

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HUMAN SERVICES  
RURAL HEALTH TRANSFORMATION PROGRAM  
RAPID RESPONSE STABILIZATION PROGRAM  
PROGRAM REQUEST AND ELIGIBILITY CERTIFICATION

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SECTION I – PROGRAM AND PAYMENT AUTHORITY

Under Section 203-H of the Fiscal Code (72 P.S. § 203-H), the Department of Human Services (“Department”) is authorized to issue program payments to qualified entities under the Rural Health Transformation Program (“RHTP”). A qualified entity shall use program funding in accordance with federal and state law and the Department's federally-approved RHTP application.

This request for funding and eligibility certification is for a program payment under one of the following six initiatives in the Department’s federally approved RHTP application: Aging and Access; Behavioral Health; Emergency Medical Services (“EMS”) and Transportation; Maternal Health; Technology and Infrastructure; and Workforce.

This is not a competitive solicitation. Please note this program payment is an initial funding opportunity. If you do not qualify for this RHTP payment, a future opportunity may be a better fit.

Funding is contingent upon federal funds being appropriated to and received by the Department.

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SECTION II – GUIDELINES AND INSTRUCTIONS

*Payment Guidelines*

Entities must complete sections III through X **in full**. Prior to submission, entities should verify that they have fully completed all the sections below and have attached all documents requested in those sections.

This program payment is limited to one payment per qualified entity that is at least \$10,000 and does not exceed \$1,000,000. Qualified entities, as outlined in Section IV, shall use payments only **for the purchase of supplies, equipment, renovations, or structural improvements**, as described in the submitted budget narrative, that stabilize or enhance rural health care access, promote rural well-being, fall under at least one of the six initiatives outlined in the Department’s

federally approved RHTP application, and is used in accordance with federal and state law. Payments shall not be used for ongoing projects that require monitoring by the Department following incursion of the costs. The total funding available for all program payments under this certification is capped at \$25,000,000.

The Department will authorize program payments in the order eligibility certifications are received by the Department, as evidenced by the date and time the email containing the full eligibility certification and receipt of all required documents. The Department will accept eligibility certifications beginning May 1, 2026, through June 1, 2026, or until the authorized funding cap has been met, whichever is sooner.

If the Department determines that an entity has failed to fully complete this program request and eligibility certification or provide required documentation, the Department, in its sole discretion, may either reject the program request or direct the entity to provide the missing information or documents. If the Department directs the entity to provide the missing information or documents, the program request will not be deemed received until the entity provides the information or documents to the Department.

The Department's federally approved RHTP application identifies eight regions. Under the first tranche of this program request, program payments are limited to two program payments per region. Once there are two program payments administered in each of the eight regions or after June 1, 2026, whichever is earlier, the second tranche will commence, and program payments will not be limited by region.

A program payment may not be used for costs that have already been incurred or to supplant any other RHTP allocation, stabilization award, federal or state funding, or insurance reimbursement. The program payment must be expended **before July 31, 2027**. As part of the eligibility certification, the qualified entity shall initially provide a quote or estimate for the purchase of the items. After receiving a program payment, a qualified entity shall submit further documentation supporting use of the full amount of the program payment to the Department within 30 days after incurring a cost attributed to this funding. Acceptable documentation includes an itemized receipt or invoice. Failure to provide adequate documentation may result in withholding, reduction, or recovery of payments.

A program payment may not be used for educational awards, the PA Patient Provider Network Health Information Organization (P3N HIO) onboarding, purchase of electronic health record systems, mobile health units, ambulance enhancements, or educational awards. These will be separate payments or applications.

*Submission Instructions*

Entities shall submit the completed program request and eligibility certification, along with all required documents via email to [RA-HHRRLHLTHTRNSPLAN@pa.gov](mailto:RA-HHRRLHLTHTRNSPLAN@pa.gov). Email attachments are limited to 10 MB, cumulatively, per email, and files may not be sent in any compressed format. Any part of the form or its attachments over that limit must be sent via separate emails, with each labeled “[Name of Entity] Program Request Part X of Y” (total number of emails). The Department will not accept encrypted email for the program request and eligibility certification submission. The program request and eligibility certification will be deemed received as of the date and time of the final email, unless the document is incomplete (see above).

Required documentation is noted in this section and the sections below.

*Questions and Answers*

Entities may submit questions in writing via email to [RA-HHRRLHLTHTRNSPLAN@pa.gov](mailto:RA-HHRRLHLTHTRNSPLAN@pa.gov) by **no later than Wednesday, April 29<sup>th</sup> at noon**. Responses will be posted on the Department’s website. The Department may, in its sole discretion, respond to questions after the April 29<sup>th</sup> deadline. If the Department elects to respond, it will post responses as noted above.

*Incurring Costs*

The Commonwealth of Pennsylvania and the Department are not liable for any costs incurred by an entity in preparation and submission of a program request and eligibility certification, in participating in the program request process, or for any service performed or expenses incurred prior to the Department’s approval of a program request.

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SECTION III – ENTITY INFORMATION

Entity Name:

Doing Business As (if applicable)

Address:

Mailing Address (if different):

County(ies) Served:

Federal EIN:

UEI (if applicable):

Promise ID/Medical Assistance Provider ID number (if applicable):

Organization Type:  Non-profit     For Profit     Licensed Service Provider (include licensure)

Qualified entity information:

Hospital

Health care provider as defined in 42 U.S.C. §1397ee (h)(9)

Rural health facility as defined in 42 U.S.C. §1397ee (h)(3)(D)

Authorized Representative (Name, Title, Email, Phone):

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#### SECTION IV – QUALIFIED ENTITY CERTIFICATION

For this program payment, a “qualified entity” is a hospital, health care provider (as defined in 42 U.S.C. § 1397ee(h)(9)), or rural health facility (as defined in 42 U.S.C. § 1397ee(h)(3)(D)) and meets the definition of “qualified entity” under Section 201-H of the Fiscal Code (72 P.S. § 201-H).

The entity certifies:

The entity meets the definition of a qualified entity as indicated above.

The entity shall administer a component of the Department’s federally approved RHTP application in one of the six identified and federally approved initiatives: Aging and Access; Behavioral Health; EMS and Transportation; Maternal Health; Technology and Infrastructure; and Workforce.

#### **Required Attachments:**

- Documentation demonstrating entity status.
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#### SECTION V – PENNSYLVANIA AND RURAL ELIGIBILITY

The entity certifies the following:

The entity currently operates in the Commonwealth of Pennsylvania. Current operation means that the entity already provides health care services in Pennsylvania and has been in operation since at least December 29, 2025.

The entity will be in full operation in the Commonwealth of Pennsylvania on the date funding is received.

If required by Pennsylvania law, the entity is licensed or approved by the appropriate Commonwealth of Pennsylvania licensing or regulating authority.

The entity is located in Pennsylvania in one of the RHTP-eligible rural counties class 4-8 or located in a Health Resources and Services Administration (“HRSA”)-defined rural census tract of a county of the second class A or third class:

A HRSA-defined rural census tract in a county of the second class A

County, Zip code:

A HRSA-defined rural census tract in a county of the third class

County, Zip code:

A county of the fourth class containing a HRSA-defined rural census tract

County:

A county of the fifth class containing a HRSA-defined rural census tract

County:

A county of the sixth class

County:

A county of the seventh class

County:

A county of the eighth class

County:

The entity shall use the program payment to provide supplies, equipment, renovations, or structural improvements that stabilize or enhance rural health care access, promote rural well-being, and fall under at least one of the six initiatives outlined in the Department’s federally approved RHTP application to one or more of the following RHTP-eligible rural counties in Pennsylvania:

A county of the second class A containing a HRSA-defined rural census tract

Counties:

A county of the third class containing a HRSA-defined rural census tract

Counties:

A county of the fourth class containing a HRSA-defined rural census tract

Counties:

A county of the fifth class containing a HRSA-defined rural census tract

Counties:

A county of the sixth class

Counties:

A county of the seventh class

Counties:

A county of the eighth class

Counties:

The entity shall use the program payment to provide supplies, equipment, or renovations, or structural improvements that stabilize or enhance rural health care access, promote rural well-

being, and fall under at least one of the six initiatives outlined in the Department’s federally approved RHTP application to one or more of the following RHTP regions:

- Central
- North Central
- Northern Tier
- Northeast
- Northwest
- Southern Alleghenies
- South Central
- Southwest

**Required Attachments:**

- Proof of Pennsylvania registration or incorporation;
- If applicable, proof of licensure or approval;
- Documentation identifying the rural county(ies) served; and
- Description of the areas where the entity provides services.

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SECTION VI – PAYMENT ELIGIBILITY CRITERIA

To be eligible for this program payment, an entity must be a qualified entity as outlined in Sections IV and V. The program payment must be for supplies, equipment, renovations, or structural improvements that stabilize or enhance rural health care access, promote rural well-being, fall under at least one of the six initiatives outlined in the Department’s federally approved RHTP application, and is used in accordance with federal and state law. For example, the project targets preserving essential hospital and EMS capacity or making foundational investments in technology and workforce that will catalyze the Department’s federally approved RHTP initiatives.

To be eligible for this program payment, the qualified entity must certify the following:

The entity shall use the one-time program payment to fund a project that stabilizes rural health care by maintaining or expanding capacity or services.

The program payment will halt a suspension, reduction, or termination of a rural health care service, reinstate a suspended, reduced, or terminated service, or expand services or establish new services.

The entity shall use the funding for one of the following purposes through payment for supplies, equipment, renovations, or structural improvements. Sub-bullets are examples of purposes approved in the federally approved application. Select all that apply.

Aging and Access

- i. Hospital-to-Home Community Paramedicine
  - a. Non-reimbursable supplies and equipment needed to support a person at home after hospital discharge
- ii. Nurse Aide Training
  - a. Expand clinical training sites

EMS and Transportation

- i. Repair EMS Infrastructure
- ii. Increase Reliable Nonemergency Transportation

Behavioral Health

Remote Behavioral Health Consultation

Maternal Health

- i. Remote Monitoring

Technology and Infrastructure

- i. Digital Infrastructure and Next-Generation AI to Improve Access, Quality and Experience
- ii. Mobile and Digital Health That Reaches Every Community
- iii. Renovations or Structural Improvements

Workforce

- i. Supporting Rural Clinic Training
- ii. New and Expanded Workforce Models for Rural Pennsylvania
  - a. Primary care medics
  - b. Community paramedicine

The entity is compliant with applicable federal and state requirements.

**Required Attachments:**

- Description of the program payment's use not exceeding 2000 words;
- Budget narrative not exceeding 2000 words;
- Quote or estimate;
- Completed budget worksheet; and
- Anticipated number of people served.

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## SECTION VII – USE OF FUNDS CERTIFICATION

The entity certifies:

The requested funds are allowable under the Rural Health Transformation Program Notice of Funding Opportunity.<sup>1</sup>

The entity shall use program funding in accordance with federal and state law and the Department’s federally approved RHTP application.

The entity shall not use funds for purposes outside authorized RHTP activities.

The entity shall use funds for the purchase of items such as supplies, equipment, renovations, or structural improvements and shall not use funds ongoing projects that require monitoring by the Department following incursion of the costs.

Funds will not supplant any other RHTP allocation, stabilization award, federal or state funding, or insurance reimbursement.

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## SECTION VIII – NON-DUPLICATION CERTIFICATION

The entity certifies:

The entity has disclosed all public funding related to the supported activity.

This program payment will not supplant any other RHTP allocation, stabilization award, federal or state funding, or insurance reimbursement.

### **Required Attachment:**

- Funding Disclosure Table listing all related public funding received or pending within the past 24 months.
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## SECTION IX – MONITORING, AUDIT, AND RECOVERY

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<sup>1</sup> <https://grants.gov/search-results-detail/360442>

Pursuant to 72 P.S. § 203-H, the Department may monitor, inspect, and audit the records of a qualified entity and withhold, recover, or reduce payment for a program violation.

The entity acknowledges:

The Department may monitor, inspect, and audit records related to this payment. The entity shall cooperate with the Department's monitoring, inspection, and audit requests.

The entity shall submit documentation supporting use of the full amount of the program payment to the Department within 30 days after incurring a cost attributed to this funding. Acceptable documentation includes an itemized receipt or invoice.

The entity shall maintain documentation sufficient for audit through February 27, 2031, and provide that documentation, unredacted, to the Commonwealth, federal government, and their representatives upon request.

The entity's failure to comply with program requirements, including, but not limited to, those related to monitoring, inspection, and audit, may result in withholding, reduction, or recovery of payments.

The entity shall return any unused funds to the Department if the funding is unspent on June 30, 2027 and return funding by July 31, 2031.

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## SECTION X– EXECUTIVE CERTIFICATION

I certify under penalty of perjury that:

- The entity meets the definition of a Qualified Entity under Section 201-H of the Fiscal Code (72 P.S. § 201-H) and is a hospital, health care provider (as defined in 42 U.S.C. § 1397ee(h)(9)), or rural health facility (as defined in 42 U.S.C. § 1397ee(h)(3)(D)) that has been in operation since at least December 29, 2025.
- The entity satisfies all eligibility criteria for this program payment.
- All information submitted is true, complete, and accurate.
- The entity understands and agrees that the Department may monitor, inspect, and audit the entity, and, in the event of noncompliance, withhold, recover, or reduce funding.
- The individual signing below has the legal authority to bind the entity to the terms of this document.

Authorized Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_