with questions about this report.

Principal Investigator or Program Director Contact email

Enter the email address for the PI/PD.

Point of Contact (POC) listed in NoA (Optional)

Optionally added and approved by CMS

Point of Contact (POC) email (Optional)

Enter the email address for the Additional Point of Contact listed in the NoA

Continue >

1. General Information

~~In this page,~~ States will be required to provide information regarding key personnel that can be contacted for any inquiries related to the report.

Figure 11 below includes the relevant data fields on the General Information page. Instructions for how to fill out each data field, and an example data value, if needed, for each field. If there is a 3rd point of contact (additional Point of Contact as authorized in the



NoA), please list them below. ***Please note, the examples are notional and should only be used as a guide.***



Figure 12144: General Information Instructions

Data Field	Instructions	Example	Formatted: Centered
Authorized Organizational Representative (AOR)	Enter person's name or a position title for CMS to contact with questions about this report.	Jane Smith	
Authorized Organizational Representative (AOR) Contact email	A department or program-wide email address is acceptable.	JaneSmith@state.gov	
Principle Investigator or Program Director	Enter person's name or a position title for CMS to contact with questions about this report.	John Williams	
Principle Investigator or Program Director Contact email	A department or program-wide email address is acceptable.	JohnWilliams@state.gov	

2. Initiative Attachments

States may add, edit, or delete existing attachments (depending on their status), and add or respond to comments from their POs associated with specific attachments.

Attachments that apply across multiple initiatives should be uploaded on this page, while initiative-specific attachments should be uploaded within the Initiatives page. Both informational attachments and attachments intended for rescoring may be submitted on this page.

This page also includes an Understanding Initiative Statuses section, which provides guidance on the various initiative statuses that may be encountered, including:

- **Pending Review:** This status is applied automatically when a new attachment is added. It lets CMS know the document is ready to be reviewed.



- **Needs Revision:** CMS uses this status when a document needs updates or corrections from the State. Please review CMS feedback and upload a revised version as needed.
- **Locked for Scoring:** CMS uses this status when a document has been locked for scoring.
- **Informational:** CMS or the State may use this status for documents that are for reference only. These documents are not used for scoring.
- **Archived:** CMS or the State may use this status for documents that are no longer part of the active submission but should be kept for records. Archived documents will not carry over from one report to the next.

Figure 19242: Initiative Attachments

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Initiative Attachments

The table below lists all attachments added to any initiatives. From here you can:

- Add new attachments
- Edit or delete existing attachments dependent on their status
- Leave or respond to comments on any attachment
- Utilize the comment icon to add new comments and adjust statuses where appropriate by attachment

Understanding initiative statuses

- **Pending Review** - This status is applied automatically when a new attachment is added. It lets CMS know the document is ready to be reviewed.
- **Needs Revision** - CMS uses this status when a document needs updates or corrections from the state. Please review CMS feedback and upload a revised version as needed. When in this status, attachments can no longer be deleted.
- **Locked for Scoring** - CMS uses this status when a document has been locked for scoring. When in this status, attachments are locked and cannot be edited or deleted.
- **Informational** - CMS or the state may use this status for documents that are for reference only. These documents are not used for scoring. When in this status, attachments can no longer be deleted.
- **Archived** - CMS or the state may use this status for documents that are no longer part of the active submission but should be kept for records. When in this status, attachments can no longer be deleted.

+ Add Attachment

Name	Initiatives	Stage/ Checkpoint	Last Edited	Status	Actions
{Attachment name}	{Initiatives #1, #2, #3}	{Stage/ checkpoint}	04/15/2026	Needs review	Edit Status/Comments
{Attachment name}	{Initiatives #1, #2, #3}	{Stage/ checkpoint}	04/15/2026	Needs review	Edit Status/Comments
{Attachment name}	{Initiatives #1, #2, #3}	{Stage/ checkpoint}	04/15/2026	Needs review	Edit Status/Comments

< Previous

Continue >



As shown above, the interface allows users to manage their uploaded attachments (via commenting, editing, or deleting) and upload new files as needed.

Figure 13 below includes the relevant data fields in the Initiative Attachments page, instructions for how to fill out each data field, and an example data value, if needed, for each field. **Please note, the examples are notional and should only be used as a guide.**

Figure 13: Initiative Attachment Instructions

Data Field	Instructions	Example
Add Attachment	Click on the icon to add attachments	
Attachment name	Name of attachment will be populated based on the naming of the file being uploaded	StateX_Init_1_ Checkpoint_0.1
Initiatives	The screen will prompt States to check off which Initiatives the attachment applies to	1,3,5
Stage/Checkpoint	The screen will prompt States to select which Stage/Checkpoint the attachment applies to	0.1 Establish Governance

Relevant Initiative Actions

Below are guidelines for common questions that States may ask while viewing and uploading information to the Initiative Attachments page.

1. Uploading an attachment

To upload documentation, click the + Add Attachment icon located below the ‘Understanding Initiative Statuses’ section. A pop-up window will display checkboxes to designate which initiatives the file applies to. Below these checkboxes, use the dropdown menu to select the corresponding stage or checkpoint. Finally, drag files directly into the window or select them from a folder to complete the upload.

Upload Initiative Attachments

✕ Close

Which initiative does this attachment apply to?

☐ {Initiative 1}

☐ {Initiative 2}

☐ {Initiative 3}

☐ {Initiative 4}

☐ {Initiative 5}

Which stage/checkpoint does this attachment apply to?

- Select an option -

▼

Select a file or files to upload

Drag files here or [Choose from folder](#)

Selected Files

file.txt

7 KB

✕

file.ext

Incorrect file format - cannot be uploaded

10 KB

✕

Uploaded Files

These files have been attached to the stage(s) and checkpoint(s) selected above.

file2.txt

10 KB

✕

Done

Last Edited

↓

Status

↓

Actions

04/15/2026

Needs review

Edit

Status/Comments

✕

04/15/2026

Needs review

Edit

Status/Comments

✕

04/15/2026

Needs review

Edit

Status/Comments

✕

2. Adding a comment to an attachment

To leave a note for a Project Officer (PO)/ CMS, use the commenting feature within the MDCT RHTP platform. On the Initiative Attachments dashboard, click the “Status/comment” button next to the relevant attachment to add a message.

Formatted: Font: Not Bold

Add comment to attachment ✕ Close

Figure 14-655: Add Comments to

Comments on your Smart Report content. Smart attachments feature the ability to modify or remove files:

- **Needs Revision, Informational, Archived:** The attachment will no longer be able to be deleted.
- **Locked for Scoring:** The attachment is locked and cannot be edited or deleted.

Attachment: (Name of attachment)

Status

- Select an option -

Comment

Input text

Add comment

Close

+ Add Attachment

Name	Initiatives
{Attachment name}	{Initiatives #1, #2, #3}
{Attachment name}	{Initiatives #1, #2, #3}
{Attachment name}	{Initiatives #1, #2, #3}

Upload Initiative Attachments ✕ Close

Which initiative does this attachment apply to?

- ☐ {Initiative 1}
- ☐ {Initiative 2}
- ☐ {Initiative 3}
- ☐ {Initiative 4}
- ☐ {Initiative 5}

Which stage/checkpoint does this attachment apply to?

- Select an option -

Select a file or files to upload

Drag files here or [Choose from folder](#)

Selected Files

file.ext
7 KB

file.ext
10 KB

Incorrect file format - cannot be uploaded

Uploaded Files

These files have been attached to the stage(s) and checkpoint(s) selected above.

file2.ext
10 KB

Done

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2. Adding a comment to an attachment

To leave a note for a Project Officer (PO)/ OMS, use the commenting feature within the MDOT RHTP platform. On the Initiative Attachments dashboard, click the “Status/comment” button next to the relevant attachment to add a message.

3. Editing attachments

If there are changes to attachment files or to the initiative(s) or checkpoint(s) the attachment applies to, you may update their selections. In the Actions column, select the “Edit” button. A pop-up window will appear displaying a list of initiatives with checkboxes. States can select or deselect the initiatives to indicate where the attachment applies.

Figure 18747: Editing Attachments

Edit Attachment
Close

Which initiative does this attachment apply to?

☒ {Initiative 1}
☐ {Initiative 2}
☐ {Initiative 3}
☐ {Initiative 4}
☐ {Initiative 5}

Which stage/checkpoint does this attachment apply to?

0.1 Establish governance

File

This file is attached to the stage and checkpoint selected above.

file2.ext
10 KB

Save

4. Viewing an attachment's comments

In the Actions column, click the **"Status/comment"** button. A pop-up window will appear, allowing States to view a historical log of comments associated with the selected attachment. This log includes all comments provided by their PO on the uploaded attachment. States are also allowed to **"Delete"** erroneous attachment as long as it is in "Pending Review" mode and has no comments. If there have been any additional actions taken on the attachment, it cannot be deleted and should be moved to **"Archived"**.

Figure 19818: Viewing Attachment Comments

Comments

{Name} {Date} {Time}

Status:

Shared with State

Ready for review

{Name} {Date} {Time}

Status:

Shared with State

Ready for review

Close

3. Initiatives

Figure 2019-19: Initiatives

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Initiatives

The list below includes initiatives you have previously submitted to CMS. Select **Edit** for each initiative to report on its progress.

Initiative	Actions
{Initiative number and name} Status: Not started	Edit
{Initiative number and name} Status: Not started	Edit
{Initiative number and name} Status: Not started	Edit
{Initiative number and name} Status: Not started	Edit

[< Previous](#)
[Continue >](#)

This page will be pre-populated with each Initiative’s number and name. Select the “**Edit**” button for each Initiative to begin reporting.

Figures 20, 21, and 22 below displays the Initiative reporting page, including fields for entering a narrative summary, reporting metrics, and managing checkpoint status and attachments.



Figure 21020: Initiative Number/Name

{Initiative number and name}

Use this page to provide information about your initiative and the metrics you use to measure its progress. Then, update any checkpoints for review.

What is included in Annual Reporting vs Quarterly Reporting?

Annual Reporting Data should include:

- Initiative Progress Narrative
- Initiative People Served
- Initiative Metrics
- Initiative Checkpoints

Quarterly Reporting Data can include:

- Initiative Progress Narrative (Optional)
- Initiative Checkpoints

Narrative (Required Annually)

Narrative is optional for quarterly reporting. Limit responses to 2,000 characters, or approximately 250–350 words.

[Initiative Progress Narrative Guidance](#)

XXX characters allowed

Number of people served

Number of People Served is only reported annually.

[Reporting Guidelines](#)

Figure 22124: Metrics

Metrics

The metrics for each initiative will be **pre-populated** based on the information previously provided. Metrics are only reported annually. Contact your Project Officer if the metrics listed are incorrect. Note: Metrics are only reported annually.

#	Status	Metric	Target	Previous Value	Current Value	As of Date MM/DD/YYYY
1	Active	Rural provider retention rate	90%			
2	Active	Percent of rural facilities utilizing RPM	90%			
3	Active	Percent of rural facilities utilizing AI-assisted documentation tools	90%			
4	Active	Number of rural providers with loan repayment	100			
5	Abandoned	Number of counties classified as HPSA	150			

Checkpoints

Checkpoints are grouped into the stages listed below. On this page, you can take the following actions on any checkpoint unless otherwise noted.

- Add or remove attachments of evidentiary documentation.
- Select the checkbox when the checkpoint is complete and ready for CMS review.
- Leave comments for CMS, or respond to comments from them by attachment.

Figure 23: Checkpoint Stages

Stage 0: Planning
[+ Upload attachments](#)

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
0.1	Establish governance	☒	file1.docx	Pending review	Edit Comment Close
			file2.docx	Pending review	Edit Comment Close
0.2	Submit project plan to CMS	☐	Not applicable		

Stage 1: Project Preparation
[+ Upload attachments](#)

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
1.1	CMS approval of project plan	☐	Not applicable		
1.2	Launch initiative	☐			

Figure 23 below includes the relevant data fields in the Initiative section, instructions for how to fill out each data field, and an example data value, if needed, for each field. **Please note, the examples are notional and should only be used as a guide.**

Figure 24: Initiative Progress Instructions

Data Field	Instructions	Example	Formatted: Centered
Narrative	Provide a concise update on the progress of each initiative during the reporting period. Responses should focus on key activities completed, milestones reached, challenges encountered, and any notable outcomes or impacts to date. This section is intended for progress reporting purposes only and should not repeat the full project narrative from the NCC Kit. Please focus on recent initiative progress and avoid including broad	Over the past year, we deployed five fully equipped Mobile Maternity Clinics across 12 of our most underserved counties, effectively eliminating geographic barriers to care. This proactive approach has enabled us to deliver over 2,500 prenatal and postpartum visits directly to expectant mothers, driving a 40% increase in first-trimester care initiation. By integrating satellite-enabled telehealth for high-risk specialist consultations and	

	background information unless it is necessary for context. States are encouraged to include any relevant updates that may be important for CMS to understand the status, implementation progress, or emerging results of the initiative. Note: The Narrative is optional for quarterly reporting. Please limit responses to 2,000 characters, or approximately 250–350 words.	<i>employing local community health workers to build trust, we have not only expanded essential access but fundamentally transformed the maternal health infrastructure for our rural populations.</i>
Number of People Served	Provide best estimate of the number of individuals who have benefited from RHT Program funds during the reporting period. Estimates should be reasonable, supported by available data, and reflect the scope and reach of the initiative. For system-based initiatives that do not provide direct services (e.g., IT systems, Health Information Exchanges), States may define the number of people served more broadly. For example: - For health system–level initiatives, the number served may reflect the total population served by the system. - For statewide systems (e.g., HIEs), the number served may reflect the number of patients with data in the system or the total number of state residents. - These estimates do not need to be de-duplicated and do not need to be limited to rural populations if the initiative has a broader reach. - States should aim to provide the most accurate and justifiable estimate possible and may include brief context	500

Formatted Table

	in the narrative section if helpful for CMS's understanding.	
	Note: Number of People Served is only reported annually.	
Metric	The metric for each initiative will be pre-populated based on the information previously provided. Note: Metrics are only <u>required to be reported in the annual reports and are optional to report in quarterly reports annually.</u>	20
Metric Status	Metric status will be displayed with the following potential statuses: - Active - Abandoned	Active
Target Value (%)	Target values will be pre-populated and will be updated based on States' information. The field will not be able to be edited.	90
Previous Value	Previous values that States have reported will be displayed. The field will not be able to be edited.	5
Metric Current Value	Enter the current value of each metric relevant to the reporting period.	3
Metric as of Date (MM/DD/YYYY)	Enter the as of date of the metric.	04/19/2026
Checkpoint Attachments Upload	Add or remove documentation attachments and leave comments or respond to comments for each checkpoint attachment.	
Ready for CMS Review	Check the box once a checkpoint is ready for CMS Review. Leave unchecked if the checkpoint requires further editing.	

4. State Policy Action Commitments

On this page, the SPA Form displays a list of policy commitments approved by CMS, as outlined in the State’s approved application. Each commitment can be expanded to update its status, evidence, and comments for the current reporting period.

For each commitment, only legislation links and attachments are accepted as valid evidence demonstrating progress toward fulfillment of the policy commitment. Press releases and promotional links or attachments will not be accepted as sufficient evidence.

Figure 25424: State Policy Action Commitments

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

State Policy Commitments

The commitments listed here are based on those identified in a State's approved application. Expand each one to update its status, evidence, and comments.

Expand all

Collapse all

B.2: Presidential Fitness Test

+

B.3: SNAP Food Restriction Waiver Policy

–

Current status

- Select an option -

Supporting Evidence

States should only submit legislation links and attachments as acceptable evidence for their State policy commitments. CMS will not accept press releases or promotional links/attachments as substantial evidence.

Links

Add URL to exact policy.

+ Add link

Attachments

Upload state legislation.

+ Upload attachment

Notes and comments (optional)

Include any additional information about this policy commitment that you would like CMS to be aware of.

B.4: Nutrition Continuing Medical Education

+

C.3: Overall CON Score

+

D.2: Physician Assistant - PA Compact

+

D.3: Dental Hygienist - Prescriptive Authority

+

Previous

Continue

44



Figure 25 below outlines the relevant data fields on the State Policy [Action](#) Commitments page, along with instructions for completing each field and illustrative example values, where applicable. **Please note, the examples are notional and should only be used as a guide.**

Figure 25: State Policy [Action](#) Commitment Page Instructions

Data Field	Instructions	Example	Formatted: Centered
Current Status	Select from the drop down the corresponding status for each commitment during the reporting period		
Supporting Evidence: Links	Provide link(s) to State legislation that confirms the status of the State Policy Action Commitments .	<i>Link to the exact policy</i>	
Supporting Evidence: Attachments	Upload State legislation attachments that confirm the status of State Policy Action Commitments .	<i>State Legislation attachment and/or URL.</i>	
Notes and Comments	Provide any additional context or details around the status of the State Policy Action Commitment , if needed.	<i>The bill was signed into law on July 15, 2026, and becomes effective January 1, 2027.</i>	

5. Obligated and Spent FundsUse-of-Funds Reporting

The [Obligated and Spent FundsUse-of-Funds](#) Form should be uploaded directly on this page using the “+ Add [Obligated and Spent FundsUse-of-Funds](#)” button, as shown below.



Refer to the **Obligated and Spent Funds Reporting Guide** for detailed instructions on completing these forms. This form is a continuation of the Obligated and Spent Funds section of the Excel Reporting Template.

Figure 27626: ~~Use of Funds~~ Obligated and Spent Funds

The screenshot shows a web-based reporting form titled "Use of Funds". At the top, there is a header bar with "RHYP | Transformation Program" on the left and "Get Help" and "My Account" on the right. Below the header, a light blue bar contains the text "{State: Name of the report submission}" on the left, "Last saved XXXX/pm" in the center, and a "Leave form" button on the right. The main content area has a left sidebar with a list of navigation items: "General Information", "Initiative Attachments", "Initiatives", "State Policy Commitments", "Use of Funds" (which is highlighted), "Sustainability and Highlights", and "Review & Submit". The main panel is titled "Use of Funds" and contains the instruction: "Select 'Add use of Funds' option below to attach the Use of Funds file for this reporting period." Below this instruction is a button labeled "+ Add Use of Funds". At the bottom of the main panel, there are two buttons: "Previous" with a left arrow and "Continue" with a right arrow.



6. Sustainability and Highlights

On this page, qualitative updates on program successes and long-term sustainability planning may be shared.

Figure 728727: Sustainability and Highlights

{State: Name of the report submission}

Last saved XXXXpm

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Sustainability and Highlights

Success Stories

Share success stories that you want to highlight as result of your State's implementation of the RHT Program.

Limit responses to 3,000 characters, approximately 400-500 words.

3,000 characters allowed

Success Stories: Supporting Evidence (Optional)

Upload supporting documentation (e.g., press releases illustrating success stories).

Links

Add URLs to supporting documentation.

+ Add link

Attachments

Upload supporting documentation.

+ Upload attachment

Figure 2929: Changes to Sustainability Plan

What are the most significant updates or changes to your sustainability plan based on the past year's experiences, successes, and challenges?

Limit responses to 3,000 characters, approximately 400–500 words.

3,000 characters allowed

Sustainability Planning: Supporting Evidence (Optional)

Upload supporting documentation.

Links

Add URLs to supporting documentation.

+ Add link

Attachments

Upload supporting documentation.

+ Upload attachment

< Previous

Continue >

Figure 29 below outlines the relevant data fields on the Sustainability and Highlights page, along with instructions for completing each field and illustrative example values, where applicable. ~~All examples are notional and provided for guidance only.~~ **Please note, the examples are notional and should only be used as a guide.**

Figure 302929: Sustainability and Highlights Page Instructions

Data Field	Instructions	Example	Formatted: Centered
Success Stories	Share success stories that you want to highlight as a result of your State's implementation of the RHT Program. Please limit responses to 3,000 characters, approximately 400–500 words.	<i>In a rural community with no local obstetrician, our new mobile health clinic (Initiative 1) provided prenatal care to 45 expectant mothers. One patient was able to receive all her prenatal checkups locally, avoiding a 3-hour round trip to the nearest city. This consistent care led to the early detection of a complication, ensuring a healthy delivery for both mother and baby.</i>	
Sustainability Planning	What are the most significant updates or changes to your sustainability plan based on the	<i>Based on the high demand for the mobile clinic, we have initiated discussions with the State Medicaid agency to establish a permanent</i>	



past year's experiences, successes, and challenges?

Please limit responses to 3,000 characters, approximately 400–500 words.

reimbursement pathway for mobile health services. Furthermore, we have secured a partnership with the State University's nursing school to create a clinical rotation program on the mobile unit, which will provide a sustainable staffing pipeline and reduce future personnel costs.

7. Review & Submit

On this final page, all previously entered report information is displayed for review prior to submission. Carefully review all components to ensure accuracy and completeness. Two submission actions are available within MDCT RHTP:

- **Submit for Review:** This option allows you to share a draft report with your PO for review and feedback. When you select this option, you may add an optional comment for your PO to convey what elements of your report you would like your PO to review. The MDCT RHTP will become locked for further edits until your PO completes their review and unlocks the report. Contact your PO if you need the report to be unlocked.
- **Submit Report:** This option indicates that the report is being formally submitted. Once **"Submit Report"** is selected, the report becomes locked for editing within the system for the remainder of the reporting period. Your report must be submitted using this action before the reporting deadline for each Annual and Quarterly report.

After formal submission, export your reporting package, including all submitted data and evidentiary documentation from the MDCT RHTP platform, and upload to GrantSolutions for official recordkeeping.

Prior to the submission deadline, States will compile and upload all respective materials into GrantSolutions for official recordkeeping. For this final submission to GrantSolutions, you should:

- Note that some evidentiary files will need to be converted to PDF format prior to uploading.
- Keep the exact same base file name used in your original files (e.g., if you uploaded the native file StateX_Init_1_Checkpoint_0.2.xlsx to the MDCT RHTP, upload the converted version to GrantSolutions as StateX_Init_1_Checkpoint_0.2.pdf).



Figure 34030: Review and Submission

MDCT
RHTP

Rural Health
Transformation Program

Get HelpMy Account

{State: Name of the report submission}

Last saved XXXXpm

Leave form

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Review & Submit

Submit for Review

Select "Submit for Review" to send a notification to CMS that the report is ready for a preliminary review. States will still have edit functionality to complete the rest of the report until you have selected to fully "Submit" the report below.

Submit for Review

Ready to Submit?

Double check that everything in your RHTP Report is accurate. Once you submit, you will only be able to make edits by contacting your CMS RHTP lead to unlock your report.

Section	Status
General Information	Edit
Initiative Attachments	Edit
Initiatives	Edit
State Policy Commitments	Edit
Use of Funds	Edit
Sustainability and Highlights	Edit
Totals	Edit

Review PDF

ZIP Attachment Files

Submit Report

IX. Appendix

A. Reporting Periods – Annual and Quarterly Reporting

Figure 32134: Reporting Periods

Report	Reporting Period Start Date	Reporting Period End Date	Due Date
Budget Period 1: December 29, 2025, to October 30, 2026 (10 months)			
Annual Report # 1	December 29, 2025	July 31, 2026	August 30, 2026
Quarterly Report # 1	August 1, 2026	October 30, 2026	November 29, 2026
Budget period 2: October 31, 2026, to October 30, 2027			
Quarterly Report # 2	October 31, 2026	January 30, 2027	March 1, 2027
Quarterly Report # 3	January 31, 2027	April 30, 2027	May 30, 2027
Annual Report # 2	August 1, 2026	July 31, 2027	August 30, 2027
Quarterly Report # 4	August 1, 2027	October 30, 2027	November 29, 2027
Budget period 3: October 31, 2027, to October 30, 2028			
Quarterly Report # 5	October 31, 2027	January 30, 2028	February 29, 2028
Quarterly Report # 6	January 31, 2028	April 30, 2028	May 30, 2028
Annual Report # 3	August 1, 2027	July 31, 2028	August 30, 2028
Quarterly Report # 7	August 1, 2028	October 30, 2028	November 29, 2028
Budget period 4: October 31, 2028, to October 30, 2029			
Quarterly Report # 8	October 31, 2028	January 30, 2029	March 1, 2029
Quarterly Report # 9	January 31, 2029	April 30, 2029	May 30, 2029
Annual Report # 4	August 1, 2028	July 31, 2029	August 30, 2029
Quarterly Report # 10	August 1, 2029	October 30, 2029	November 29, 2029
Budget period 5: October 31, 2029, to October 30, 2030			
Quarterly Report # 11	October 31, 2029	January 30, 2030	March 1, 2030
Quarterly Report # 12	January 31, 2030	April 30, 2030	May 30, 2030
Annual Report # 5	August 1, 2029	July 31, 2030	August 30, 2030
Quarterly Report # 13	August 1, 2030	October 30, 2030	November 29, 2030
Final Report	December 29, 2025	October 30, 2030	February 27, 2031

Report	Reporting Period Start Date	Reporting Period End Date	Due Date
Budget Period 1: December 29, 2025, to October 30, 2026 (10 months)			
Annual Report # 1	December 29, 2025	July 31, 2026	August 31, 2026
Quarterly Report # 1	August 1, 2026	October 30, 2026	November 29, 2026

Budget period 2: October 31, 2026, to October 30, 2027			
Quarterly Report # 2	October 31, 2026	January 30, 2027	March 1, 2027
Quarterly Report # 3	January 31, 2027	April 30, 2027	May 30, 2027
Annual Report # 2	August 1, 2026	July 31, 2027	August 31, 2027
Quarterly Report # 4	August 1, 2027	October 30, 2027	November 29, 2027
Budget period 3: October 31, 2027, to October 30, 2028			
Quarterly Report # 5	October 31, 2027	January 30, 2028	February 29, 2028
Quarterly Report # 6	January 31, 2028	April 30, 2028	May 30, 2028
Annual Report # 3	August 1, 2027	July 31, 2028	August 31, 2028
Quarterly Report # 7	August 1, 2028	October 30, 2028	November 29, 2028
Budget period 4: October 31, 2028, to October 30, 2029			
Quarterly Report # 8	October 31, 2028	January 30, 2029	March 1, 2029
Quarterly Report # 9	January 31, 2029	April 30, 2029	May 30, 2029
Annual Report # 4	August 1, 2028	July 31, 2029	August 31, 2029
Quarterly Report # 10	August 1, 2029	October 30, 2029	November 29, 2029
Budget period 5: October 31, 2029, to October 30, 2030			
Quarterly Report # 11	October 31, 2029	January 30, 2030	March 1, 2030
Quarterly Report # 12	January 31, 2030	April 30, 2030	May 30, 2030
Annual Report # 5	August 1, 2029	July 31, 2030	August 31, 2030



Quarterly Report # 13	August 1, 2030	October 30, 2030	November 29, 2030
Final Report	December 29, 2025	October 30, 2030	February 27, 2031

Please note: Any deadline falling on a weekend will revert to the next business day.

B. Resources

For additional information on RHT program reporting, please refer to the resources below.

1. [Rural Health Transformation \(RHT\) Program | CMS](#)
2. [Rural Health Transformation FAQ](#)

C. State Progress Reporting Frequently Asked Questions (FAQs)

Below are FAQs that cover the Annual and Quarterly Reports, reporting submission process, evidentiary documentation, and State reporting noncompliance.

Reporting Submission Process (Initial Annual Reporting)

1. How should States submit Annual Reports?

- a. During the initial program year (covering a 10-month period from 12/29/25 – 7/31/26), States will receive a standardized Excel Reporting Template to complete the first Annual Report (due August 31~~0~~, 2026). For all subsequent reporting, the program will transition to a web-based interface. The platform will be deployed prior to the first quarterly reporting deadline.
- b. States should submit their completed Excel Reporting Template and evidentiary documentation by the reporting deadline via GrantSolutions.

Evidentiary Documentation

1. Do States have to provide evidentiary documentation?

- a. Yes, States are required to provide evidentiary documentation for each of the initiative checkpoints completed and for progress indicated for State ~~P~~olicy ~~A~~ction ~~C~~ommitments.
- b. The type of evidentiary documentation that you should submit will vary depending on the checkpoint. Please refer to the Checkpoint Guidance tab in the Excel Reporting Template.

2. How should States compile evidentiary documentation?

- a. Please refer to [Submitting Evidentiary Documentation](#) section for more information and examples of acceptable evidentiary documentation.

State Reporting Non-Compliance

1. What does it mean if a State fails to submit required reports?

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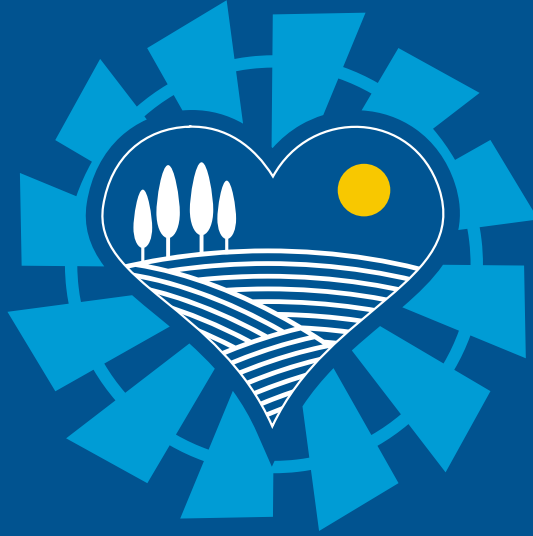
- a. Per the Program Terms and Conditions, failure to submit required reports is considered a violation of the terms of the Cooperative Agreement.
- 2. Is there an opportunity for States to address non-compliance before further action is taken?**
 - a. Yes. Per the Program Terms and Conditions, States will be issued a notice of non-compliance and provided a 90-day remediation period to correct the identified issues.
- 3. What actions may CMS take if non-compliance is not remedied within the remediation period?**
 - a. If non-compliance is not resolved, CMS reserves the right to take one or more of the following actions as stated in the Program Terms and Conditions:
 - i. Recover previously issued payments.
 - ii. Withhold future payments, including both workload and baseline funding.
- 4. Can non-compliance result in suspension or termination of the award?**
 - a. Yes. Per the Program Terms and Conditions, significant performance issues—such as misuse of funds or failure to carry out approved activities—may result in suspension or termination of the award. In such cases, the State would be ineligible for further funding until the non-compliance is resolved.
 - b. Per the Program Terms and Conditions, at any time, CMS can decrease funding, recover funding, or terminate an award if a Recipient fails to fulfill the requirements of the award. The award may also otherwise be terminated to the extent authorized by law, if the agency determines the award no longer effectuates program goals or agency priorities.

D. Table of Figures

Figure 1: Initiative Form (Top)	1087
Figure 2: Initiative Form (Bottom)	128
Figure 3: Initiative Form Instructions	1498
Figure 4: State Policy Actions Form	181211
Figure 5: State Policy Actions Form Instructions	2014123
Figure 6: Success Stories	2216145
Figure 7: Sustainability Planning	2216145
Figure 8: Rural Definition	2417156
Figure 9: Additional Information Form Instructions	2417156
Figure 10: General Information	3022191
Figure 11: General Information Instructions	3224202
Figure 12: Attachments	3325213
Figure 13: Initiative Attachment Instructions	3426224
Figure 14: Upload Initiative Add Comments to Attachmen Attachments	3628235
Figure 15: Add Comments to Attachments Upload Initiative Attachments	3527236
Figure 16: Add Comments to Attachments (Continued)	3628236
Figure 17: Editing Attachments	3728246
Figure 18: Viewing Attachment Comments	3829257
Figure 19: Initiatives	39283026



Figure 20: Initiative Number/Name	40312729
Figure 21: Metrics	40312729
Figure 22: Checkpoint Stages	4132280
Figure 23: Initiative Progress Instructions	4132280
Figure 24: State Policy Action Commitments	4436323
Figure 25: State Policy Action Commitment Page Instructions	4537334
Figure 26: Use of Funds	4638345
Figure 27: Sustainability and Highlights	4739356
Figure 28: Changes to Sustainability Plan	48403637
Figure 29: Sustainability and Highlights Page Instructions	48403637
Figure 30: Review and Submission	50423839
Figure 31: Reporting Periods	5143390



RURAL HEALTH TRANSFORMATION

Reporting and Rescoring Webinar

February 25, 2026

Presenter



LCDR Krista Marquard, PT, DPT, MS

Data Analysis Team Lead & State Project Officer,
CMS Office of Rural Health Transformation



Agenda Overview

01

**Welcome &
Introductions**

02

**RHT Program State
Reporting Framework**

03

Rescoring Process

04

**RHT Program State
Reporting Template**

05

Resources & Closing

Disclosures

Reporting template contained in this presentation

- This is a draft document that is subject to change.
- The draft template is not approved by OMB.
- Interested parties should refer to the Federal Register for dates/instructions on submitting comments specific to the draft template or any of parts of this collection of information request.
- CMS is in the process of obtaining OMB's approval of the template under the PRA process.
- CMS will inform when the final template has been approved by OMB.
- Respondents should not complete/submit the draft template to CMS.
- CMS will not accept the draft template.
- Rural Health Transformation Program Reporting (CMS-10949; OMB 0938-TBD)
 - *This is a new collection of information request that has not been approved by OMB. At this time the OMB control number has yet to be determined. OMB will issue the control number upon their approval of the 30-day collection of information request.*

Session Objectives

By the end of this webinar, you will be able to:

- Explain Rural Health Transformation (RHT) Program timelines, general processes, and submission requirements for State awardees pertaining to annual and quarterly progress reporting.
- Understand the annual rescoring process and data used to determine subsequent funding.
- Describe the roles and responsibilities of States and CMS in the reporting process.



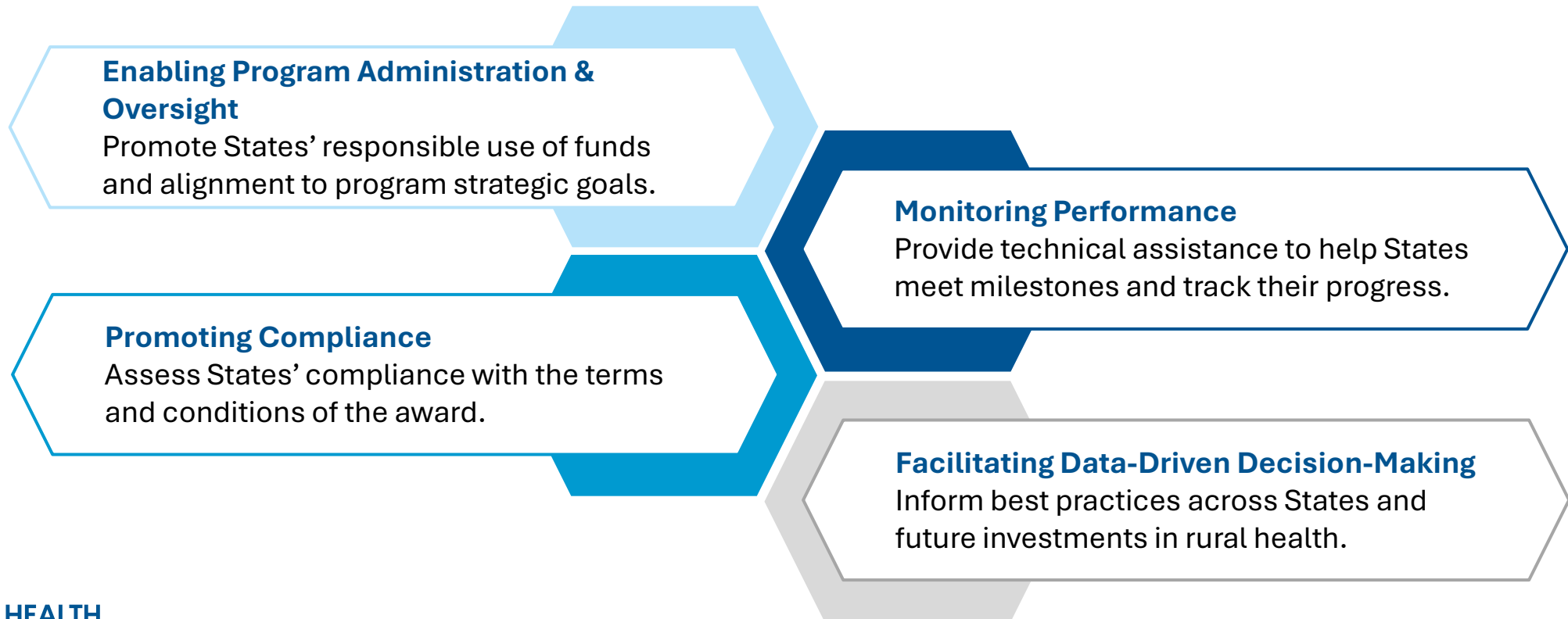
01

RHT Program State Reporting Framework

RHT Program Reporting Framework

The RHT Program reporting infrastructure enables robust program administration and oversight, drive compliance, monitor performance, and facilitate data-driven decision-making.

Our streamlined data collection process collects meaningful data for the program while limiting administrative burden on States.



Continued Eligibility and Funding

Continued eligibility and funding under the RHT Program is contingent upon a State's ongoing compliance and adherence to all the Terms and Conditions in the Cooperative Agreement with CMS.¹

Continued funding to States depends on:

- ✓ Availability of funds
- ✓ Program authority
- ✓ Satisfactory performance
- ✓ Compliance with the terms and conditions of the Federal award
- ✓ Compliance with reporting requirements

Eligibility for funding continues for all five years of the program.

State Reporting Overview

To remain eligible to continue to receive funding in subsequent budget periods, awardees must adhere to key program requirements,¹ including the submission of **annual and quarterly reports**.

1

Annual Reporting

Delivers a cumulative summary of programmatic/funding activities and milestone progress over the reporting period.

2

Quarterly Reporting

Serves as a tactical tool for short-term monitoring and operational adjustments.

The data from the annual and quarterly reports serves the following critical functions:

- ✓ Details State progress against their goals
- ✓ Informs annual rescoring used to determine funding for subsequent years (*annual reporting)
- ✓ Provides valuable data for broader program analysis

¹ This webinar focuses on annual and quarterly reporting and is not inclusive of all required reporting submissions. (NOFO pg. 60; Program Terms & Conditions pgs. 6-10).

Annual Reporting Snapshot

RHT Program annual reports are inclusive of activities completed during the annual reporting period. Requirements are as follows:

Overview

- Due 60 days before the end of the budget period.
- Annual report #1 is due **August 30, 2026** (*covering a 7-month period*).
- Subsequent annual reports cover 12-month reporting periods.



Key Task

- Submit your completed reports and evidentiary documentation via GrantSolutions.



Final Report

- Submitted one-time only, due February 27, 2031.
- Fully cumulative of all activities completed during the entire RHT Program (FY26-FY31).



Quarterly Reporting Snapshot

RHT Program quarterly reports are inclusive of activities completed during the relevant quarter. Requirements are as follows:

Overview

- Only reflective of progress made during the relevant quarter.
- Reporting periods: August 1-October 30, October 31-January 30, January 31-April 30.
- To reduce reporting burden, there is no quarterly report for May 1 – July 31.



Key Tasks

- Submit your completed reports and evidentiary documentation via GrantSolutions.
- Once a reporting period ends, you have ~30 days to finalize and submit your report.



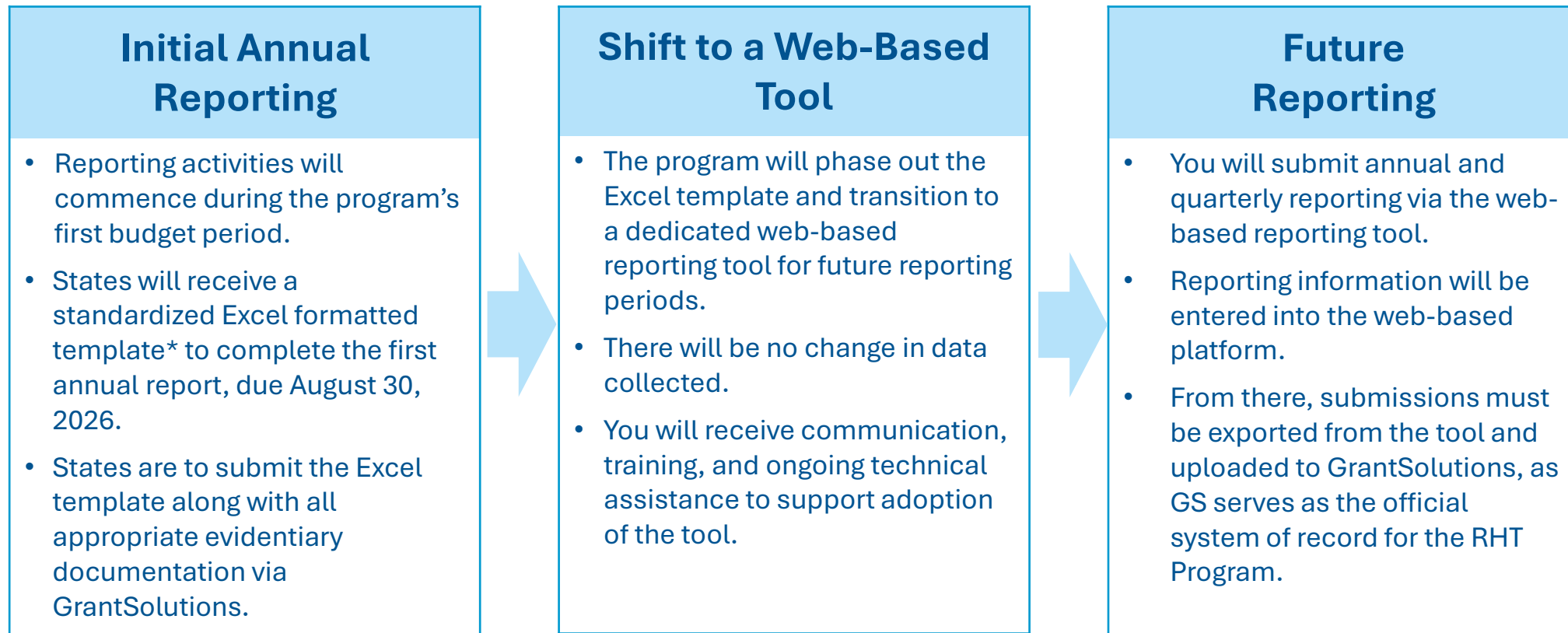
Initial Quarterly Report

- The first quarterly report is due **November 29, 2026**.



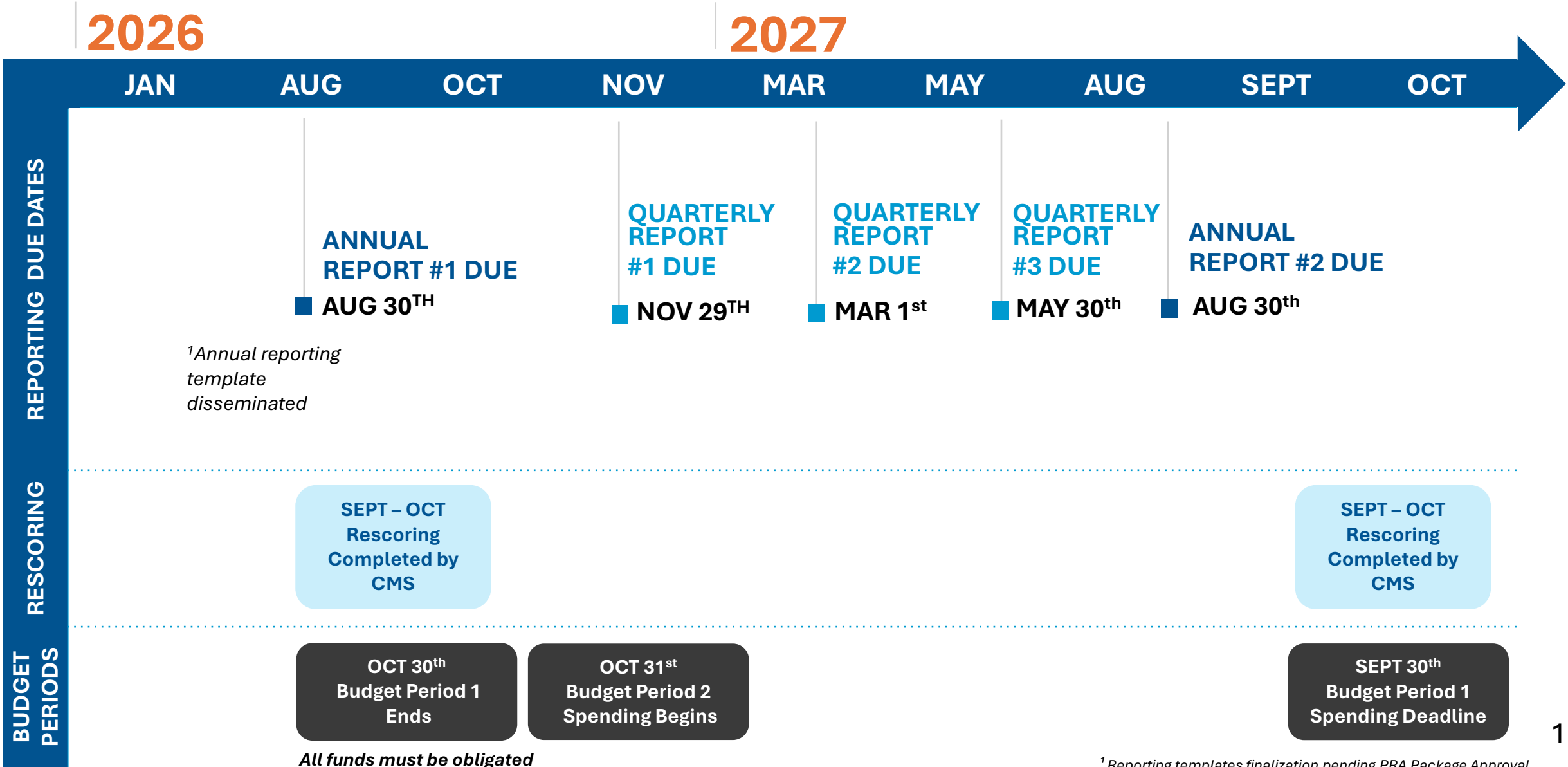
State Progress Reporting: Next Steps

Our process will begin with States using Excel templates to facilitate initial data collection, with the long-term solution being a dedicated web-based platform.



*State reporting template finalization pending Paper Reduction Act (PRA) Package Approval.

Near-Term Dates



¹Annual reporting template disseminated

All funds must be obligated

¹ Reporting templates finalization pending PRA Package Approval



02

Rescoring Process

Rescoring Overview

What workload funding factors are recalculated?

State policy actions and **initiative-based factors** are recalculated each budget period to determine annual funding distributions. *Data-driven* factors remain fixed and are not recalculated.

Initiative Progress Monitoring

- A **checkpoint model** is used to monitor initiative progress across States.
- Checkpoints comprise of progress towards initiative milestones, metrics, reporting, and more.
- Examples of supporting evidence vary by checkpoint.

State Policy Actions

- States can attest to advancements on policy commitments from their applications in their reporting.
- Attestations to policy advancements include supporting evidence such as links to State websites, press releases, and State registers.

Initiative Progress: Checkpoint Model

How will initiative progress be measured?

States submitted Stages in differing formats in their applications. Therefore, the ORHT developed the **checkpoint model** to measure initiative progress.

The checkpoint model:

1. **Reduces subjectivity** in progress determinations; and
2. **Standardizes** the treatment of Stages for each State.

The checkpoint model provides universally defined checkpoints to help States to make progress towards their initiative-based score factors. The model includes:

- Checkpoints spread across Stages 0 to 5.
- 17 checkpoints in total, with each checkpoint accounting for either 5% or 10% of progress completion.
- Submission of evidence of completion for each checkpoint.

Initiative Progress: Checkpoint Model

Table (1 of 2)

DRAFT TABLE

Stage	Checkpoint		Examples of Acceptable Evidence	Weight	
Stage 0 – Planning	0.1	Establish governance	Org chart, charter, designation memo, meeting minutes	5%	10%
	0.2	Submit project plan to CMS	Project plan	5%	
Stage 1 – Project Preparation	1.1	CMS approval of project plan	CMS approval	5%	10%
	1.2	Launch initiative	Go-live memo, public announcement, evidence of payment	5%	
Stage 2 – Early Implementation	2.1	Continue initiative activities	Evidence of project plan activities beyond launch	5%	20%
	2.2	Achieve at least one milestone	Utilization report, meeting minutes, dashboards	5%	
	2.3	Establish metric reporting methodology	Metric targets, baseline, and data collection methodology	5%	
	2.4	Submit updated project plan to CMS	Updated project plan (revisions of milestone timelines, metrics, etc.)	5%	
Stage 3 – Midway Implementation	3.1	CMS approval of updated project plan	CMS approval	5%	25%
	3.2	Complete Q2 2028 milestones	Utilization report, meeting minutes, dashboards	10%	
	3.3	Report initial metric progress to CMS	Report with initial metric progress and/or reporting methods	10%	
Stage 4 – Preparation for Completion	4.1	Share final deliverables plan with CMS	Draft report, reporting template/outline	5%	20%
	4.2	CMS approval of final deliverables plan	CMS approval	5%	
	4.3	Complete post-program planning	Sustainability plan, lessons learned, external funding, legislation	10%	
Stage 5 – Full Implementation	5.1	Submit final deliverables to CMS	Final report, dashboards	5%	15%
	5.2	Complete all 2030 milestones	Utilization report, meeting minutes, dashboards	5%	
	5.3	Report updated metric progress to CMS	Report with values and reporting method for all metrics	5%	

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•Interested parties should refer to the Federal Register for dates and instructions on how to submit official comments on this draft.

Initiative Progress: Checkpoint Stages 0 - 1

DRAFT TABLE

Stage	Checkpoint		Examples of Acceptable Evidence	Weight	
Stage 0 – Planning	0.1	Establish governance	Org chart, charter, designation memo, meeting minutes	5%	10%
	0.2	Submit project plan to CMS	Project plan	5%	
Stage 1 – Project Preparation	1.1	CMS approval of project plan	CMS approval	5%	10%
	1.2	Launch initiative	Go-live memo, public announcement, evidence of payment	5%	

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Initiative Progress: Checkpoint Stage 2

DRAFT TABLE

Stage	Checkpoint		Examples of Acceptable Evidence	Weight	
Stage 2 – Early Implementation	2.1	Continue initiative activities	Evidence of project plan activities beyond launch	5%	20%
	2.2	Achieve at least one milestone	Utilization report, meeting minutes, dashboards	5%	
	2.3	Establish metric reporting methodology	Metric targets, baseline, and data collection methodology	5%	
	2.4	Submit updated project plan to CMS	Updated project plan (revisions of milestone timelines, metrics, etc.)	5%	

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Initiative Progress: Checkpoint Model

Table (2 of 2)

DRAFT TABLE

Stage	Checkpoint		Examples of Acceptable Evidence	Weight	
Stage 0 – Planning	0.1	Establish governance	Org chart, charter, designation memo, meeting minutes	5%	10%
	0.2	Submit project plan to CMS	Project plan	5%	
Stage 1 – Project Preparation	1.1	CMS approval of project plan	CMS approval	5%	10%
	1.2	Launch initiative	Go-live memo, public announcement, evidence of payment	5%	
Stage 2 – Early Implementation	2.1	Continue initiative activities	Evidence of project plan activities beyond launch	5%	20%
	2.2	Achieve at least one milestone	Utilization report, meeting minutes, dashboards	5%	
	2.3	Establish metric reporting methodology	Metric targets, baseline, and data collection methodology	5%	
	2.4	Submit updated project plan to CMS	Updated project plan (revisions of milestone timelines, metrics, etc.)	5%	
Stage 3 – Midway Implementation	3.1	CMS approval of updated project plan	CMS approval	5%	25%
	3.2	Complete Q2 2028 milestones	Utilization report, meeting minutes, dashboards	10%	
	3.3	Report initial metric progress to CMS	Report with initial metric progress and/or reporting methods	10%	
Stage 4 – Preparation for Completion	4.1	Share final deliverables plan with CMS	Draft report, reporting template/outline	5%	20%
	4.2	CMS approval of final deliverables plan	CMS approval	5%	
	4.3	Complete post-program planning	Sustainability plan, lessons learned, external funding, legislation	10%	
Stage 5 – Full Implementation	5.1	Submit final deliverables to CMS	Final report, dashboards	5%	15%
	5.2	Complete all 2030 milestones	Utilization report, meeting minutes, dashboards	5%	
	5.3	Report updated metric progress to CMS	Report with values and reporting method for all metrics	5%	

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Initiative Progress Rescoring

Partial Stage Progress

- States may receive points for completing checkpoints in any order within the current Stage.
- Progress toward checkpoints in later Stages will only be scored once all checkpoints in the current stage are completed.

No Yearly Restriction for Checkpoint Stages

- States are encouraged to continue progressing through the checkpoint model. **States can complete multiple stages during a single Budget Period.**
- All completed Stages, **along with partial progress** within the current Stage, are included in the annual rescoring to measure State initiative progress.

Initiative Mapping to Score Factors

- The initiative-based score factors are recalculated based on the progress of all initiatives mapped to them in the State applications.
- States determined which initiatives were mapped to the initiative-based score factors in their applications, and those mappings will be used in rescoring.

Checkpoint Requirements

- States must provide **sufficient evidence** of progress on initiatives – such as reports, data, or other documentation.
- Each checkpoint has distinct requirements, including approval by CMS, metric progression, and milestone completion.

Initiative Rescoring Example (1 of 2)

- Initiative-based score factors will be rescored on the progress of each associated initiative.
- See below example of 3 initiatives mapping to the C.1. initiative-based score factor.

Stage	Checkpoint		Weight	Progress		
				Initiative #1	Initiative #2	Initiative #3
Stage 0 – Planning	0.1	Establish governance	5%	x	x	x
	0.2	Submit project plan to CMS	5%	x	x	x
Stage 1 – Project Preparation	1.1	CMS approval of project plan	5%	x	x	x
	1.2	Launch initiative	5%	x	x	x
Stage 2 – Early Implementation	2.1	Continue initiative activities	5%	x		x
	2.2	Achieve at least one milestone	5%			x
	2.3	Establish metric reporting methodology	5%	x		
	2.4	Submit updated project plan to CMS	5%			
Stage 3 – Midway Implementation	3.1	CMS approval of updated project plan	5%			
	3.2	Complete Q2 2028 milestones	10%			
	3.3	Report initial metric progress to CMS	10%			
Stage 4 – Preparation for Completion	4.1	Share final deliverables plan with CMS	5%			
	4.2	CMS approval of final deliverables plan	5%			
	4.3	Complete post-program planning	10%			
Stage 5 – Full Implementation	5.1	Submit final deliverables to CMS	5%			
	5.2	Complete all 2030 milestones	5%			
	5.3	Report updated metric progress to CMS	5%			
Progress Toward Completion				30%	20%	30%

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Initiative Rescoring Example (2 of 2)

The graphic below further illustrates the previous C.1. example with 3 mapped initiatives.

	Stage 0		Stage 1		Stage 2				Stage 3			Stage 4			Stage 5			Progress Toward Completion
	0.1	0.2	1.1	1.2	2.1	2.2	2.3	2.4	3.1	3.2	3.3	4.1	4.2	4.3	5.1	5.2	5.3	
Initiative #1	5%	5%	5%	5%	5%		5%											30%
Initiative #2	5%	5%	5%	5%														20%
Initiative #3	5%	5%	5%	5%	5%	5%												30%



= Completed Checkpoint

$$\text{Average Progress} = \frac{30\% + 20\% + 30\%}{3} = 26.67\% \text{ Progress}$$

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03

RHT Program State Reporting Template

State Reported Data - Forms

Data Form	Definition
Initiative Progress	Progress updates for each initiative including a narrative, current values of metrics, number of people served, and completed checkpoints with evidence.
State Policy Action Commitments	Progress updates on your proposed policy actions as detailed in your approved transformation plan.
Use of Funds	Description of fund expenditures by initiative and use of fund category.
Success Stories & Sustainability Planning	Highlight success stories from the RHT Program implementation and updates on how you plan to sustain successful initiatives after the RHT Program funding ends (after FY31).

State Reported Data - Elements

Element	Annual Report	Quarterly Report	Determines Scoring
Initiative Progress Narrative	✓		
Initiative People Served	✓		
Initiative Metrics	✓		
Initiative Checkpoints	✓	✓	✓
State Policy Action Commitments	✓	✓	✓
Use of Funds	✓	✓	
Success Stories	✓		
Sustainability Planning	✓		

Initiative Reporting

- Initiatives will be pre-populated based on the information provided in the State application.
- States should provide:
 - A narrative of the initiative progress with key activities from the reporting period
 - The number of people served by the initiative
 - Metric values (numeric) with the date of calculation
 - Checkpoint completion (Yes/No) with evidentiary documentation provided in an attachments PDF
 - Section heading of the checkpoint documentation in the attachments PDF or the checkpoint's external attachment file name
- A Master Initiative Attachments PDF of all initiative checkpoint evidence is required.

#	Initiative Name		
1	Make Rural America Healthy Again		
Narrative			
Number of People Served			
Please provide the number of people served			
Metrics			
#	Metric	Current Value	As of Date
1	Rural provider retention rate		
2	Percent of rural facilities utilizing RPM		
Stage 0 Planning			
	Checkpoint	Yes/No	Attachment(s)
0.1	Establish governance	Yes	Initiative 1 Checkpoint 0.1 in PDF
0.2	Submit project plan to CMS	Yes	Initiative 1 Checkpoint 0.2 in PDF
Stage 1 Project Preparation			
	Checkpoint	Yes/No	Attachment(s)
1.1	CMS approval of project plan	Yes	Initiative 1 Checkpoint 1.1 in PDF
1.2	Launch initiative	Yes	Initiative 1 Checkpoint 1.2 in PDF
Stage 2 Early Implementation			
	Checkpoint	Yes/No	Attachment(s)
2.1	Continue initiative activities	Yes	Initiative 1 Checkpoint 2.1 in PDF
2.2	Achieve at least one milestone	No	
2.3	Establish metric reporting methodology	Yes	Initiative 1 Checkpoint 2.3 in PDF
2.4	Submit updated project plan to CMS	No	
Stage 3 Midway Implementation			
	Checkpoint	Yes/No	Attachment(s)
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 Preparation for Completion			
	Checkpoint	Yes/No	Attachment(s)
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 Full Implementation			
	Checkpoint	Yes/No	Attachment(s)
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	

Annual Reporting

Quarterly Reporting

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• Interested parties should refer to the Federal Register for dates and instructions on how to submit official comments on this draft.

State Policy Action Commitments Reporting

- State policy action commitments will be pre-populated based on the commitments identified in the State applications.
- States cannot receive credit for policies they did not commit to in their initial applications.
- States should provide:
 - The current status of the policy commitment
 - Supporting evidence (e.g., links to State website, press release, State register)
 - Optional notes

Score Factor	Workload Funding Score Factor Criterion	Commitment	Current Status	Supporting Evidence	Optional Comments/Notes
B.2.	Presidential Fitness Test	Commitment Made	Commitment abandoned		
B.3.	SNAP Food Restriction Waiver Policy	Commitment Made	25 Points: Active bill in the State legislative process		
B.4.	Nutrition Continuing Medical Education	Commitment Made	Implemented	[Link to State website]	
C.3.	Overall CON Score	Commitment Made	50 Points: Score of 45-79 on Cicero report methodology	[Link to press release]	
	Physician Assistant - PA Compact	Commitment Made	0 Points: No active legislation to become a PA Compact member		
D.3.	NP - Scope of Practice	Commitment Made	0 Points: Restricted Scope of Practice	[Link to State register]	
	Dental Hygienist - Prescriptive Authority	Commitment Made	In Progress		
	Dental Hygienist - Direct Medicaid Reimbursement	Commitment Made	Implemented	[Link to State website]	
	Dental Hygienist - Dental Hygiene Treatment Planning	Commitment Made	Implemented	[Link to State website]	

This is a draft document subject to change and has **not been approved by the Office of Management and Budget (OMB).*

****DO NOT complete or submit this draft template.** CMS will not accept it.*

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**Interested parties should refer to the Federal Register for dates and instructions on how to submit official comments on this draft.*

Completed for both annual & quarterly reporting

Use of Funds Reporting

- This form will help States track their use of funds.
- States should provide entries for each payment.
- A payment can be written as multiple lines by splitting on initiative number, use of funds category, or recipient.

ID	Spent Funds (\$)	Description	Init #	Use of Funds	Recipient Name	Recipient Category
1	\$ 3,500,000.00	Funds paid to the workforce development board to deliver technical trainings.	1	Training and technical assistance	XXXX	State agency
2	\$ 10,000,000.00	Half of funds allocated to Initiative 1 disbursed to Recipient XXXX for provider payments.	2	Provider payments	XXXX	University-affiliated health care organization
3	\$ 10,000,000.00	Half of funds allocated to Initiative 1 disbursed to Recipient YYYY for provider payments.	2	Provider payments	YYYY	Other health care organization
4	\$ 2,000,000.00	Initiative 2 funds attributed to IT advances use of funds.	3	IT advances	XXXX	Other
5	\$ 4,000,000.00	Initiative 2 funds attributed to innovative care use of funds.	3	Innovative care	XXXX	Community-based organization
6	\$ 1,000,000.00	Initiative 2 funds attributed to consumer tech solutions use of funds.	3	Consumer tech solutions	XXXX	Contractor

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•Interested parties should refer to the Federal Register for dates and instructions on how to submit official comments on this draft.

Completed for both annual & quarterly
reporting

Sustainability and Highlights Reporting

- States, please share your success stories with us!
- States should provide:
 1. Success story highlights
 2. Updates on sustainability planning

Success Stories
Please share success stories that you want to highlight as result of your State’s implementation of the RHT Program.

Sustainability Planning
What are the most significant updates or changes to your sustainability plan based on the past year's experiences, successes, and challenges?

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•**DO NOT complete or submit this draft template.** CMS will not accept it.
•CMS is currently undergoing the PRA process to obtain OMB approval and will inform all parties when the final template is approved.
•Interested parties should refer to the Federal Register for dates and instructions on how to submit official comments on this draft.

Initial Annual Reporting Submission

For the first annual report, States need to:



Complete and upload the State Reporting Excel Template* for their initiatives, State Policy Action Commitments, Use of Funds, and Success Stories & Sustainability Planning.



Submit evidentiary documentation for each completed checkpoint indicated in the State Reporting Excel Template*. We recommend compiling a Master Initiative Attachments PDF.



Note: GrantSolutions limits uploads to 5 files with sizes up to 1 GB each.

Initial Annual Reporting Upload to GrantSolutions

- Our recommendation to State awardees for uploading reporting to GrantSolutions includes sharing the following:
 1. The State Reporting Excel Template.
 2. A Master Initiative Attachments PDF with all initiative checkpoint attachments.
- Evidentiary documentation of checkpoint completion must be labeled by initiative number and Stage/checkpoint number in the Master Initiative Attachments PDF.

Master Initiative Attachments PDF

Initiative #1

Checkpoint 0.1 – Establish Governance



Checkpoint 0.2 – Submit Project Plan



State Expectations

We look to States as active partners in the reporting and compliance process, working together to achieve our shared program goals.

Collaborate and Communicate with CMS

- ✓ Partner with your PO to discuss progress, seek support and technical assistance



Provide Evidentiary Documentation

- ✓ Properly document your progress in completing your proposed initiatives
- ✓ Prepare evidentiary documentation for report submissions, as applicable



Conduct Subrecipient Oversight

- ✓ Verify that subrecipients comply with federal terms and conditions, including reporting



Submit Required Progress Reports

- ✓ Submit annual and quarterly reporting by established deadlines and in accordance with program requirements





05

Resources & Closing

Next Steps

Following this session, you should:

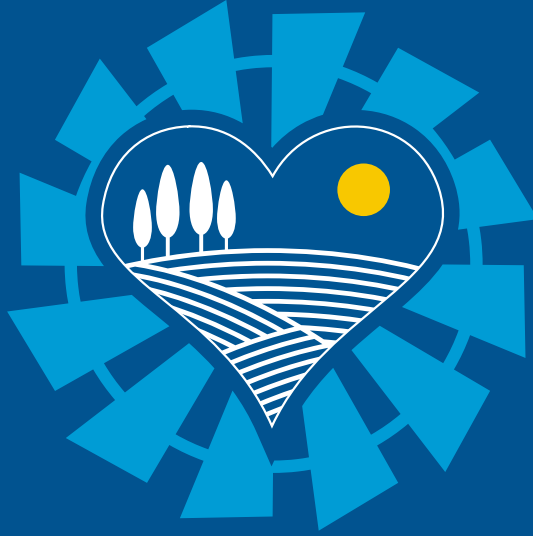
- Continue to familiarize yourself with the annual and quarterly reporting requirements.
- Review the draft State Reporting Template to gain a greater understanding of data that may be collected via annual and quarterly reporting. *Please note, the template is still undergoing necessary clearance processes and may be subject to change.*
- Continue meeting and collaborating with your PO on a regular basis.
- Once your budget has been approved, get started on progressing towards your first checkpoints.

Resources

Important links to bookmark:

- [FAQs](#)
- [Grant Solutions](#)
- [Post Award Reporting Requirements](#) – Review requirements not covered during this session.
- [Welcome Webinar Slides](#)
- [RHT Program Applicants Webinars](#) - September 19, 2025 webinar
- [RHT Program Listserv](#) – make sure you subscribe!
- [Rural Health Transformation Summit registration](#) – make sure you register!

Q&A



RURAL HEALTH TRANSFORMATION

State Policy Action (SPA) Commitments and Initiative Information Reports (IIRs)

May 28, 2026



Agenda Overview

01

**State Policy
Action Commitments**

02

**Initiative
Information Reports**

03

Q&A



Jason Berry

Director

Division of State Rural Engagement
Office of Rural Health
Transformation

Presenters



Krista Marquard

Office of Rural Health
Transformation

Project Officer



Kimi Sato

Office of Rural Health
Transformation

Project Officer

Session Objectives

Ensure State awardees understand...



How State Policy Action Commitments impact scoring, funding, and compliance



How to complete Initiative Information Reports (IIRs) and why CMS is requesting this information

The background features a solid dark blue field. On the left side, there are several overlapping geometric shapes in two shades of blue (a lighter sky blue and a darker navy blue) and one bright yellow rectangle. The yellow rectangle is positioned horizontally and contains the number '01' in dark blue. To the right of this rectangle, the text 'State Policy Action Commitments' is written in white, bold, sans-serif font, arranged in two lines.

01

State Policy Action Commitments

State Policy Actions (SPAs) in the Context of RHTP



What are State Policy Actions (SPAs)?

- State Policy Actions are a part of the technical score used to calculate workload funding.
- States had the option to commit to SPAs in their applications.



Why does it matter?

- Progress on SPA commitments are reported on annually/quarterly and rescored annually.
- This progress directly impacts funding levels over the course of the program.



What do States receive credit for?

- I. Baseline Policy – Baselines provided in the State applications. In the absence of being provided, CMS determined the baselines using data outlined in Table 4 of the NOFO.
- II. SPA Commitments – Commitments that States made in their applications.
- III. SPA Implementation – States' progress towards meeting their State Policy Action commitments.

Paperwork Reduction Act (PRA) Disclaimer

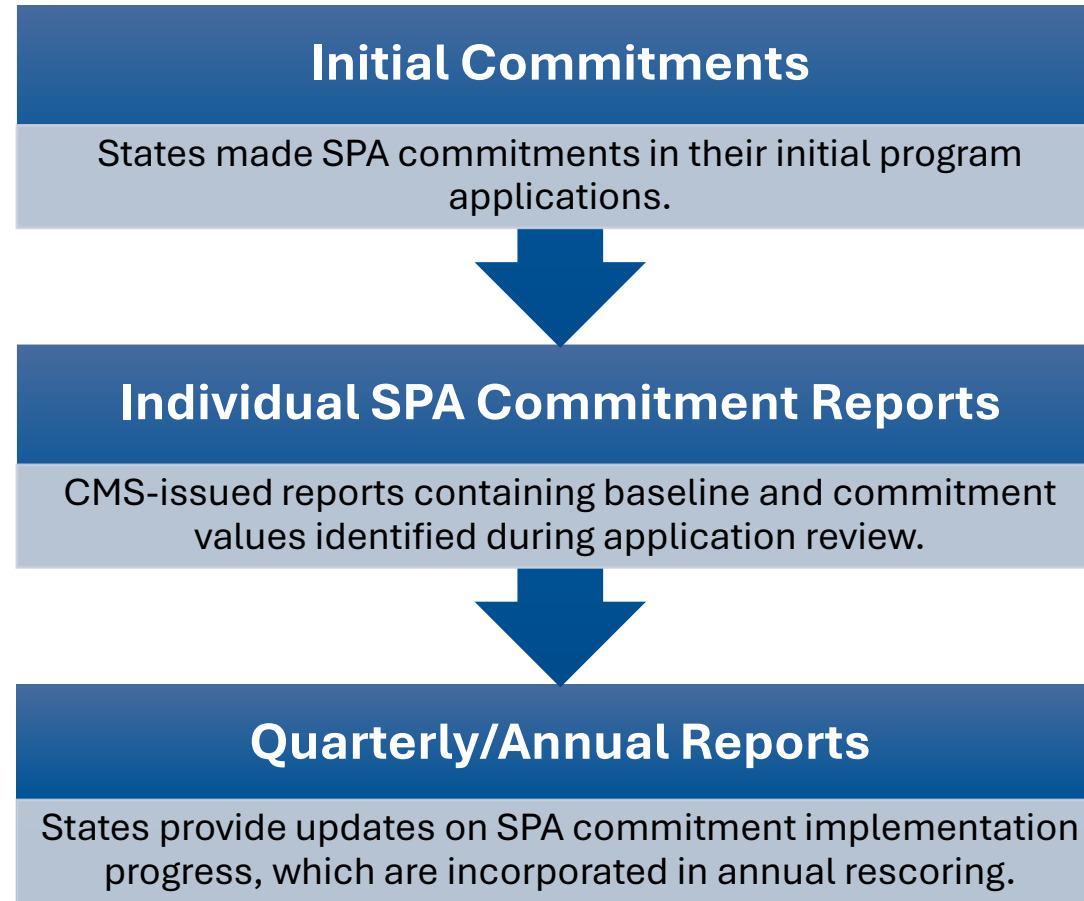


- The annual reporting template is a draft document that is subject to change and has not been approved by the Office of Management and Budget (OMB).
- Regarding other disclosures, please note that the Rural Health Transformation Program reporting is a new collection of information request that has not yet been approved by OMB.
- At this time, the OMB control number has yet to be determined. OMB will formally issue the control number upon their approval of the 30-day collection of information request.
- **DO NOT complete or submit the draft template.** CMS will not accept it.
- CMS is currently undergoing the PRA process to obtain OMB approval and will inform all parties when the final template is approved.
- Interested parties should refer to the Federal Register for dates and instructions on how to submit official comments on this draft.



Subject to PRA = Subject to Paperwork Reduction Approval

State Policy Action (SPA) Commitment Reporting: Timeline



★ Subject to PRA

Individual State Policy Action (SPA) Commitment Report

The specific policy area being assessed for workload funding.

The SPA commitments that CMS identified in the State application.

Score Factor	Workload Funding Score Factor Criterion	Baseline	Commitment
B.2.	Presidential Fitness Test	No points	No Commitment
B.3.	SNAP Food Restriction Waiver Policy	25 Points: State with active bill in the State legislative process	100 Points: USDA approved State waiver prohibiting the purchase of non-nutritious items in SNAP
B.4.	Nutrition Continuing Medical Education	No points	No Commitment
C.3.	Overall CON Score	25 Points: 80-99 score from Cicero report for States with stringent CONs across facility categories	No Commitment
	CON - Behavioral Outpatient	Restricted	No Commitment
	CON - Medical Outpatient	Restricted	No Commitment
	CON - Behavioral Inpatient	Restricted	No Commitment
	CON - Imaging	Unrestricted	No Commitment

- *The Baseline Score for the SPA score factor, as determined by CMS and validated by the State application.*
- *Does not include corrections or clarifications made by States after their applications were submitted. If such corrections were accepted by CMS, they will be reflected in the next budget period scoring.*

Current Credit Lifecycle

Starting Point (Baseline)

Initially, a State's Current Credit is the Baseline Score. This reflects the existing, enacted policies at the time of application.

Reporting Updates (Current Status)

During annual reporting, CMS will evaluate State-submitted evidence of SPA commitment progress and determine the Current Credit for each score factor.

The Commitment (Full Credit)

Once the commitment is achieved and confirmed by CMS, the Current Credit reaches Full Credit for the SPA score factor for the remainder of the program.

- In each budget period, the State's score will be halfway between their Current Credit and their Full Credit commitment score.
- For some score factors, incremental progress towards the commitment may affect Current Credit until the State achieves Full Credit.

State Policy Action (SPA) Commitment Reporting

Excel Reporting Template

For the first annual report only, SPA commitment progress will be reported in Excel.



Web-Based Reporting

Starting with the first quarterly report, reporting will occur in the web-based tool.

- In both reporting tools, the State's SPA commitments will be pre-populated based on the values from the SPA Report and will also reflect all corrections that have been made since the applications were submitted.
- States report updates to the Current Status and Supporting Evidence of their pre-populated SPA commitments. Scores for SPA score factors for which a State did not make a commitment will not change for the duration of the program, even if the State's policy changes.

★ Subject to PRA

State Policy Action (SPA) Commitment Reporting Fields

Score Factor	Workload Funding Score Factor Criterion	Baseline	Commitment	Current Status	Supporting Evidence	Optional Comments/Notes
B.3.	SNAP Food Restriction Waiver Policy	0 Points: State has no pending or approved USDA SNAP food restriction waiver prohibiting the purchase of non-nutritious items or no pending State bill requiring a food restriction waiver be submitted to USDA	100 Points: USDA approved State waiver prohibiting the purchase of non-nutritious items in SNAP	75 Points: State submitted a waiver prohibiting the purchase of non-nutritious items in SNAP and waiver is in processing with USDA		

Current Status Dropdown for score factor B.3.

Commitment Abandoned
 0 Points: State has no pending or approved USDA SNAP food restriction waiver prohibiting the purchase of non-nutritious items or no pending State bill requiring a food restriction w...
 25 Points: State with active bill in the State legislative process
 50 Points: State bill was passed to submit a USDA food restriction waiver
 75 Points: State submitted a waiver prohibiting the purchase of non-nutritious items in SNAP and waiver is in processing with USDA
 100 Points: USDA approved State waiver prohibiting the purchase of non-nutritious items in SNAP

Current Status

- Select the Current Status of the SPA commitment from the dropdown.
- Selecting “Commitment Abandoned” initiates fund recovery for previously scored budget periods.

Supporting Evidence

- Provide evidence of any scoring change.
- Supporting evidence can be provided as a link to the policy on the State website or register, or as a PDF attachment.

Optional Comments

- You may add context or additional narrative to explain your Current Status and Supporting Evidence.

B.3. SNAP Scoring Illustration

Initial Application		Annual Reporting Period 1		Annual Reporting Period 2	
Current Credit (Baseline)	0 Points No Policy	Current Credit (State Reported)	25 Points Active Bill	Current Credit (State Reported)	100 Points USDA Approval
Full Credit (Commitment)	100 Points USDA Approval	Full Credit (Commitment)	100 Points USDA Approval	Full Credit (Commitment)	100 Points USDA Approval
Calculation	$\frac{(100 + 0)}{2}$	Calculation	$\frac{(100 + 25)}{2}$	Calculation	$\frac{(100 + 100)}{2}$
Budget Period 1 Score	50 Points	Budget Period 2 Score	62.5 Points	Budget Period 3 Score	100 Points

$$\text{Score} = \frac{(\text{Full Credit} + \text{Current Credit})}{2}$$

★ Subject to PRA

State Policy Action (SPA) Commitment Funding Recovery

If a State does not fulfill its specific commitment by the deadline, the points for that factor revert to the baseline score, and CMS initiates funding recovery.

For Most State Policy Action Score Factors:

Deadline: End of Calendar Year (CY) 2027

When Recovery Starts: If the commitment is not fully implemented by the end of CY 2027, funding recovery begins in Budget Period 4.

What is Recovered: CMS will recover the incremental funds that were paid out to the State during Budget Periods 1, 2, and 3 for each unmet SPA commitment. The SPA score(s) will also drop back to the Baseline for Budget Periods 4 and 5.

For Factors B.2. and B.4. ONLY:

Deadline: End of Calendar Year (CY) 2028

When Recovery Starts: If the commitment is not fully implemented by the end of CY 2028, funding recovery begins in the subsequent budget period (Budget Period 5).

What is Recovered: CMS will recover the incremental funds that were paid out to the State during Budget Periods 1, 2, 3, and 4 for each unmet SPA commitment. The SPA score(s) will also drop back to the Baseline for Budget Period 5.

If a State chooses to abandon its SPA commitment in a quarterly/annual report prior to the deadline, then incremental funds due to that commitment will be recovered for all previously scored budget periods.

B.3. Funding Recovery Illustration

End of CY 2027

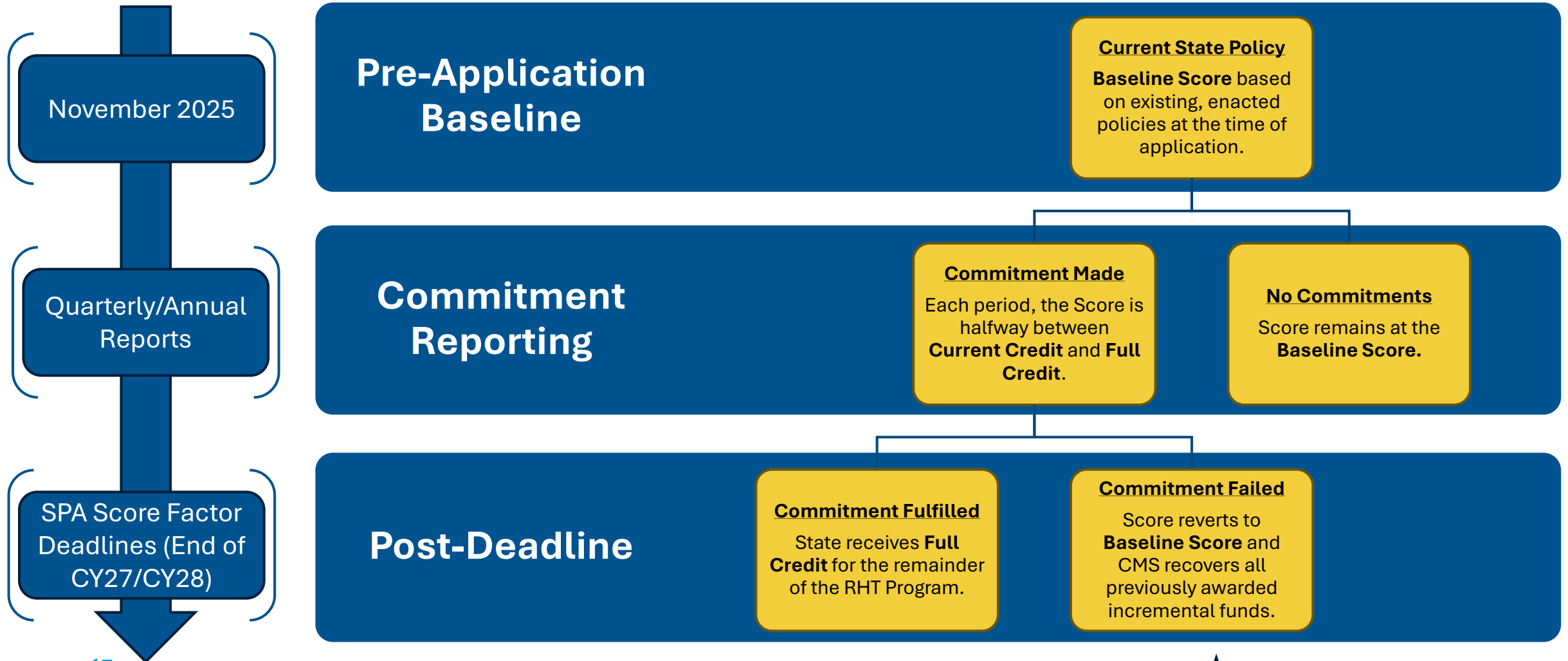
Failure to fulfill the SPA commitment results in the Current Credit reverting to the Baseline score.

Initial Application		Annual Reporting Period 1		Annual Reporting Period 2		Annual Reporting Period 3	
Current Credit (Baseline)	0 Points No Policy	Current Credit (State Reported)	25 Points Active Bill	Current Credit (State Reported)	50 Points State Bill Passed	Current Credit (State Reported)	0 Points No Policy
Full Credit (Commitment)	100 Points USDA Approval	Full Credit (Commitment)	100 Points USDA Approval	Full Credit (Commitment)	100 Points USDA Approval	Full Credit (Commitment)	N/A
Calculation	$\frac{(100 + 0)}{2}$	Calculation	$\frac{(100 + 25)}{2}$	Calculation	$\frac{(100 + 50)}{2}$	Calculation	N/A
Budget Period 1 Score	50 Points	Budget Period 2 Score	62.5 Points	Budget Period 3 Score	75 Points	Budget Period 4 Score	0 Points
Example Funds Received	\$1M	Example Funds Received	\$1.2M	Example Funds Received	\$1.4M	Example Funds Received	\$0

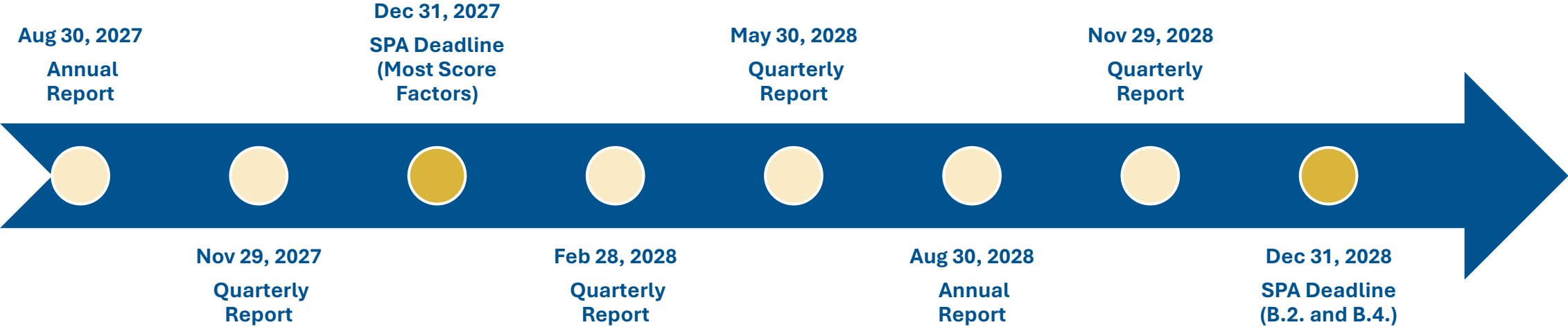
- State received funding in each budget period based on both its commitment and progress.
- All funding beyond the baseline score is subject to recovery if the commitment is not fulfilled.

CMS begins to recover
\$1M + \$1.2M + \$1.4M =
\$3.6M
from the State in CY 2028

How Do Policy Commitments Affect Funding?



State Policy Action (SPA) Implementation Deadlines



In each budget period, the reporting period ends on July 31st. **Only policy changes that are implemented prior to July 31st** will affect the score factor's Current Credit (and hence funding) for the following budget period.

★ Subject to PRA



02

Initiative Information Reports (IIRs)

What are Initiative Information Reports (IIRs)?

Elements of IIR		State Action by June 18th
Metric Clarification	CMS extracted metrics provided in State applications and identified where aspects of the metric are unclear.	States should provide clarifications on their metrics as indicated by CMS.
Milestone Date Clarification	CMS reviewed milestones in the State applications to identify where milestone date definitions are unclear (e.g., CY or FY, and fiscal year period).	States should provide clarifications on their milestone date definitions using the dropdowns, if needed.

IIR Clarification Overview



- CMS identified unclear areas in metrics and milestone date definitions that would benefit from clarifications before annual reporting.
- IIRs are intended to clarify information already included in approved State applications and are not related to scoring or award determinations.
- IIRs contain state-specific clarification requests tailored to the unique level of detail in each application.
- CMS understands these clarifications fall within the scope of non-standardized follow-up requests regarding previously submitted information. As described in 5 CFR 1320.3(h)(9), "information" does not include facts or opinions obtained or solicited through non-standardized follow-up questions designed to clarify responses to approved collections of information.

IIR Metric Description and Determination Fields

- Metrics identified from the State application are listed in each line.
- These fields were determined by CMS and should not be edited.

Identified as “Specified” or “Unclear”

Extracted from State Applications				CMS Determination			
Metric Description	Baseline Approach	Baseline Value	Target Description	Baseline Specification	Target Specification	Target Completion Date Specification	CMS Notes
A description of the metric as identified in the application.	A description of the baseline approach as text.	The numeric baseline value from which metric progress will be measured.	The numeric goal for the metric and the target completion date.	A numeric value is required.* The baseline may be defined in the Approach or Value column.	A target should be a numeric value (absolute or relative) such as a number, percentage, or percentage point that relates to the baseline.	A completion date should be provided for the target. Year definitions (e.g., FY) should be clarified.	Notes to describe the missingness of the metric.

* For some metrics, a baseline value was either implied or is not relevant. CMS considered these cases to be “Specified”.

IIR Metric State Update Fields

State Updates					
Updated Metric Description	Updated Baseline Approach*	First Reported Value to be Used as Baseline*	Updated Baseline Value	Updated Target Description	State Comments*
The State should provide a metric that is a measurable, numeric outcome.	The State may provide text to explain the baseline approach. Ultimately, only a metric baseline value is required.	The State may indicate whether the first quarterly/annual reported value should be used as the baseline. This field is optional and defaults to “No”.	The State should provide an initial value for the metric from which progress will be measured.	The State should provide a target value and target completion date for the metric. The “Specification” and “Notes” columns describe whether one or both of the target and target completion date are missing.	The State may provide additional comments.

- The State should provide updates where these fields are highlighted Red in the IIR.
- Fields highlighted Green are specified and optional to update, but remain available for State updates if desired.
- Fields marked with an asterisk (*) in the table above (and white in the IIR) are also optional.

IIR Metric Examples

Examples of Specified Metrics:

Initiative Metrics							
Metric Description	Baseline Approach	Baseline Value	Target Description	Baseline Specification	Target Specification	Target Completion Date Specification	CMS Notes
Number of physicians per 100,000 residents		215 (CY 2024)	220 by FFY 2030	Specified	Specified	Specified	
Average EMS response time in rural counties (minutes)		20 minutes as of January 2025	15 minutes by October 2030	Specified	Specified	Specified	

Examples of Unclear Metrics:

Initiative Metrics							
Metric Description	Baseline Approach	Baseline Value	Target Description	Baseline Specification	Target Specification	Target Completion Date Specification	CMS Notes
Cost savings from program implementation			Target will be set in the first year.	Unclear	Unclear	Unclear	Metrics should be measurable, numeric outcome. Consider changing metric description, baseline approach/baseline value, and target description.
Number of new residency positions created under the initiative		0	12	Specified	Specified	Unclear	Target completion date should be clarified.
Number of rural registered dental hygienists		TBD	1,000 by the end of 2029	Unclear	Specified	Specified	Baseline should be clarified.
Decrease % of rural population diagnosed with Hypertension	Data sourced from 2020-2023 State Medicare claims	49%	Decrease starting in 2027	Specified	Unclear	Unclear	Target and target completion date should be clarified.

IIR Metric Clarifications – Conditional Formatting (1 of 2)

States should refer to the conditional formatting in the IIR file to understand where updates are needed. The table below shows a State properly updating their metrics to correct the unclear information.

If the Baseline, Target, or Target Completion Date were unclear to CMS, the cells are marked “Unclear” and highlighted Red.

The update fields are available for the State to provide clarifications. These update fields are also highlighted Red if the related part of the metric is unclear.

				State Updates				
Baseline Specification	Target Specification	Target Completion Date Specification	CMS Notes	Updated Metric Description	Updated Baseline Approach	First Reported Value to be Used as Baseline	Updated Baseline Value	Updated Target Description
Specified	Specified	Specified				No		
Specified	Specified	Specified				No		
Unclear	Unclear	Unclear	Metrics should be measurable, numeric outcome. Consider changing metric description, baseline approach/baseline value, and target description.	Administrative costs as a % of rural hospital expenses		Yes		Admin costs on average are 20% of rural hospital expenses by FFY 2030
Specified	Specified	Unclear	Target completion date should be clarified.			No		12 by July 2030
Unclear	Specified	Specified	Baseline should be clarified.			No	935	
Specified	Unclear	Unclear	Target and target completion date should be clarified.			No		42% by December 31,2027

The State may also update the Green-highlighted fields as needed, subject to CMS review and approval.

IIR Metric Clarifications – Conditional Formatting (2 of 2)

White cells are optional to update. “First Reported Value to be Used as Baseline” defaults to “No” and should only be set to “Yes” if the State wants CMS to use the first reported value in quarterly/annual reporting as the baseline for the metric.

Baseline Specification	Target Specification	Target Completion Date Specification	CMS Notes	State Updates				
				Updated Metric Description	Updated Baseline Approach	First Reported Value to be Used as Baseline	Updated Baseline Value	Updated Target Description
Specified	Specified	Specified				No		
Specified	Specified	Specified				No		
Unclear	Unclear	Unclear	Metrics should be measurable, numeric outcome. Consider changing metric description, baseline approach/baseline value, and target description.	Administrative costs as a % of rural hospital expenses		Yes	23.8%	Admin costs on average are 20% of rural hospital expenses by FFY 2030
Specified	Specified	Unclear	Target completion date should be clarified.					12 by July 2030
Unclear	Specified	Specified	Baseline should be clarified.				935	
Specified	Unclear	Unclear	Target and target completion date should be clarified.					42% by December 31, 2027

If a baseline is given in this form and “Yes” is selected, this cell will be highlighted **Yellow** to indicate that a baseline has already been provided. If the “Yes” remains, a State-provided baseline may be overridden by the first value reported in quarterly/annual reporting.

IIR Metric Additions/Deletions

- The State may decide to add or delete metrics in the IIRs.
- Keep in mind that each initiative must have at least four metrics, of which at least one must be at a county or community level of granularity.

	Action	Outcome
Metric <u>Addition</u>	• Insert a new row and populate the initiative info columns (A-D) and the State Update columns (M-Q) for the metric. • Do not update the CMS-determined columns (E-L).	• The metric will be added to CMS' database, tracked for the duration of the program, and pre-populated for State annual reporting.
Metric <u>Deletion</u>	• In the Delete Metric column S, select "Delete Row" from the dropdown. • Do not delete any rows in the Excel file.	• Deleted rows will appear with a strikethrough. • The metric will be excluded from future reporting.

CMS will review all metric additions/deletions for approval.

Examples of Metric Additions/Deletions

Metric Addition:

A	B	C	D
State	Initiative #	Initiative Title	Metric #
XXXX	1	Implementation of Initiative #1	5

...

M	N	O	P	Q
State Updates				
Updated Metric Description	Updated Baseline Approach	First Reported Value to be Used as Baseline	Updated Baseline Value	Updated Target Description
Infant mortality rate in rural counties		No	6.5 deaths per 1,000 live births	5.5 deaths per 1,000 live births by December 2030

States should maintain sequential numbering for all newly added metrics.

Metric Deletion:

Initiative Metrics							
Metric #	Metric Description	Baseline Approach	Baseline Value	Target Description	Baseline Specification	Target Specification	Target Completion Date Specification
1	Decrease % of rural population diagnosed with Hypertension	Data sourced from 2020-2023 State Medicare claims	49%	Decrease starting in 2027	Specified	Unclear	Specified

...

Delete Metric

Delete Row

Delete Row

Metric Annual Reporting

- Annual reporting requires States to provide the current value of each of their metrics for each initiative if available. This enables CMS to track progress of metrics over time.
- States are expected to fill in the “Current Value” and “As of Date” fields.

Metrics			
#	Metric	Current Value	As of Date
1			
2			
3			
4			



- Metrics from the IIRs will be pre-populated for each initiative in the State Excel Reporting Template for the first annual report and in the web-tool for future reporting.
- Metric clarifications received **after June 18th** may not be incorporated into the Excel Reporting Template.

IIR Milestone Date Clarification Fields

The following fields are provided to describe the milestone date definitions and allow the State to provide clarifications:

CMS-Provided			State Updates		
State	State Instructions	Example of Entries Provided in State Application	Milestone Date Definition	First Month of Fiscal Year	Explanation for “Other” Selection
The name of the State.	Explanation of the milestone date definition clarification being requested.	Examples of unclear milestone dates from the State application.	Dropdown for the State to indicate the milestone date definition intended in the State application.	If “State Fiscal Year” is selected in the Milestone Date Definition dropdown, please identify the first month of the fiscal year in the dropdown; otherwise leave blank.	If “Other” is selected in the Milestone Date Definition dropdown, please specify why; otherwise leave blank.

IIR Milestone Date Clarification

- Many States reported their milestone dates using verbiage such as “Q3 2027” or “FY 2028”. In such cases, the State should clarify how CMS should map the entries onto actual dates using the dropdowns in the IIR.
- This is not adjusting milestone timelines, only specifying the milestone date definition used in the application.
- If milestone date definitions were clear to CMS from the State application, then this tab will not be present in the State IIR.

State	State Instructions	Example of Entries Provided in State Application	Milestone Date Clarification	First Month of Fiscal Year	Explanation for "Other" Selection
Indiana	For any targeted completion dates provided in the format “QX FYXX,” please specify the relevant fiscal year period.	Through FY26; Q1 FY27; By FY31	Federal Fiscal Year (October - September) RHT Program Year/Budget Period (November - October) Calendar Year (January - December) State Fiscal Year (Please specify in column F) Other (Please specify in column G)		

IIR Milestone Date Clarification Example

Original:

State	State Instructions	Example of Entries Provided in State Application	Milestone Date Definition	First Month of Fiscal Year	Explanation for "Other" Selection
XXX	For any target completion dates provided in the format "QX FYXX," please specify the relevant fiscal year period.	Q4 FY 2027			

State Updated:

State	State Instructions	Example of Entries Provided in State Application	Milestone Date Definition	First Month of Fiscal Year	Explanation for "Other" Selection
XXX	For any target completion dates provided in the format "QX FYXX," please specify the relevant fiscal year period.	Q4 FY 2027	State Fiscal Year (Please specify in column F)	July	

The milestone dates were written in the State application as FY. The State should clarify State or Federal fiscal year. If State fiscal year, then specify the first month of the State fiscal year.

The background features a solid dark blue field. On the left side, there are several overlapping geometric shapes in two shades of blue (a lighter sky blue and a darker navy blue) and one bright yellow rectangle. The yellow rectangle is positioned horizontally and contains the number '03' in a bold, dark blue font.

03

Q&A

Thank you for joining!

We'd love to hear your thoughts!
Please click the link to fill out our
quick post-event survey: [May Webinar
Post Event Survey](#)

 [Return home](#)

{State} RHTP

Click the “**Start RHTP Report**” button to begin creating your report. Refer to the reference guide "RHTP_State Reporting Expectations_Guide" as needed for additional support. Prior to submitting your report confirm all the information is complete and accurate.

Understanding report statuses

- **Not started:** The report has been created but no data has been entered or actions taken.
- **In progress:** The report is actively being worked on, with some or all data entered.
- **Submitted:** The report has been completed and submitted to CMS for review.
- **In revision:** The report has been sent back to the state for revisions or additional information after submission.

Filter by Budget Period

All

Filter

Submission name	Last edited	Edited by	Status	Actions
{State} {Submission name} {Year}	03/28/2026	Samuel Reportson	Not started	Edit

Start RHTP Report



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

General Information

Authorized Organizational Representative (AOR)

Enter the name for CMS to contact with questions about this report.

Authorized Organizational Representative (AOR) Contact email

Enter the email address for the AOR.

Principal Investigator or Program Director

Enter the name for CMS to contact with questions about this report.

Principal Investigator or Program Director Contact email

Enter the email address for the PI/PD.

Point of Contact (POC) listed in NoA (Optional)

Optionally added and approved by CMS

Point of Contact (POC) email (Optional)

Enter the email address for the Additional Point of Contact listed in the NoA

Continue 

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-TBD (Expires: TBD). The time required to complete this information collection is estimated to average 10.5 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Initiative Attachments

The table below lists all attachments added to any initiatives. From here you can:

- Add new attachments
- Edit or delete existing attachments dependent on their status
- Leave or respond to comments on any attachment
- Utilize the comment icon to add new comments and adjust statuses where appropriate by attachment

Understanding initiative statuses

—

- **Pending Review** - This status is applied automatically when a new attachment is added. It lets CMS know the document is ready to be reviewed.
- **Needs Revision** - CMS uses this status when a document needs updates or corrections from the state. Please review CMS feedback and upload a revised version as needed. When in this status, attachments can no longer be deleted.
- **Locked for Scoring** - CMS uses this status when a document has been locked for scoring. When in this status, attachments are locked and cannot be edited or deleted.
- **Informational** -CMS or the state may use this status for documents that are for reference only. These documents are not used for scoring. When in this status, attachments can no longer be deleted.
- **Archived** - CMS or the state may use this status for documents that are no longer part of the active submission but should be kept for records. When in this status, attachments can no longer be deleted.

+ Add Attachment

Name	↕	Initiatives	↓	Stage/ Checkpoint	↓	Last Edited	↓	Status	↓	Actions
{Attachment name}		{Initiatives #1, #2, #3}		{Stage/ checkpoint}		04/15/2026		Needs review		Edit Status/Comments ✕
{Attachment name}		{Initiatives #1, #2, #3}		{Stage/ checkpoint}		04/15/2026		Needs review		Edit Status/Comments ✕
{Attachment name}		{Initiatives #1, #2, #3}		{Stage/ checkpoint}		04/15/2026		Needs review		Edit Status/Comments ✕

Previous

Continue



Upload Initiative Attachments

✕ Close

Which initiative does this attachment apply to?

- ☐ {Initiative 1}
- ☐ {Initiative 2}
- ☐ {Initiative 3}
- ☐ {Initiative 4}
- ☐ {Initiative 5}

Which stage/checkpoint does this attachment apply to?

- Select an option -

▼

Select a file or files to upload

Drag files here or [Choose from folder](#)

Selected Files

file.ext

7 KB

✕

file.ext

❗ Incorrect file format - cannot be uploaded

10 KB

✕

Uploaded Files

These files have been attached to the stage(s) and checkpoint(s) selected above.

[file2.ext](#)

10 KB

✕

Done

Edit Attachment

[✕ Close](#)

Which initiative does this attachment apply to?



{Initiative 1}



{Initiative 2}



{Initiative 3}



{Initiative 4}



{Initiative 5}

Which stage/checkpoint does this attachment apply to?

0.1 Establish governance



File

This file is attached to the stage and checkpoint selected above.

[file2.ext](#)

10 KB

Save



Warning

Deleting this attachment will remove it from all initiatives, stages, and checkpoints below.

Which initiative does this attachment apply to?



{Initiative 1}



{Initiative 2}



{Initiative 3}



{Initiative 4}



{Initiative 5}

Which stage/checkpoint does this attachment apply to?

0.1 Establish governance



File

This file is attached to the stage and checkpoint selected above.

[file2.ext](#)

10 KB

Delete

Add comment to attachment

[✕ Close](#)

Use the fields below to manage the attachment status and leave comments for your CMS Project Officer. Certain statuses restrict the ability to modify or remove files:

- **Needs Revision, Informational, Archived:** The attachment will no longer be able to be deleted.
- **Locked for Scoring:** The attachment is locked and cannot be edited or deleted.

Attachment: {Name of attachment}

Status

- Select an option -

▼

Comment

Input text

Add comment

Previous Comments

{Name} {Date} {Time}

Status:

Shared with State

Ready for review

{Name} {Date} {Time}

Status:

Shared with State

Ready for review

Close

{State: Name of the report submission}

 Last saved XX:XXpm

Leave form

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Initiatives

The list below includes initiatives you have previously submitted to CMS. Select **Edit** for each initiative to report on its progress.

Initiative	Actions
{Initiative number and name} Status: Not started	Edit
{Initiative number and name} Status: Not started	Edit
{Initiative number and name} Status: Not started	Edit
{Initiative number and name} Status: Not started	Edit

 Previous

Continue 



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

[Return to initiatives dashboard](#)

{Initiative number and name}

Use this page to provide information about your initiative and the metrics you use to measure its progress. Then, update any checkpoints for review.

What is included in Annual Reporting vs Quarterly Reporting?

Annual Reporting Data should include:

- Initiative Progress Narrative
- Initiative People Served
- Initiative Metrics
- Initiative Checkpoints

Quarterly Reporting Data can include:

- Initiative Progress Narrative (Optional)
- Initiative Checkpoints

Narrative (Required Annually)

Narrative is optional for quarterly reporting. Limit responses to 2,000 characters, or approximately 250–350 words.

[Initiative Progress Narrative Guidance](#)

XXX characters allowed

Number of people served

Number of People Served is only reported annually.

[Reporting Guidelines](#)

Metrics

The metrics for each initiative will be **pre-populated** based on the information previously provided. Metrics are only reported annually. Contact your Project Officer if the metrics listed are incorrect. Note: Metrics are only reported annually.

#	Status	Metric	Target	Previous Value	Current Value	As of Date MM/DD/YYYY
1	Active	Rural provider retention rate	90%			
2	Active	Percent of rural facilities utilizing RPM	90%			
3	Active	Percent of rural facilities utilizing AI-assisted documentation tools	90%			
4	Active	Number of rural providers with loan repayment	100			
5	Abandoned	Number of counties classified as HPSA	150			

Checkpoints

Checkpoints are grouped into the stages listed below. On this page, you can take the following actions on any checkpoint unless otherwise noted.

- Add or remove attachments of evidentiary documentation.
- Select the checkbox when the checkpoint is complete and ready for CMS review.
- Leave comments for CMS, or respond to comments from them by attachment.

Stage 0: Planning

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions	
0.1	Establish governance	☒	file1.docx	Pending review	Edit	Status/Comments 
			file2.docx	Pending review	Edit	Status/Comments 
0.2	Submit project plan to CMS	☐	Not applicable			

Stage 1: Project Preparation

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
1.1	CMS approval of project plan	☐	Not applicable		
1.2	Launch initiative	☐			

Stage 2: Early Implementation

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
2.1	Continue initiative activities	☐			
2.2	Achieve at least one post-launch milestone	☐			
2.3	Establish metric reporting methodology	☐			
2.4	Submit updated project plan to CMS	☐	Not applicable		

Stage 3: Midway Implementation

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
3.1	CMS approval of updated project plan	☐	Not applicable		
3.2	Complete Q2 2028 milestones	☐			
3.3	Report initial metric progress to CMS	☐	Not applicable		

Stage 4: Preparation for Completion

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
4.1	Share final deliverables plan with CMS	☐	Not applicable		
4.2	CMS approval of final deliverables plan	☐	Not Applicable		
4.3	Complete post-program planning	☐			

Stage 5: Full Implementation

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
5.1	Submit final deliverables to CMS	☐	Not applicable		
5.2	Complete all 2030 milestones	☐			
5.3	Report updated metric progress to CMS	☐	Not applicable		

Back to Initiatives

{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

 Return to initiatives dashboard

{Initiative number and name}

Use this page to report progress on the measure in the previous reporting period.

What is the progress?

Annual

- Initiative
- Initiative
- Initiative
- Initiative

Quarterly

- Initiative
- Initiative

Initiative Progress Narrative Guidance

 [Close](#)

Provide a concise update on the progress of each initiative during the reporting period. Responses should focus on key activities completed, milestones reached, challenges encountered, and any notable outcomes or impacts to date.

This section is intended for progress reporting purposes only and should not repeat the full project narrative from the NCC Kit. Please focus on recent initiative progress and avoid including broad background information unless it is necessary for context.

States are encouraged to include any relevant updates that may be important for CMS to understand the status, implementation progress, or emerging results of the initiative.

Narrative (Required Annually)

Narrative is optional for quarterly reporting. Limit responses to 2,000 characters, or approximately 250–350 words.

[Initiative Progress Narrative Guidance](#)

XXX characters allowed

Number of people served

Number of People Served is only reported annually.

[Reporting Guidelines](#)

Metrics

The metrics for each initiative will be **pre-populated** based on the information previously



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

[Return to initiatives dashboard](#)

{Initiative number and name}

Use this page to report on the progress of your initiative and the number of people served. You can also add a narrative description of your initiative.

What is your initiative?

Annual

- Initiative
- Initiative
- Initiative
- Initiative

Quarterly

- Initiative
- Initiative

Narrative

Narrative is limited to 350 words.

[Initiative Progress](#)

XXX characters allowed

Number of people served

Number of People Served is only reported annually.

[Reporting Guidelines](#)

Metrics

The metrics for each initiative will be **pre-populated** based on the information previously

Number of People Served

[Close](#)

States should provide a best estimate of the number of individuals who have benefited from RHT Program funds during the reporting period. Estimates should be reasonable, supported by available data, and reflect the scope and reach of the initiative.

For system-based initiatives that do not provide direct services (e.g., IT systems, Health Information Exchanges), States may define the number of people served more broadly. For example:

- For health system–level initiatives, the number served may reflect the total population served by the system.
- For statewide systems (e.g., HIEs), the number served may reflect the number of patients with data in the system or the total number of state residents.
- These estimates do not need to be de-duplicated and do not need to be limited to rural populations if the initiative has a broader reach.
- States should aim to provide the most accurate and justifiable estimate possible and may include brief context in the narrative section if helpful for CMS’s understanding.



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

<

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

State Policy Commitments

The commitments listed here are based on those identified in a State's approved application. Expand each one to update its status, evidence, and comments.

[Expand all](#)

[Collapse all](#)

B.2: Presidential Fitness Test



B.3: SNAP Food Restriction Waiver Policy



Current status

- Select an option - 

Supporting Evidence

States should only submit legislation links and attachments as acceptable evidence for their State policy commitments. CMS will not accept press releases or promotional links/attachments as substantial evidence.

Links

Add URL to exact policy.

+ Add link

Attachments

Upload state legislation.

+ Upload attachment

Notes and comments (optional)

Include any additional information about this policy commitment that you would like CMS to be aware of.

B.4: Nutrition Continuing Medical Education



C.3: Overall CON Score



D.2: Physician Assistant - PA Compact



D.3: Dental Hygienist - Prescriptive Authority



< Previous

Continue >



State Policy Commitment: {Commitment}

Select a file or files to upload

Drag files here or [Choose from folder](#)

Selected Files

file.ext

7 KB

✕

file.ext

✖

 Incorrect file format - cannot be uploaded

10 KB

✕

Uploaded Files

These files have been attached to the state policy commitment above.

[file2.ext](#)

10 KB

✕

Delete Attachment

[✕ Close](#)



Warning

Deleting this attachment will remove it from the state policy commitment.

State Policy Commitment: {Commitment}

File

These files have been attached to the state policy commitment above.

[file2.ext](#)

10 KB

Delete

{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Use of Funds

Select “Add use of Funds” option below to attach the Use of Funds file for this reporting period.

+ Add Use of Funds

Previous

Continue



Add Use of Funds

[✕ Close](#)

Select a file to upload

Drag file here or [Choose from folder](#)

Selected File

file.ext

7 KB



Uploaded File

This file has been uploaded to the use of funds page.

[file2.ext](#)

10 KB



Done

{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

<

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Sustainability and Highlights

Success Stories

Share success stories that you want to highlight as result of your State’s implementation of the RHT Program.

Limit responses to 3,000 characters, approximately 400–500 words.

3,000 characters allowed

Success Stories: Supporting Evidence (Optional)

Upload supporting documentation (e.g., press releases illustrating success stories).

Links

Add URLs to supporting documentation.

+ Add link

Attachments

Upload supporting documentation.

+ Upload attachment

Sustainability Planning

What are the most significant updates or changes to your sustainability plan based on the past year’s experiences, successes, and challenges?

Limit responses to 3,000 characters, approximately 400–500 words.

3,000 characters allowed

Sustainability Planning: Supporting Evidence (Optional)

Upload supporting documentation.

Links

Add URLs to supporting documentation.

+ Add link

Attachments

Upload supporting documentation.

+ Upload attachment

< Previous

Continue >



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Review & Submit

Submit for Review

Select “Submit for Review” to send a notification to CMS that the report is ready for a preliminary review. States will still have edit functionality to complete the rest of the report until you have selected to fully “Submit” the report below.

Submit for Review

Ready to Submit?

Double check that everything in your RHTP Report is accurate. Once you submit, you will only be able to make edits by contacting your CMS RHTP lead to unlock your report.

Section	Status
General Information	Edit
Initiative Attachments	Edit
Initiatives	Edit
State Policy Commitments	Edit
Use of Funds	Edit
Sustainability and Highlights	Edit
Totals	Edit

Review PDF

[ZIP Attachment Files](#)

Submit Report



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

<

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit

Review & Submit

Submit for Review

Select “Submit for Review” to send a notification to CMS that the report is ready for a preliminary review. States will still have edit functionality to complete the rest of the report until you have selected to fully “Submit” the report below.

Submit for Review

 [Close](#)

Add a comment below to detail to the CMS PO what portion of the report is ready for preliminary review. Once you select “Submit for Review” a notification will be sent to CMS PO’s.

Add Comment

Submit for Review

[Cancel](#)

State Policy Commitments

Edit

Use of Funds

Edit

Sustainability and Highlights

Edit

Totals

Edit

Review PDF

[ZIP Attachment Files](#)

Submit Report



{State: Name of the report submission}

✔ Last saved XX:XXpm

Leave form

{Name of the report}

General Information

Initiative Attachments

Initiatives

State Policy Commitments

Use of Funds

Sustainability and Highlights

Review & Submit



Successfully Submitted

Thank you

{Report name} for {State} was submitted on {Date} by {User Name}.

What happens now?

Your report has been submitted and is now locked from editing.

An automated confirmation email has been sent to you, your CMS Project Officer, and all points of contact listed on your General Information page. No further action is required on your part



Download PDF

ZIP Attachment Files

MDCT
RHTP

Rural Health
Transformation Program

Medicaid Data Collection Tool



A federal government website managed and paid for by the U.S. Centers for Medicare and Medicaid Services and part of the MDCT suite.

Medicaid.gov
Keeping America Healthy