



**MINNESOTA**  
**RURAL HEALTH TRANSFORMATION**

# Project ECHO for Maternal and Behavioral Health

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# Tribal-State Relations Acknowledgement Statement

The State of Minnesota is home to 11 federally recognized Indian Tribes with elected Tribal government officials. The State of Minnesota acknowledges and supports the unique political status of Tribal Nations across Minnesota and their absolute right to existence, self-governance, and self-determination. This unique relationship with federally recognized Indian Tribes is cemented by the Constitution of the United States, treaties, statutes, case law, and agreements. The State of Minnesota and Tribal governments across Minnesota significantly benefit from working together, learning from one another, and partnering where possible.

Minnesota Department of Health recognizes, values, and celebrates the vibrant and unique relationships between the 11 Tribal Nations and the State of Minnesota. Partnerships formed through government-to-government relationships with these Tribes will effectively address health disparities and lead to better health outcomes for all of Minnesota.

In our Rural Health Transformation Program work, we demonstrate our commitment to Tribal-State relations by partnering with the MDH Office of American Indian Health and Tribal Relations to seek input from Tribal Nations as we develop and implement our program, including engaging Tribes on matters of data sovereignty and program evaluation.

# Overall RHTP Grant Outcomes

- Improving health outcomes for rural Minnesotans with or at risk of developing cardiovascular disease, diabetes, and chronic kidney disease (cardiometabolic disease).
- Building education pathways and promoting training opportunities in rural communities to sustainably expand the health care workforce in rural Minnesota.
- Expanding health care access in rural communities by creating new access points for community-based screenings, preventive care, and chronic disease management through technology-enabled care delivery, mobile care, and increased use of community-based frontline workers.
- Strengthening partnerships between providers to enable delivery of expanded services in rural areas through shared learning, collaborative approaches, and advanced technology interventions.
- Strengthening and stabilizing rural provider financial health through strategic investments in technology, data infrastructure, and collaborative mechanisms needed to address unique needs of rural providers.

# Program Description

- Seeks proposals from applicants to provide Project Extension for Community Healthcare Outcomes (ECHO) on topics that include but are not limited to maternal health (inclusive of maternal mental health) and mental/behavioral health for primary care audiences
- Applicants are expected to provide 12–24 one-hour long sessions (minimum of one session per month) in at least one of the topic areas
- Applicants are welcome to apply to provide both mental health and maternal health series

- Project ECHOs should focus on:
  - Providing education and networking for participating rural clinicians and their care teams.
  - Providing an open participation model.
  - Sharing responsive knowledge that is adaptable to rural community and clinician needs in underserved and hard-to-reach patient populations.
  - Maintaining a focus on case-based learning that is specific to rural populations. Participants will learn from expert-led didactic presentations and discuss their own patient cases to gain new skills and implement evidence-based recommendations.

# Eligible Entities

- Located in Minnesota.
- For-profit or not-for-profit entities that demonstrate extensive experience providing in-depth, high-quality education and training and/or developing resources that support rural health care.
- Be trained in iECHO, for the Project ECHO model.
- Applicants will be selected based on their ability to complete proposed projects and evidence of experience in the proposed subject matter

# Funds Available

Funding	Estimate
Estimated Amount to Grant	\$330,000
Estimated Number of Awards	1-3
Estimated Award Maximum	\$330,000
Estimated Award Minimum	\$100,000

No expenditures are to be incurred prior to the grant contract's full execution

# Outcomes & Priorities

- Project ECHO is a collaborative model of medical education and care management that helps clinicians provide expert-level care to patients wherever they live.
- The grant will be focused on Project ECHOs for topic tracks that cover maternal health or mental health and behavioral health topics to support practicing rural providers and clinical care teams with improving patient care.
- Outcomes
  - Providing 12-24 one-hour sessions each year in mental and behavioral health or maternal health.
  - Connecting rural primary care providers and other professionals who would benefit from expanded practice knowledge with specialists in mental health, behavioral health, obstetrics and gynecology, maternal fetal medicine, and other specialties.
  - Expanding local expertise and linking providers to regional resources.
  - Strengthening regional networks
  - Sustaining health care delivery for people who seek care for mental, behavioral, and/or maternal health care.

# Data Reporting: Regular Programmatic Reporting

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How many ECHO sessions were conducted during this reporting period?

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How many participants attended each session?

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Which zip codes were represented in each session's attendance?

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Which provider types were represented in each session's attendance?

- Eligible Expenses

- Personnel time for planning and delivery of Project ECHO series
- Hardware and software necessary to deliver Project ECHO series
- Administrative costs, both direct and indirect, not to exceed 6% of your total budget

- Ineligible Expenses

- Rural Health Transformation Program ineligible expenses outlined in Attachment B
- Duplication of existing ECHO program topics available in Minnesota
- Solicitating donations
- Taxes, except sales tax on goods and services
- Lobbyists, political contributions
- Bad debts, late payment fees, finance charges, or contingency funds

# Future Funding & Budget Periods

- The RHTP is a 5-year funding program from CMS. Future funding may be available to selected grantees in years 2-5 of Minnesota's program. This funding is dependent on work available and CMS's award to Minnesota. Current grantees will be notified of possible amendments for time and additional funds in the future.
- Budget Period 1: Grant Agreement Execution Date (estimated July 2026) – October 30, 2026
- Budget Period 2: October 31, 2026 – October 30, 2027
- Budget Period 3: October 31, 2027 – October 30, 2028
- Budget Period 4: October 31, 2028 – October 30, 2029
- Budget Period 5: October 31, 2029 – October 30, 2030

# Spending RHTP Funds

- Funds should be fully spent in each budget period
- If a grantee demonstrates a compelling need, they may be allowed to continue spending for up to 11 months beyond the budget period (through Sep 30, the end of the following federal fiscal year)
- However, CMS will evaluate MN's spending and progress toward our goals and metrics at the end of each budget period
- Our results during the budget period will determine whether MN receives an RHTP award for the next budget period and the amount of that award

# Grant Contractual Obligations

- Work may not start prior to the full execution of agreement and the first day of the contract period
- Grant activities approved for payment are outlined in Exhibits A & B of the contract
- Grantees must report on financial and programmatic activities
- Progress and financial reports will be submitted bimonthly: August 20, October 20, December 20, February 20, April 20, June 20
- MDH will provide further guidance on outcomes, metrics, and reporting and will invite collaboration from grantees. Evaluation metrics may evolve based on grantee contributions, program findings, and CMS requirements
- Grantees will have one grant monitoring visit and financial reconciliation per grant period

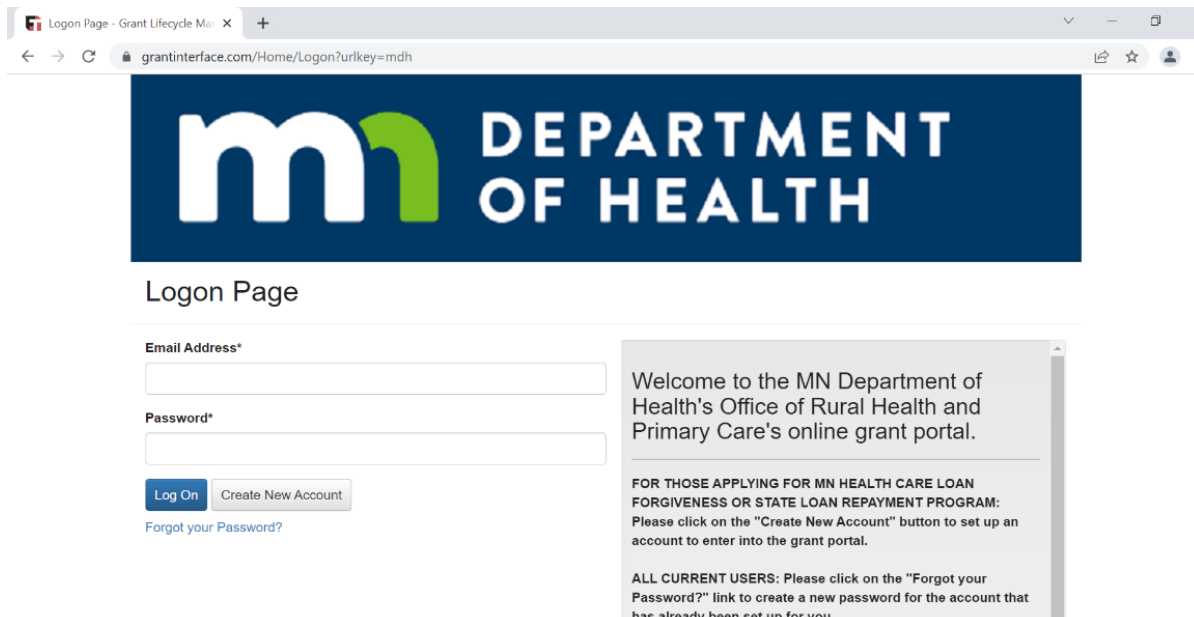
# Review Process

- Initial eligibility is determined by grants staff
- External evaluators review grants individually and score on the following criteria
  - Problem Statement – 30 points
  - Methods – 35 points
  - Work Plan – 20 points
  - Budget and Budget Narrative – 15 points
- Prior to contracting, due diligence and past performance review are conducted

# Application Instructions & Important Dates


- Applications open: May 4, 2026
- Deadline for questions requests: May 22, 2026
- Applications deadline: June 3, 2026 at 4:30 p.m. Central Time
- Applications must be submitted through the [ORHPC Online Grants Portal](#)

# Grants Portal



- Existing Users: log in or use the forgot password button
- New Users: verify your organization has or doesn't have a profile & create profile(s)
- If you are unsure of organization's status, reach out to MDH

# Application Sections

 Fields with an asterisk (\*) are required.

- > Application Instructions
- > Section 1: Organization and Applicant Information
- > Section 2: Project Information
- > Section 3: Narrative
- > Section 4: Timeline and Work Plan
- > Section 5: Budget and Budget Narrative
- > Section 6: Attachments
- > Section 7: Applicant Conflict of Interest
- > Certification

- 8 sections to complete
- Refer to RFP for instructions on narrative questions
- Complete at your own pace
  - Save button vs Submit button

# Application Overview

- Organization and Applicant Information
- Contact Overview
- Narrative
  - Organization Overview
  - Organizational Capacity
  - Project Summary
  - Problem Statement
  - Project Methods
  - Key Personnel Biographical Sketch(es)
  - Administrative Costs

# Application Overview Continued

- Timeline and Work Plan
  - Refer to Estimated Timeline
- Budget & Budget Narrative
  - Detailed justification including itemized budget line items
- Required Application Attachments
  - Audited Financial Statements
  - Due Diligence
- Conflict of Interest
- Certification
  - RHTP funds will not be used for any activities that are currently funded, or planned to be funded, by other sources
  - RHTP funds will not be used to provide the same services to the same beneficiaries as other funding sources or programs

# Registering for Grant Related Systems

- Office of Rural Health and Primary Care [online grants portal](#)
  - Creating accounts and other steps, including adding collaborators, are found online
    - [ORHPC Grant Guide, August 2022](#)
- SWIFT Vendor Resources
  - [SWIFT Vendor Resources / Minnesota Management and Budget \(MMB\)](#)
  - [SWIFT Supplier Portal Homepage](#)
  - [Vendor Reference Guides / Minnesota Management and Budget \(MMB\)](#)
- SAM.gov
  - Unique Entity ID [Entity Registration | SAM.gov](#)

# Questions

# Thank You!

**Office of Rural Health and Primary Care RHTP Team**

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