

Funding Opportunity Number: [HEART YR 1-2026](#)
Issuing Agency: [Arkansas Department of Finance and Administration \(DF&A\)](#),
Program Authority: [CMS Rural Health Transformation \(RHT\) Program](#)
Contact Information: Info@arkansasrhtp.com

Notice of Funding Opportunity (NOFO)

Healthy Eating, Active Recreation, and Transformation (HEART)

I. Program Overview

The Healthy Eating, Active Recreation, and Transformation (HEART) initiative is a core component of the Arkansas Rural Health Transformation Program. HEART is designed to improve health outcomes and expand access to preventive services across rural Arkansas through a coordinated, community-driven approach to nutrition, physical activity, and chronic disease prevention.

HEART strengthens rural health systems by integrating school-based programs, community organizations, faith-based partners, and healthcare providers into a unified model focused on prevention and wellness. The initiative emphasizes early intervention, community engagement, and sustainable health improvements by connecting public health, clinical care, and local resources.

HEART investments focus on addressing underlying drivers of poor health outcomes, including limited access to healthy food, physical inactivity, and gaps in preventive care. By supporting scalable, community-based models, HEART aims to reduce chronic disease burden, improve behavioral health outcomes, and promote lifelong healthy habits among rural populations.

II. Program Objectives

For purposes of this NOFO, a **credible plan** means a proposal that demonstrates a clear implementation approach, measurable outcomes, organizational readiness, and—where applicable—regional or cross-provider collaboration.

HEART objectives include:

- Expand access to preventive care, nutrition services, and wellness programs in rural communities.
- Promote healthy lifestyles through increased physical activity and improved access to nutritious foods.
- Reduce chronic disease prevalence, including diabetes, obesity, hypertension, and heart disease.
- Improve behavioral and mental health outcomes through community-based interventions.
- Strengthen collaboration between schools, healthcare providers, faith organizations, and community partners.

- Enhance workforce capacity through training in prevention, nutrition, and chronic disease management.
- Support data-driven monitoring and evaluation of population health outcomes.

Projects that do not clearly align with at least one HEART objective and present a credible plan for achieving measurable results will not be considered for funding.

III. HEART Sub-Initiatives

HEART will support projects across the following sub-initiatives. The examples listed below are illustrative and not exhaustive. Applicants may propose other projects that clearly advance HEART objectives and are consistent with CMS Rural Health Transformation Program requirements. **Applicants are encouraged to view the project and budget narrative on the program website.**

A. GROW Kids – Growing Resilient, Optimally Well Kids

Projects may include, but are not limited to:

- School-based and early childhood health and wellness programs
- Preventive screenings, behavioral health interventions, and health education for children
- Programs promoting physical activity, nutrition, and healthy habits
- Data collection and tracking of child health outcomes

Total budget for **GROW Kids** projects up to **\$6,000,000.00** in Year 1

B. FARM – Food Access & Regional Markets

Projects may include:

- Expansion of local produce markets and “Buy Local” food initiatives
- Integration of food-as-medicine strategies into clinical and community settings
- Nutrition education and outreach programs
- Partnerships with farmers, retailers, and community organizations to improve food access

Total budget for **FARM** projects up to **\$5,700,000.00** in Year 1

C. MOVE – Mobilizing Opportunities for Vital Exercise

Projects may include:

- Enhancement and utilization of existing trails, parks, and recreational infrastructure
- Community fitness programs, wellness events, and activity-based outreach
- Equipment and improvements that increase physical activity participation
- Data tracking of utilization and health outcomes related to physical activity

Total budget for **MOVE** projects up to **\$5,037,600.00** in Year 1

D. FAITH – Faith-based Access, Interventions, Transportation, and Health

Projects may include:

- Health education, screening events, and outreach through faith-based organizations
- Community engagement initiatives connecting residents to preventive and primary care
- Transportation assistance and navigation support for healthcare access
- Coordination with local providers and tracking of engagement and referral outcomes

Total budget for **FAITH** projects up to **\$1,100,000.00** in Year 1

E. HEAL – Healthcare Education and Advancement for Leadership

Projects may include:

- Training and curriculum development for healthcare providers on nutrition, prevention, and chronic disease management
- Continuing education (CME) programs focused on behavioral health and safe prescribing practices
- Workforce development initiatives that strengthen prevention-focused care delivery

Total budget for **HEAL** projects up to **\$1,300,000.00** in Year 1

F. IMPACT – Integrated Models for Prevention, Access, Care, and Transformation

Projects may include:

- Chronic disease prevention and management programs
- Integrated clinical, behavioral, and social service delivery models
- Value-based care pilots and coordinated care interventions
- Data systems supporting analytics, risk stratification, and outcome tracking

Total budget for **IMPACT** projects up to **\$8,420,000.00** in Year 1

The State will require each awardee to submit **quarterly progress reports** and a **final evaluation report** to support compliance with CMS Rural Health Transformation Program requirements.

IV. Eligibility

Eligible applicants include: state government agencies, employers, hospitals and clinics, schools, community organizations, faith institutions, community health workers, academic research partners, and nonprofit or public entities serving rural Arkansas.

In addition to meeting eligibility by entity type, applicants must demonstrate sufficient organizational, operational, and financial capacity to administer grant funds in compliance with state and federal requirements, including **2 CFR Part 200**.

Applicants must have an active SAM.gov Unique Entity Identifier (UEI); please note that SAM registration can take up to eight (8) weeks to complete and approve.

V. Award Information

No match is required.

Allowable budget categories may include personnel, contractual services, equipment, software and licensing, training, and data and evaluation costs, provided they are reasonable, necessary, and directly tied to approved project activities.

All awards are subject to the State's receipt of funds under the RHT Program. The State plans for future funding opportunities available in future RHT Program years. An Eligible participant's award of funding in one Program Year does not guarantee the award of funds in future years.

The performance period for Program Year 1 runs from the award through **September 30, 2027**, meaning all Program Year 1 funds must be spent by then. However, per CMS rules, all funds must be obligated by **October 30, 2026**. The State will provide awardees with more detailed guidance on what is required to show that funds have been obligated.

VI. Reporting and Compliance

Quarterly reporting is required. Compliance with **2 CFR Part 200**.

The State will monitor Grantee's performance, including, but not limited to, through review of financial and programmatic reports and performance measures, under any Grant Agreement awarded as a result of this NOFO.

The State is required to submit detailed reports to CMS regarding activities and expenditures under the RHT Program. The State will require each awardee to submit quarterly progress reports and a final evaluation report to permit the State to fulfill its RHT Program requirements. Also, awardees may be required to respond to questions from or submit information to the Department of Finance and Administration for Plan implementation.

VII. Funding Restrictions

HEART funds cannot be used for any purpose for which the Centers for Medicare & Medicaid Services (CMS) prohibits the use of RHT Program funds. Funding restrictions include, but are not limited to:

- Total administrative costs may not exceed 5% of the award
- Generally, indirect costs
- Funds may not replace existing funding and must support new or expanded activities
- Salaries charged to the award may not exceed the federal salary cap (\$225,700)
- Funds may not support ongoing costs without a sustainability plan
- Broadband infrastructure is not an allowable use of funds
- Lobbying or advocacy activities are not an allowable use of funds
- Investment vehicles or endowments that generate profit are not an allowable use of funds

Please refer to the RHT Program [Notice of Funding Opportunity](#) and CMS' [Frequently Asked Questions](#) regarding the RHT Program for detailed information regarding funding restrictions.

VIII. Application Information

- **Application open date:** June 29, 2026
- **Application close date:** July 31, 2026 12:00pm CST

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