

Request for Application (RFA): Rural Health Transformation Program Funding Opportunity to Establish or Expand Accredited Dental Hygiene Programs

A series of funding opportunities will be issued over the lifecycle of the Rural Health Transformation Program (RHTP) grant related to Kentucky's five priority initiatives. For more information on Kentucky's plan, visit our website: <https://ruralhealthplan.ky.gov>.

Applications for this funding opportunity will be considered on a rolling basis. Please submit responses by May 29, 2026 to be considered for funding available August 1, 2026. Submit to: pam.stein@ky.gov.

I. Context and Background

The Commonwealth of Kentucky has been awarded funding through the Centers for Medicare & Medicaid Services (CMS) Rural Health Transformation Fund (RHTF). This investment will empower Kentucky to launch and implement its Rural Health Transformation Plan (RHTP), a community-driven strategy to expand access and improve health outcomes for rural residents across the Commonwealth¹.

Our Plan

Kentucky's RHTP launches five interrelated initiatives designed to build rural health infrastructure and provide sustainable, long-term improvements. This plan directly supports Kentucky's rural counties while advancing statewide impact through innovation, technology-enabled care and strengthened workforce recruitment pipelines for both clinical and non-clinical staff. This strategy will help build a resilient, integrated and technology-forward health system across the Commonwealth.

1. **Rural Community Hubs for Chronic Care Innovation:** Establishes local "hub-and-spoke" collaboratives focused on obesity and diabetes prevention and management. These hubs will integrate nutrition, physical activity programs, and digital self-management tools.
2. **PoWERing Maternal and Infant Health:** Expands timely prenatal and postpartum care by deploying telehealth-enabled maternal care teams who will serve maternity-care deserts and high-risk regions, to help mothers and infants receive seamless, high-quality support.
3. **Rapid Response to Recovery (EmPATH Model):** Deploys technology-enabled crisis stabilization and mobile behavioral health response teams to connect individuals with community-based treatment and recovery supports.
4. **Rooted in Health: Rural Dental Access:** Increases access to preventive oral health services through expanded dental hygiene training programs, externships, and investment in Public Health Dental Hygiene (PHDH) teams in Local Health Districts (LHDs).
5. **Crisis to Care: Integrated Emergency Medical Services (EMS) Response and Coordination:** Enhances pre-hospital capacity and trauma coordination through treat-in-place protocols, improved data connectivity and workforce training for rural EMS providers.

¹ For more information on this funding opportunity, see [Governor's Beshear's press release](#), the [CMS Notice of Funding Opportunity](#), and [federal assistance listing 93.798—Rural Health Transformation Program](#) on Grants.gov.

About the Program

This project is 100% funded by the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services (HHS) for a total of \$212.9 million in budget year 1 with 100% by CMS/HHS. The RHTF grant spans five budget periods aligned with federal fiscal years (FY2026–FY2030). Funding is disbursed annually by CMS based on achievement of performance metrics.

The Commonwealth of Kentucky has been awarded funding through the Centers for Medicare & Medicaid Services (CMS) Rural Health Transformation Fund (RHTF). This investment will empower Kentucky to launch and implement its Rural Health Transformation Plan (RHTP) — a community-driven strategy to expand access and improve health outcomes for rural residents across the Commonwealth.

Rooted in Health: Rural Dental Access

A key component of Kentucky’s Rooted in Health: Rural Dental Access initiative involves expansion of accredited dental hygiene training programs to strengthen the hygienist workforce pipeline. Through this grant opportunity, the Kentucky Department for Public Health (DPH) is soliciting applications from academic institutions to establish new or expand existing dental hygiene programs across the state. The overarching goals of this funding are to reduce preventable oral disease and improve oral health outcomes among underserved rural populations.

Definitions

“Accredited dental hygiene program” refers to a postsecondary educational program that has been formally reviewed and approved by the Commission on Dental Accreditation (CODA), the accrediting body recognized by the U.S. Department of Education for dental education programs. Accreditation signifies that a program meets nationally accepted standards for educational quality, patient care, and institutional effectiveness.²

“Rural” refers to non-metropolitan counties or outlying metropolitan counties that do not include an urban area with a population of 50,000 or more. This definition is inclusive of counties that are “Partially Rural”³.

II. Program Objectives

Funded programs must demonstrate their willingness and ability to:

1. Increase the number of dental hygiene training slots to strengthen the workforce pipeline in Kentucky’s rural communities.
2. Strengthen partnerships with rural service sites such as Local Health Departments, Federally Qualified Health Centers, and rural clinics.
3. Achieve measurable improvements in rural training capacity and service reach.
4. Operate in a cost-effective, sustainable, and compliant manner. Compliance is defined as adherence to CODA standards for dental hygiene educational programs as evidenced by obtaining and maintaining CODA accreditation.

² For additional details on CODA standards for dental hygiene education programs, please visit: [CODA.org: DH Standards](https://www.coda.org/dh-standards).

³ For additional details on our definition of “rural,” please visit: [How We Define Rural | HRSA](https://www.hrsa.gov/rural).

III. Eligible Applicants

Eligible applicants are non-profit, Kentucky-based educational institutions that demonstrate the capacity and authority to educate, train, and supervise dental hygiene students in accordance with CODA standards. Institutions may include, but are not limited to:

- Public or private colleges and universities
- Community and technical colleges
- Other non-profit academic institutions or consortia authorized to host CODA-accredited dental hygiene programs

IV. Timeline

April 20, 2026 – RFA Released

May 5, 2026 – RFA Information Session

May 15, 2026 – RFA Office Hours

May 29, 2026 – Deadline for Receipt of Applications

June 26, 2026 – Notification of Award to Grantees

August 1, 2026 – Funding Period Begins*

*Academic institutions will be required to report on RHTP implementation progress periodically throughout the funding period. Additional reporting guidance will be provided as CMS requirements are further determined.

V. Program Standards

Funded programs must demonstrate a willingness and commitment to adhere to the six major domains of CODA standards²:

1. **Institutional Effectiveness:** Programs must demonstrate systematic planning, outcomes assessment, financial sustainability, and alignment with the sponsoring institution's mission.
2. **Educational Program:** The curriculum must ensure graduates achieve entry level competence in:
 - a. Dental hygiene science and clinical care
 - b. Ethics and professionalism
 - c. Critical thinking and evidence-based practice
 - d. Care for diverse populations (children, adults, geriatric, and special needs patients)
3. **Administration, Faculty, and Staff:** Programs must be led by qualified administrators, employ credentialed faculty (with required degrees to meet CODA standards), and provide sufficient instructional and support staff.

4. **Educational Support Services:** Adequate clinical facilities, radiography and laboratory space, learning resources, and student services must be available to support instruction and patient care.
5. **Health and Safety Provisions:** Programs must comply with infection control, radiation safety, emergency preparedness, and life support training requirements.
6. **Patient Care Services:** Clinical education must include direct patient care experiences that meet CODA's competency and supervision standards, ensuring safe, ethical, and effective treatment.

VI. Allowable Uses of Funds

The total amount of funding available beginning August 1, 2026 for accredited dental hygiene programs is \$9.9m. Award sizes may vary depending on the number of applicants and proposed budgets. Costs are allowable to the extent that they are related to the establishment or expansion of an accredited dental hygiene program and adhere to guidance from the Centers for Medicare & Medicaid Services (CMS) related to the RHTP grant. Allowable costs include:

- Personnel costs for a Program Director and other faculty as needed.
- Renovation costs for existing buildings to house the dental hygiene program. Per CMS restrictions as stated in the Notice of Funding Opportunity, RHTP funding cannot be used for new construction or significant retrofitting of buildings.⁴
- Equipment to support learning and simulations (e.g., computers, patient chair, doctor delivery unit, instrumentation, sterilization center).
- Teaching supplies (e.g., instructor instrument set with cases, stand, and cleaning solution).
- Fees associated with obtaining CODA accreditation for dental hygiene programs in Kentucky.

Indirect costs are allowable up to 10% of total costs. This limitation applies even if the awardee has a higher negotiated indirect costs rate. Further, the total amount of administrative costs funded by the award through direct and indirect costs cannot exceed 10% of the total award value.

VII. Funding Timeline

This RFA will prioritize programs that demonstrate high readiness to begin implementation and expend the majority of funds in the RHTP grant's first budget period (August 1, 2026 through September 30, 2027). Programs that do not anticipate spending at least 50% of their total anticipated start-up costs in Year 1 should not apply for funding available August 1, 2026. For example, if a program's total anticipated start-up costs are \$3m, the program should be prepared to spend at least \$1.5m by September 30, 2027. Future funding opportunities with similar scope (new dental hygiene training programs) will be available in future years of the RHTP grant, however those grant opportunities will be tied to future budget periods.

Programs applying for funding available August 1, 2026 should submit budgets and implementation plans aligned to the timeframes in the table below (i.e., indicating what deliverables or milestones in the project plan and budget will be completed by the end of Year 1). Proposals should detail the full costs of establishing the dental hygiene program across as many years deemed necessary to fully stand up a program, with at least 50% of anticipated total costs expended by the end of Year 1. Please note, obligated funds must be spent by the end of the funding period in which they are awarded.

⁴ For more detail on funding limitations, reference the [CMS Notice of Funding Opportunity](#), [CMS Frequently Asked Questions](#), and [CMS Notice of Award](#).

Funding Year	Funding Period Begins	Funding Period Ends
Year 1	August 1, 2026 (<i>anticipated award date</i>)	September 30, 2027
Year 2	October 1, 2027	September 30, 2028
Year 3	October 1, 2028	September 30, 2029

Given Kentucky’s two-year biennium contracting periods, new contracts will be issued to bridge between funding periods. While the initial award only covers the Year 1 funding period, selected applicants can expect contract amendments and/or new contracts that will obligate additional dollars to the selected applicant. Additional details on contracting will be provided to successful applicants.

VIII. Funding Limitations

This funding opportunity is subject to restrictions from CMS per federal guidance.⁴ If awarded, applicants will be expected to execute the grant agreement in compliance with federal rules, laws, and regulations and specific requirements established by CMS.

This RFA is competitive, and all applicants may not be funded. DPH reserves the right to modify or reduce funding based on program performance, progress toward stated objectives, or availability of appropriate staffing support.

IX. Response Scoring

5 Points *Application Parameters*

(2 points) Are the pages requested clearly marked?

(3 points) Is the budget provided in the requested template? (“Attachment A”)

20 Points *Program Readiness*

(5 points) Are letter(s) of support from institutional leadership attached?

(10 points) Leadership and faculty capacity

- 10 = Provides documentation of qualified program leadership and faculty with credentials and experience appropriate to CODA-aligned dental hygiene education.
- 5 = Identifies some qualified faculty but gaps remain.
- 0 = No qualified faculty identified or documentation is absent.

(5 points) CODA accreditation timeline

- 5 = Implementation plan demonstrates current CODA accreditation *or* fully accounts for CODA application/approval timeline.
- 3 = CODA planning is documented, but application/approval timeline is only partially accounted for.
- 0 = No documentation of CODA alignment or readiness to meet accreditation standards provided.

40 Points

Rural Reach and Impact

(15 points) Proposed expansion of training slots in rural areas

- 15 = Clearly identifies the number of new or expanded dental hygiene training slots in rural areas and demonstrates that the scale of expansion is reasonable and achievable given the funding requested.
- 8 = Identifies an increase in training slots, but the scope or feasibility of expansion is not fully justified in relation to the proposed use of funds or training slots are not located in rural areas.
- 0 = Does not clearly identify the number of training slots to be added or expanded.

(15 points) Demonstrated rural student pipeline and rural placement plan

- 15 = Demonstrates an existing or clearly defined pipeline of students from rural areas and provides a clear, credible plan to train and place graduates into jobs in rural communities sufficient to support the proposed training slots.
- 8 = Mentions recruitment of rural students or intent to place graduates in rural areas, but supporting evidence, partnerships, or feasibility is limited.
- 0 = Does not demonstrate a plan to recruit students from rural areas or to place graduates into rural jobs.

(10 points) Documentation of rural partnerships (e.g., Local Health Departments, FQHCs, rural clinics, rural high schools)

- 10 = Applicant provides clear documentation (e.g., letters of support, MOUs, or agreements) of rural partnerships to support community-based clinical training.
- 5 = Documentation of rural partnerships is provided but lacks specificity or formalization.
- 0 = Documentation of rural partnerships is missing or insufficient to demonstrate readiness.

20 Points

Program Sustainability

(10 points) Student recruitment and retention plan

- 10 = Demonstrates an existing supply of qualified applicants or provides a clear, credible plan to recruit and retain students sufficient to fill the proposed training slots.
- 5 = Mentions recruitment or retention strategies, but evidence or feasibility for filling the proposed training slots is limited.
- 0 = Student recruitment and retention plan demonstrates clear gaps or lacks specificity.

(10 points) Plan for financial viability post-RHTP

- 10 = Provides strong plan for financial viability post-RHTP, including identification of alternative funding sources or revenue mechanisms to support the program beyond the grant period.
- 5 = Alternative funding resources or revenue mechanisms to support the program beyond the grant period are identified, but do not appear fully sufficient.
- 0 = Plan for financial viability post-RHTP is not adequately demonstrated.

10 Points

Implementation Timeline (August 1, 2026 – September 30, 2027)

(5 points) Are the milestones detailed enough to be actionable?

- 5 = Milestones are clearly defined and time-bound, with specific activities, responsible parties, and sequencing that demonstrate readiness for implementation.
- 3 = Milestones are identified but lack sufficient detail, clarity, or linkage to specific activities or responsible parties.

- 0 = Milestones are vague, incomplete, or not provided.
- (5 points) What is the feasibility of the proposed timeline?
- 5 = Timeline is realistic and feasible given staffing plans, infrastructure readiness, and scope of services, and demonstrates the ability to initiate services within the proposed timeframe.
 - 3 = Timeline appears generally feasible but includes assumptions or dependencies that are not fully addressed.
 - 0 = Timeline is not feasible, internally inconsistent, or does not align with program requirements.

5 Points **Budget Development**

(5 points) Using the provided budget template (“Attachment A”), is the budget reasonable for the intent of the program?

- 5 = Budget reflects a sound understanding of program needs and available resources, with costs appropriately scaled to reflect planned programming and staffing.
- 3 = Budget is mostly appropriate but leaves gaps in cost justification, resource alignment, or funding continuity
- 0 = Budget does not demonstrate financial viability, includes unclear or misaligned costs, or fails to meet program requirements.

X. Application Instructions

Applicants should submit the following information as a clearly labeled application packet to pam.stein@ky.gov by May 29, 2026 for funding available August 1, 2026.

- 1) A one-page cover sheet that includes:
 - a. Program title
 - b. Name of academic institution
 - c. Name, title, and email address of main point(s) of contact
- 2) An application narrative **not to exceed twenty-five (25) pages** that includes:
 - a. Description of the intent of the project, specific to the area or target population(s) being served, and reasons for determination of the target population(s).
 - b. Description of the methodology for launching the program, including key steps, partnerships, and deliverables.
 - c. Description of potential barriers and planned strategies or resolutions.
 - d. An evaluation plan, including outcomes to be measured, data collection methods, and how results will be used to assess success.
 - e. A sustainability plan for how the program will continue to operate after start-up funding ends, including demonstrated demand for the program, target enrollment numbers, anticipated tuition revenues, and plan to maintain enrollment stability over time
 - f. Timeline with identified milestones and deliverables for implementation of the program beginning August 1, 2026 and aligned with the funding timeline in Section VII.
- 3) Supporting documentation **not included in the twenty-five (25) pages**:
 - a. Letter(s) of support from institutional leadership, such as the President, Board of Trustees, Provost, or relevant Deans
 - b. Documentation demonstrating engagement of rural community sites (e.g., Local Health Departments, FQHCs, rural clinics, rural high schools)
 - c. Budget for FY27 using the provided budget template (“Attachment A”)

Thank you for your interest in applying for funding through the Rural Health Transformation Program to support the expansion of accredited dental hygiene programs. We value your commitment to increasing the dental hygienist workforce in Kentucky.

Please note that applications will be reviewed on a rolling basis, but applications received after the deadline will not be guaranteed consideration for funding available August 1, 2026.