Notice of Funding Opportunity

Application Due Date: 7/10/2026

Oklahoma State Department of Health

Rural Health Transformation Program

Opportunity Number: RHTP2026004

This Behavioral Health Integration – Medications for Opioid and Alcohol Use Disorders Funding opportunity is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $223,476,948.62 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.

Federal award number (for reference only): RHTCMS332048-01-00

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Attachment B: Subrecipient responsibilities

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General Information

Summary

This funding opportunity from the Oklahoma State Department of Health ("OSDH") will make grants available under the Rural Health Transformation Program ("RHTP") to expand access to medications for opioid use disorder (MOUD) and medications for alcohol use disorders (MAUD).

The Behavioral Health Integration – Medications for Opioid and Alcohol Use Disorder Program is intended to expand access to MOUD and MAUD for rural communities through evidence-based provider upskilling and/or integrated/alternative care delivery models (e.g., hub-and-spoke, mobile units, telehealth-enabled approaches).

RHTP is a five-year, nationwide $50 billion federal grant program established in H.R. 1, The One Big Beautiful Bill Act. In Year One, Oklahoma received $223,476,947 in funding. Further details on the proposed Oklahoma uses of these funds beyond the Behavioral Health Integration program are available at: Rural Health Transformation Program.

Funding Detail

Type: Competitive

Estimated Total Program Funding: $2.8 million, disbursed in budget Year 1. This grant program is anticipated to continue through the lifetime of the Rural Health Transformation Program, with potential grant extensions and/or additional NOFO applications in Years 2-5, subject to CMS-awarded funds to Oklahoma, available funding, and program progress.

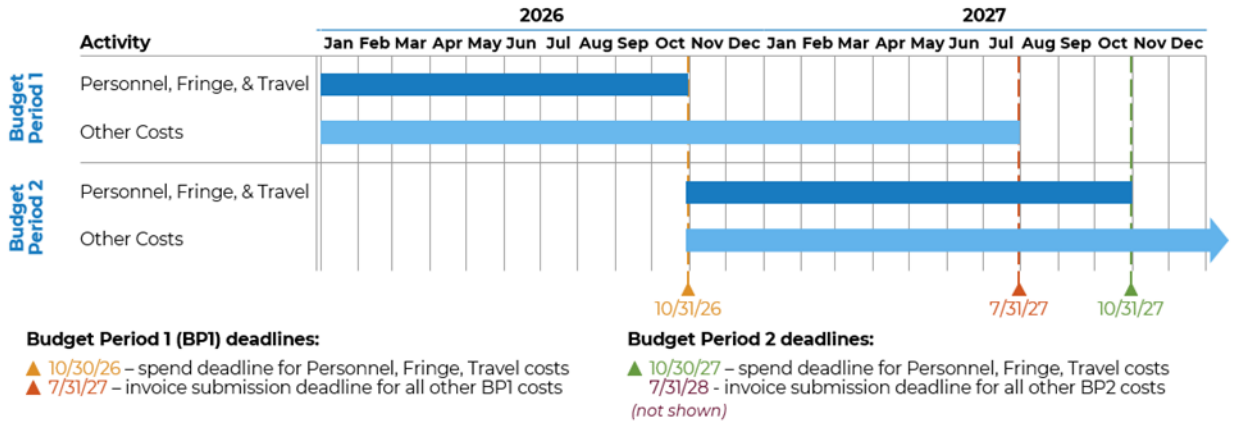
Applicants may propose projects for a single year or spanning multiple years and should indicate whether they anticipate seeking continuation of funding in future years. Proposing multi-year projects only indicates interest and does not guarantee future awards, as funding is subject to available funding from CMS and program progress.

OSDH reserves the right to reserve some of these funds for similar or different programs or to add additional funds to this program.

Expected Base Awards: OSDH anticipates funding awards of $1 million or less per application. The exact number and funding levels will be determined by applications received. OSDH reserves the right to fund one or multiple awards depending on applications and funding needs. The awards must benefit rural populations with care delivered within their community. Rural communities are defined for the purposes of OK RHTP as communities with populations of 55,000 or fewer. Please review **Attachment A** for a full list of eligible communities.

Expenditure Period: Year 1 Award recipients are expected to expend the award amount and invoice expenses to OSDH no later than July 31st, 2027, with the exception of personnel, fringe, and travel costs, which must be expended by October 30th, 2026. OSDH anticipates renewal of awarded grants (as applicable for those seeking continuation of funding for multi-year projects) and/or additional NOFO applications in subsequent years. OSDH anticipates renewing subawards for Budget Period (BP) 2 on October 30th, 2026, to allow for personnel, fringe, and travel spend through October 30th, 2027 (see timeline graphic below). Renewal amounts are dependent upon CMS awarded funds, subrecipient performance and funding needs, and OSDH RHTP programmatic priorities.

Payment Structure: Reimbursement. Please note this is a reimbursement-based award.



Award recipients are expected to cover eligible costs upfront and then submit documentation to OSDH for reimbursement. If there are extenuating circumstances that would prevent the applicant from participating in a reimbursement-based program, please specify them in the body of the application.

Supplemental budget: An applicant may submit an optional supplemental budget, up to $1.8 million ($2.8M total including base budget), if the applicant believes the additional funds would be additive, but not essential, to the success of the proposed use of funds. OSDH will consider the supplemental budget only if:

- There are insufficient eligible applications to meet the total program funding
- Additional funding becomes available during the award period

Cost Sharing

This funding opportunity has no cost-sharing component.

Eligibility

Eligible Applicants

Potential applicant types include but are not limited to:

- Community-based organizations (including 501(c)(3) organizations, other non-profits)
- Health care provider or organization (both non-profit and for-profit), including Community Mental Health Centers (CMHCs) and Opioid Treatment Providers (OTPs)
- Tribal entities/governments
- Higher education institutions
- State agencies
- County and city governments and facilities

Applicants must meet the criteria below to be eligible for this funding opportunity:

- Be currently providing services in Oklahoma
- Have a physical location, either headquarters or branch, in Oklahoma
- Provide health care and/or health-promoting services, programs, or supports
- Demonstrate a history of serving rural community(ies) in Oklahoma, either directly or through formal partnership with locally-rooted organizations or providers. Organizations without an existing service footprint in rural Oklahoma are not eligible
- Deliver direct program services supported by this award solely in eligible Oklahoma rural communities with populations of 55,000 or fewer (see **Attachment A** for a full list of eligible communities), except for centralized administrative, care coordination, telehealth-based clinical support, or other remote services that support participants in the rural community (e.g., for hub-and-spoke model, hub is not required to be located in rural community)
- Have an active Unique Entity Identifier (UEI) at time of application and maintain an active registration in SAM.gov throughout the application, review, and award period. The registration process is described here: Entity Registration | SAM.gov. Timelines for registration and receipt of a UEI vary significantly
- Must not be suspended, debarred, or otherwise excluded from receiving federal funds
- Have an active Certificate of Insurance (see the Subrecipient Terms and Conditions linked in **Attachment D** for a detailed list of required insurance types, coverage limits, and other insurance-related requirements)

Fiscally sponsored organizations may seek funding through an application submitted by their fiscal sponsor, with the sponsored organization identified in the application as a planned partner or subcontractor. The fiscal sponsor must provide all required information, including the UEI number and a fiscal sponsorship agreement. Though the

fiscal sponsor does not need to be located in Oklahoma, the organization they are sponsoring must still:

- Have a physical location, either headquarters or branch, in Oklahoma
- Provide health care and/or health-promoting services, programs, or supports
- Demonstrate a history of serving the proposed rural community(ies) in Oklahoma, either directly or through formal partnership with locally-rooted organizations or providers. Organizations without an existing service footprint in rural Oklahoma are not eligible
- Deliver direct program services supported by this award solely in eligible Oklahoma rural communities with populations under 55,000
- Must not be suspended, debarred, or otherwise excluded from receiving federal funds

Program Description

Objectives

Oklahoma has made great strides to increase access to treatment options for substance use disorder (SUD). The use of medications, in combination with counseling and behavioral therapy, provide a "whole patient" approach for patients with opioid use disorder (OUD) and alcohol use disorder (AUD). Medications used are approved by the Food and Drug Administration (FDA) and are clinically driven and tailored to meet each patient's needs. Although progress has been made, additional effort is needed to increase accessibility, especially in rural communities. This initiative aims to expand access to MOUD and MAUD through a range of scalable models, including provider upskilling and integrated/alternative care delivery models.

- Provider upskilling may include training in MOUD and/or MAUD for health care providers in a broad range of settings including ambulatory care (e.g., primary care, behavioral health, maternal health, emergency departments) and inpatient care, with a focus on non-addiction medicine providers who frequently encounter patients with SUD (e.g., hospitalists). Two types of applicants may apply for this model:
    - Individual health care providers/practices/organizations applying to participate in an established MOUD and/or MAUD upskilling program. Applicants are expected to identify a specific training program they intend to utilize
    - Organizations that provide MOUD and/or MAUD upskilling training for SUD

- Integrated/alternative care delivery models for MOUD and/or MAUD may include hub-and-spoke models, mobile units, or other telehealth-enabled approaches.

MOUD or MAUD does not need to be the exclusive focus but should represent a meaningful component of the training or treatment model.

Funding Uses

Allowable uses include but are not limited to:

- Program design (e.g., contractor/consulting support for workflow development or development of participant education materials, technical assistance for program design)
- Program implementation (e.g., facilities costs, site support for hub-and-spoke models including training and integration)
- Participant recruitment and engagement (e.g., outreach materials, event supplies or space fees for community engagement, related overhead). Participants could include health care providers (upskilling model) or sites (hub-and-spoke model)
- Personnel to support training and integrated/alternative care model
- Workforce training, education, and ongoing practice support (e.g., DEA-aligned SUD training, training on medications (MOUD/MAUD), clinical protocols, ongoing provider check-ins, coaching, and engagement)
- Service delivery enablement (e.g., development of screening and referral workflows, mobile units)
- Technology enablement (e.g., telehealth platforms, connectivity, digital tools)
- Equipment, supplies, and other materials necessary for program implementation (e.g., general office supplies, medical equipment that is not otherwise reimbursable or billed to a payer)
- Program evaluation and reporting (e.g., participant surveys, clinical outcome measurements, contracting/consulting support for external evaluation)

Funding is available for inpatient and ambulatory settings, but funding for inpatient should focus on non-addiction medicine providers (e.g., hospitalists).

All costs of preparing this application are the sole responsibility of the applicant; OSDH is not responsible for any costs incurred related to the preparation or submission of the application or any other activities undertaken by the applicant related in any way to this NOFO.

Please note that, consistent with 2 CFR § 200.320, successful applicants will be required to obtain price or rate quotations from an adequate number of qualified sources for

applicable purchases. OSDH's policy interprets "adequate number" to mean obtaining at least three price quotes prior to making a purchase with funds for anything over $15K.

Program Evidence

The purpose of this funding opportunity is to support the implementation of evidence-informed approaches to expand access to behavioral health and SUD services. Approaches without a clear evidence base or rationale are not the focus of this funding opportunity. Applicants must demonstrate how their proposed approach is grounded in evidence, best practices, or established MOUD or MAUD protocols. Examples of evidence-based, best practice guidance for treating OUD and AUD, include:

- The American Society of Addiction Medicine, National Practice Guidance For the Treatment of Opioid Use Disorder
- The American Society of Addiction Medicine, Clinical Guideline on Alcohol Withdrawal Management
- Providers Clinical Support System: Medications for Alcohol Use Disorders
- Providers Clinical Support System: Medications for Opioid Use Disorders

Prohibited and Restricted Funding Uses

Prohibited fund uses: Key ineligible costs under this program include the following:

- Alcoholic beverages
- Bad debt & collection costs
- Entertainment costs, amusement, and social activities
- Goods and services for personal use of employees
- Fundraising and investment management costs
- Lobbying activities
- Fines, penalties, damages, and settlement resulting from violations of law
- Costs of social organization memberships
- Pre-award costs incurred before award date
- Land acquisition and depreciation of land
- Endowments, capital funds, or investment vehicles to generate income
- New construction, major building expansions, or renovations. Supplanting (replacing) funding for in-process or planned construction projects or directing funding towards new construction builds is also unallowable.

- Student loans and student loan repayment programs
- International visa sponsorship for clinical workers from other countries
- Clinical services that duplicate billable services
- Medications, whether prescription or over-the-counter (OTC)
- Payments or rate enhancements for services currently billable or reimbursable through Medicaid, commercial insurance, or another funding source, including when payment is only partially available, at a lower rate than the applicant seeks, or where the applicant does not routinely bill for the service
- Meeting matching requirements for any other federal funds or local entities
- Services, equipment, or supports that are the legal responsibility of another party under federal, State, or tribal law, such as vocational rehabilitation or education services
- Services, equipment, or supports that are the legal responsibility of another party under any civil rights law, such as modifying a workplace or providing accommodations that are obligations under law
- The cost of independent research and development, including their proportionate share of indirect costs
- Food costs, including medically tailored meals and community meeting meals
- Broadband infrastructure
- EMR/EHR replacement or implementation

Restricted fund uses: Additionally, certain funding categories are subject to RHTP-wide spending limits and must be documented. This includes:

- Provider payments that are not already reimbursable
- Costs for grant administration (e.g., grants management, compliance, fiscal oversight) are limited to five percent for award recipients. This should include all direct grant admin costs and a proportional share of indirect costs: Total grant admin = Direct costs for grant admin + (Direct costs for grant admin * Indirect Cost Rate)
- Infrastructure improvements, such as equipment upgrades and minor building renovations or alterations, when clearly linked to program goals

These funds may not be used to replace (supplant) other federal, state, or local government funds previously awarded for the proposed project/purchase. If the proposed project/purchase costs more than the limit of this grant the applicant should explain how they will pay for the remaining amount in **Attachment C.** It is the applicant's responsibility to show that they are not replacing (supplanting) other funds.

Applicants may submit questions regarding funding uses to Behavioral Health Integration Program FAQs by June 26, 2026. All responses will be posted publicly via updates to the OSDH RHTP BH Integration FAQ, available here: RHTP Program Website

Application Contents and Format

Application Components

The application includes the following components, described in detail below.

- Organizational Information (Complete in fillable form)
- Project Plan (To be uploaded as an attachment – File One)
- Budget (To be uploaded as an attachment – File Two)
- Grant Management Materials (To be uploaded as an attachment – File Three)

You must complete the required Organizational Information using the fillable form available at: RHTP Behavioral Health Integration Program Application. The form does not allow you to save your progress, so the questions are listed below for reference. We recommend drafting your responses in a separate document and then copying and pasting them into the form and uploading all required attachments in one sitting. The other application components (Project Plan, Budget, and Grant Management Materials) should be uploaded as attachments. The upload limit on attachments in Smartsheet is 250 MB per file.

Organizational Information

Components that should be entered directly into the form include the following:

1. Organizational profile
    a) Organization Name
    b) What type of entity are you?
        i. Community-based organization (including 501(c)(3), other non-profits)
        ii. Healthcare provider or organization (both non-profit & for-profit)
        iii. Community Mental Health Center (CMHCs) or Opioid Treatment Provider (OTPs)
        iv. Tribal entity/government
        v. Higher education institution
        vi. State agency
        vii. County/city government or facility
        viii. Other (please specify)
    c) What is your tax status?

        i. For-profit
        ii. 501(c)(3) non-profit organization
        iii. 501(c)(4) non-profit organization
        iv. Other (provides drop-down for applicant to specify)
    d) Unique Entity ID (UEI) number
    e) Do you have a Supplier ID with the state of OK? (Y/N) If yes, please provide your supplier ID. If awarded, you will be required to obtain a Supplier ID
    f) Are you able to do a reimbursable award? (Y/N) If no, please explain your circumstances
    g) Staffing
        i. Total number of employees
        ii. Total number volunteers
    h) Describe where you are currently providing services in Oklahoma
    i) Please describe organizational history of serving rural communities in Oklahoma (e.g., current footprint in rural communities, history of partnership with rural providers or organizations, etc.)
2. Contact information
    a) Physical address in Oklahoma
    b) Mailing address if different than physical address
    c) Name and contact information for project contact for this award
    d) Do you have a communications Point of Contact (POC)? (Y/N) If yes, provide communications POC name and contact information
    e) Do you have a legal POC? (Y/N) If yes, provide legal POC name and contact information
3. Program proposal
    a) A brief summary of your program proposal (250 word limit)
    b) Which MOUD/MAUD access expansion model does your program support? (check all that apply)
        a. Provider/practice/organization applying to <u>participate</u> in an established MOUD and/or MAUD upskilling program
        b. Organization applying to <u>provide</u> MOUD and/or MAUD upskilling training
        c. Organization applying to establish/expand an integrated/alternative care delivery model for MOUD and/or MAUD (e.g., hub-and-spoke model, mobile units, telehealth-enabled approaches)
    c) What counties will be served by your program?
    d) Do you anticipate applying for continuation of funding in future years?

e) Does your program budget include grant administration costs? (Y/N) If yes, what dollar amount of the total requested award will be allocated for grant administration? Note: no more than 5% of the requested award can fund grant administration activities
f) Does your program budget include restricted funding uses other than grant administration (e.g., provider payments that are not already reimbursable or infrastructure improvements)? (Y/N) If yes, please describe the uses and dollar amounts planned
g) Are you planning to subcontract or partner with other organizations to implement your proposed program? (Y/N) If yes, provide a list of all planned subcontractors or partners

4. Attestations
    a) Attestation for Attachment B Subrecipient responsibilities
        a. Check box: I attest that I have reviewed and understand Attachment B Subrecipient responsibilities
    b) Attestation for Attachment D OSDH Subrecipient Terms and Conditions
        a. Check box: I attest that I have reviewed and understand Attachment D OSDH Subrecipient Terms and Conditions
    c) Attestation for that awarded funds will not supplant (replace) existing funding
        a. Check box: I attest that awarded funds will not supplant (replace) existing funding
    d) Attestation for grant administration activities
        a. Check box: I attest that no more than 5% of the budgeted funding would go toward grant administration activities

Please note: In the sections that follow, there are some items where different information is requested depending on application type:

- Provider/practice/organization applying to <u>participate</u> in an established MOUD and/or MAUD upskilling program
- Organization/institution applying to <u>provide</u> MOUD and/or MAUD upskilling training
- Organization/institution applying to establish/expand an integrated/alternative care delivery model for MOUD and/or MAUD

Where included, tables specify requirements by application type; otherwise, all applicants should provide requested information.

Components that should be uploaded as files include the following:

File One: Project Plan

The Project Plan should contain the following sections and address the bullets in each section. Project Plan should not exceed 7 pages (excluding letter(s) of support) and be formatted according to the specifications below.

Organizational Capacity and Qualifications

Application Type	Section requirements
Provider/practice/organization applying to participate in an established MOUD/MAUD upskilling program	• Type of practice (e.g., primary care, OBGYN, maternal health, etc.) or health care organization (e.g., rural hospital) • Number of providers anticipated to participate in upskilling by role (e.g., physicians, APRNs, PAs) and specialty (e.g., PCP, OBGYN, hospitalist, non-addiction inpatient providers)
Organization applying to provide MOUD/MAUD upskilling training or Organization applying to establish/expand an integrated/alternative care delivery model for MOUD/MAUD	• Overview of organization including current service offerings, size, and structure of organization (e.g., number of sites, service locations, geographic coverage area) • Evidence of prior experience delivering behavioral health training and MOUD and/or MAUD upskilling services, SUD treatment, and/or integrating behavioral health into primary care or other relevant settings • Qualified staffing plan for the proposed program, including clinical oversight appropriate to the program model and any required licensure, if applicable • Experience managing multi-site operations or regional programs *(N/A for organizations applying to provide upskilling training)* • Describe partnerships relevant to program delivery including those with primary care, behavioral health providers, hospitals, and community-based organizations

Evidence of Need

- Evidence (quantitative or qualitative) of SUD treatment needs in the targeted service area(s), including gaps in access to MOUD/MAUD treatment, trained providers, or other integrated/alternative care delivery models
- Letter of support

Application Type	Section requirements
Provider/practice/organization applying to participate in an established MOUD/MAUD upskilling program	Letter of support not required
Organization applying to provide MOUD/MAUD upskilling training	Evidence of interest (letter of support) from at least one new provider/practice group interested in participating in training (i.e., organization that is not currently participating in the training)
Organization applying to establish/expand an integrated/alternative care delivery model for MOUD/MAUD	Evidence of interest (letter of support) from at least one partner organization (e.g., from spoke for a hub-and-spoke model) as is relevant

Program Design

- Description of the proposed model

Application Type	Section requirements
Provider/practice/organization applying to participate in an established MOUD/MAUD upskilling program	Specify the specific training program of interest and provide a brief description. Program should be an established, evidence-based program focused on MOUD and/or MAUD
Organization applying to provide MOUD/MAUD upskilling training	Describe the training program including plans for recruiting participants, evidence-based curriculum or training approach, and support that will be provided to operationalize training into routine practice
Organization applying to establish/expand an integrated/alternative care delivery model for MOUD/MAUD	Describe the proposed model (e.g., hub-and-spoke, telehealth-enabled, mobile services) and plan for implementation

- Description of how funds will be used across relevant program components including program design and implementation, recruitment and engagement,

workforce training and education, service delivery, enabling technology and equipment, and program evaluation and reporting

- Description of how the program will support rural communities with populations of 55,000 or fewer (see **Attachment A** for a full list of eligible communities)
- Evaluation plan
    - At a minimum, applicants will be required to report to OSDH on the following metrics identified in OSDH's application to CMS as applicable to their program:
        - # of new providers who participate in MOUD and/or MAUD upskilling
        - # of new access points (e.g., locations) for MOUD and/or MAUD
        - # of individuals with OUD and/or AUD served through expanded treatment access points
    - For these metrics, please describe data collection methods, sources, how evaluation will be conducted (e.g., internally or by a third party such as an academic or non-profit institute, etc.), and targets
    - Applicants are encouraged to develop additional evaluation measures tailored to their model. Please describe any process measures (e.g., participant recruitment and retention targets) or outcomes measures (e.g., patient-reported satisfaction measure) you plan to track
- For projects spanning multiple years, please describe key activities and projected budget needs in future years.

Impact, System Integration, and Sustainability

- **Impact**: Describe the anticipated outcomes of the proposed model, including how it will expand access to MOUD and/or MAUD and the expected scale of impact (e.g., providers trained, access points created, patients served)
- **System Integration**: Describe plan to operationalize and embed interventions into routine practice, enabling sustained, ongoing capability (e.g., translating evidence-based protocols into clinical workflows, order sets, and other tools that support consistent use in care delivery)
- **Sustainability**: Describe plan to address program continuation (financial and operational sustainability) after grant funding concludes, including the 1) specific ongoing costs that will be incurred after the grant period ends; 2) a named funding source that will cover those costs (other funding sources, partner commitments, transition to billable services, or integration into existing operations); 3) a description of what the project will look like in operation after the grant period ends

as is relevant. Please note that reliance on unspecified future federal or state reimbursement alone is not considered a viable sustainability plan

Work Plan and Timeline

- Phased implementation milestones with specific deliverables and dates, until July 31, 2027.

File Two: Budget

Applicants should complete **Attachment C** budget Excel form. Please fill out and submit the "Base" budget tabs as relevant. If submitting a request for supplemental budget, please fill out the "Supplemental" budget tabs as relevant.

File Three: Grants Management Materials

Applicants should provide all of the documentation needed for Grants Management purposes, as described in **Attachment D.** This includes documentation such as:

- Attestation that you have reviewed the standard OSDH Subrecipient Terms and Conditions & uploaded a completed form with requested exceptions (Requested Exceptions to OSDH Subrecipient Terms and Conditions document), if any, to the contract terms
- The subrecipient questionnaire (SRQ)
- Certificate of Insurance
- Any federally negotiated indirect cost rate agreements. If an organization does not have a federally negotiated indirect cost rate agreement and wishes to include indirect costs, they may use the federally approved de minimis rate of 15% of modified total direct costs (Code of Federal Regulations, section (f)) or a lesser percentage
- Financial statements. Acceptable financial statements include an audit report or audited financial statements. Non-profit organizations that are not required to have an audited financial statement may instead submit a Form 990 or 990-N

Application Formatting Requirements

Application formatting requirements are intended to create a level playing field across applicants. Failure to adhere to the page limit and formatting parameters will result in the committee only reviewing pages up to the maximum limit. Project Plan should meet the following requirements

- Page Limit: Project Plan not to exceed 7 pages (excluding letter(s) of support)
- File Format: Word Document or Portable Document File (PDF)
- Paper Size: 8 ½ x 11 inches

- Margins: 1 inch all around
- Language: English
- Include page numbers
- Do not include external links to information you want reviewers to assess
- Font: Times New Roman or Calibri
- Spacing: Single-spaced
- Size: 12-point font
- Footnotes and text in tables and graphics may be 10-point

Application Review

Stage One: Basic Requirements Review

Each application is reviewed to ensure it meets basic requirements. Applications will be considered ineligible if:

- Funding requests exceed the maximum award level of $1M (not inclusive of supplemental budget proposal)
- Applicant is suspended, debarred, or otherwise excluded from receiving federal funds
- Application contains prohibited use of funding
- Financial statements and/or audits submitted by the applicant show financial mismanagement
- Application is submitted after the deadline
- Applicant does not meet the eligibility criteria
- Application is incomplete

OSDH reserves the right to provide the opportunity to applicants to make minor technical corrections to only the documents submitted as part of **File Three** to bring application into compliance after awards have been decided. Applicants will only be contacted for corrections after award decisions have been made.

OSDH will not fund:

- An application from out of state
- An application from an ineligible applicant
- An incomplete application
- A disqualified application

Stage Two: Merit Review

For compliant applications, OSDH will convene review panels to score applications across a common set of weighted criteria, outlined below. Evaluation and scoring teams were chosen based on their knowledge and experience of subject matter and administration of grant funds and will receive training on competitive review processes. Applications will then be ranked by total score, and funding will be allocated to the highest scoring applications.

In addition to the scoring criteria, OSDH reserves the right to evaluate the portfolio of scored applications for alignment with program objectives, as well as geographic distribution and model types when making final award decisions. OSDH may prioritize awarding funds to entities headquartered and operating in rural Oklahoma counties (**Attachment A**).

Award Contingencies and Reallocation of Funds

In the event OSDH does not receive enough applications meeting Basic Requirements (Stage One of Application Review) or compliant applications do not align with program goals, OSDH may:

- Distribute funding to supplemental funding requests
- Refrain from awarding funds through the competitive process and retain funds for a future procurement opportunity consistent with RHTP requirements
- Fund discrete portions of an application at an amount lower than requested, where OSDH determines that the portion can be implemented independently and remains aligned with program requirements
- Reopen, revise, or reissue the funding opportunity if OSDH determines a need for clearer requirements or technical assistance

OSDH may also use any of the options described above if the full $2.8 million in Year 1 funding is not awarded for any reason.

Scoring Criteria

Criterion	Description	Point Value (100 total)
Organization Capacity and Qualifications	The case that the applicant is well-positioned to make use of the proposed investment. - For providers/practices/organizations applying to participate in an established MOUD/MAUD upskilling	10

	program, reviewers will consider practice/organization type and provider specialties to ensure alignment with program objectives - For organizations applying to provide MOUD/MAUD upskilling training or establish/expand an integrated/alternative care delivery model, reviewers will consider the applicant's experience implementing similar programs and delivering MOUD/MAUD training/services and other qualifications (e.g., staffing plan, experience managing multi-site/regional programs, and strength of provider or local partnerships)	
Evidence of Need	A. The qualitative and/or quantitative case that this investment would be filling an identified gap B. Letter of support from participating/partner organization as appropriate Note: Letter of support not required for providers/practices/organizations applying to participate in an established MOUD/MAUD upskilling program. Score will be based on part A only.	10
Program Design	The extent to which the program is evidence-based and well-suited to improve access to MOUD/MAUD in rural communities. Reviewers will assess the strength of the program model, fund use, focus on serving rural communities, projected budget needs in future years, and evaluation plan. Proposed activities should logically address the stated need.	35
Impact, System Integration, and Sustainability	Reviewers will assess: - Impact – the extent to which the proposed model will expand access to MOUD/MAUD and achieve meaningful scale - System Integration – the extent to which proposal includes a clear plan to operationalize and embed	15

	interventions into routine practice, enabling long-term capability vs. only providing training - Sustainability – the extent to which the proposal demonstrates financial and operational sustainability after the initial investment, including ongoing costs, funding source to cover costs, and what project looks like after funding ends	
Work Plan and Timeline	The clarity and feasibility of the applicant's plan to implement the program within the grant period. Reviewers will assess whether key milestones are well-defined, including whether they are specific, measurable, attainable, realistic, and time-bound; the timeline is realistic given the scope of work; and the applicant demonstrates readiness to launch.	10
Budget Reasonableness	The degree to which the proposed budget is justified, reasonable, and appropriate for the scope of work. Reviewers will assess whether 1) costs are clearly explained, align with project activities, and are allowable, 2) the budget is based on reasonable estimates, and 3) funds can be credibly spent by the deadline.	20

Award Notices and Submission Deadlines

Application Timeline

Event	**Date**
NOFO released	June 8, 2026
Applicant Q&A submissions due	June 26, 2026
Q&A answers released	Rolling basis, all complete by July 2, 2026
Applications due	July 10, 2026

Post Notice of Award	Late August / early September
Contract negotiations and execution of the contract are complete (if required)	Late September / early October

Subrecipient contracts must be executed by October 30, 2026. Subrecipients who are awarded funds must then spend all funding by July 31, 2027.

How We Make Awards

Submit complete application files via the form linked here, any time before the application deadline.

At the end of the application period, the process is as follows:

- Initial review by OSDH to ensure application meets Stage 1 Basic Application Requirements. If those requirements are not met, applications will be deemed ineligible and applicants will be notified of their status
- Review for completion and compliance of File Three Grants Management Package. OSDH may evaluate the quality of this file to make funding determinations. OSDH may also disqualify an applicant at any stage of the NOFO process if submitted materials are materially inaccurate or raise compliance concerns
- Evaluation and scoring of all eligible applications
- Awards will be determined based on available funding and specifications described above
- Applicants receiving awards will be notified by the RHTP Grants Management Office. Following receipt of a Notice of Award, if required, contract negotiations will be conducted through OSDH Legal Counsel

Application Deadline

July 10, 2026, 11:59 PM CT.

Applicant Q&A opportunities

Applicants may submit any questions regarding the application to Behavioral Health Integration Program FAQs no later than June 26, 2026, at 11:59 PM CT. Responses will be made publicly available on a rolling basis and no later than July 2, 2026, via updates to the OSDH RHTP Behavioral Integration FAQ, available here: RHTP Program Website

Application Checklist

Required Application Components	
☐ Organizational information application form (Organizational profile, Contact information, Program proposal, and Attestations)	Answer directly in form
☐ File One: Project plan	7-page limit (excluding letter(s) of support); attach in form
☐ File Two: Budget	Use OSDH provided attachment (**Attachment C**) to provide budget, including supplemental tabs if applicable; Attach in form
☐ File Three: Grants management materials	Review and submit forms within OSDH provided attachment (**Attachment D**); Attach in form

Post-Award Requirements and Administration

All awardees must follow:

- All terms and conditions in the Behavioral Health Integration – Medications for Opioid and Alcohol Use Disorders Notice of Award (NOA).
- All financial and reporting procedures and requirements and other terms and conditions stipulated in the negotiated contract between OSDH and the awarded entity.
- Awardees must attend a post award webinar; information will be forthcoming

Reporting Requirements

See Attachment B for an overview of subrecipient responsibilities on reporting.

OSDH Contacts

RHTP homepage: https://oklahoma.gov/health/rhtp/rhtp-funding.html

OSDH inbox: OklahomaRHTP@health.ok.gov