



RURAL HEALTH TRANSFORMATION (RHT) PROGRAM: A GUIDE TO STATE AWARDEE REPORTING

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I. Introduction

As partners in a Cooperative Agreement, we have a shared goal: the success of each State's Rural Health Transformation (RHT) Program. States' core responsibility is to comply with all Terms and Conditions in their Notice of Award (NoA). Here's what that looks like in practice:

- ✓ **Fulfilling Requirements:** Submit all required reporting as detailed in the NoA.
- ✓ **Managing the Work Plan:** Submit performance measures as agreed upon and submit subsequent revisions of the State's work plan for CMS approval.
- ✓ **Staying Connected:** Collaborate with the State's Project Officer (PO), and, as applicable, Grants Management Specialist (GMS) to discuss progress and seek support on reporting activities as needed. An active partnership is key to success!
- ✓ **Subrecipient Oversight:** Confirm that subrecipients, contractors, and partners are compliant with all administrative and policy requirements, including reporting. Note that the Terms and Conditions of the NoA flow down to subrecipients.

Resources & Support

We are here to help States succeed! To ensure seamless, coordinated support, please copy both the State's PO and GMS in all correspondence. Direct programmatic questions to the State's PO, and financial or award administration questions to their GMS.

The primary goal of this guide is to equip States with the knowledge and tools needed to meet post-award reporting responsibilities efficiently and effectively. Timely and accurate reporting is the principal way we measure progress, promote accountability, and document the incredible work being done. The information States provide is critical for demonstrating the value of the RHT Program and informing programmatic funding decisions.

For additional supplemental information and reference materials, please refer to the [Appendix section](#).

After reviewing this guide, States will be able to prepare the following progress reports that meet RHT Program requirements:

1. **Annual Reports**
2. **Quarterly Reports**
3. **Final Report**

II. RHT Program Reporting Requirements

While this guide focuses on the successful preparation and submission of Annual and Quarterly Reports, as well as the Final Report, it is important to recognize that these reports are part of a broader landscape of post-award responsibilities. The full scope of federal reporting requirements, as detailed in the [Notice of Funding Opportunity \(NOFO\)](#), include:

- *Non-Competing Continuation (NCC) Application*
- *Federal Financial Reports (FFR)*
- *Federal Funding Accountability and Transparency Act (FFATA) Reporting*
- *Work Plan Updates*
- *Progress Reports*
- *SAM.gov Records*
- *Payment Management System (PMS) Reports, and*
- *Audit Reporting*

Please refer to the Program Terms and Conditions located within the State's NoA, [NOFO](#), and [CMS website](#) for additional information.

III. Reporting Cadence & Periods

State awardees are required to submit Annual and Quarterly Progress Reports along with a one-time Final Report. These reports must be submitted for all five budget periods (FY26-FY30). These reports are crucial for CMS to make funding decisions for subsequent budget periods.

While Budget Period 1 required only an Annual Report, quarterly reporting will commence in Budget Period 2 and continue alongside the annual reporting

schedule throughout the Program’s period of performance. For a comprehensive table of reporting dates, refer to [Appendix A](#).

IV. Annual, Quarterly, and Final Reports

The following section details each of the progress reports required throughout the RHT Program.

Annual Reporting and Quarterly Reporting Elements

The Annual Report delivers a summary of programmatic progress over the reporting period. Specific components of the Annual Report will be scored and used to determine subsequent funding. The general reporting periods are as follows: December 29, 2025 - July 31, 2026, August 1, 2026 - July 3, 2027, August 1, 2027 - July 31, 2028, August 1, 2028-July 31, 2029, and August 1, 2029 - July 31, 2030.

The Quarterly Report encompasses programmatic progress achieved during the specified quarter. The information from these Quarterly Reports will be used to progressively build and update the Annual Report throughout each budget period. The general reporting periods are as follows: August 1- October 30, October 31-January 30, and January 31- April 30. Please refer to [Appendix A](#) for a comprehensive view of all reporting periods and deadlines.

Figure 1 below specifies each reporting element States are responsible for, detailing both annual and quarterly submission requirements:

Figure 1: Reporting Elements

Reporting Element	Annual	Quarterly
Initiative Progress Narrative	Required	Optional
Initiative Number of People Served	Required	Optional
Initiative Metrics	Required	Optional

Initiative Checkpoints	Required	Required
State Policy Action Commitments	Required	Required
Obligated and Spent Funds	Required	Required
Success Stories and Highlights	Required	Optional
Sustainability Planning	Required	Optional
Definition of Rural Area	Required only in Annual Report #1	N/A

Final Report

At the conclusion of the five-year period of performance, States are required to submit a single **Final Report** capturing all cumulative activities. More information regarding the Final Report will be disseminated closer to the respective reporting period.

V. Reporting Elements

Throughout these progress reports, States will document their progress across several key areas established by CMS. Although not all reported information is used for scoring, every element is essential for comprehensive oversight and support. The following components collectively demonstrate the operational progress, financial stewardship, and impact of the RHT Program.

Data elements that determine scoring are the State's initiative checkpoints and progress towards State Policy Action Commitments. Descriptions for each data element are provided below:

- **Initiative Progress Narrative:** Progress updates on milestones and the implementation of initiatives.
- **Initiative People Served:** Quantitative context to initiatives and the number of people served.

- **Initiative Metrics:** Quantitative updates on the metrics the State is tracking as part of its approved work plan.
- **Initiative Checkpoints:** Context on the State's advancement of initiatives.
- **State Policy Actions Commitments:** Progress updates on the State's proposed policy actions as detailed in the approved application.
- **Obligated and Spent Funds:** Fiscal context on the State's RHT Program expenditures and subrecipients.
- **Success Stories and Highlights:** Success stories achieved through the State's initiatives that showcase real-world impact of the RHT Program.
- **Sustainability Planning:** Updates on how the State plans to sustain successful initiatives after the RHT Program funding ends (after FY31).
- **Definition of Rural Area:** Definition of 'rural area' that the State used to determine whether subrecipients were considered to be rural (*only for Annual Report 1*).

VI. Completing Reports

The following section details the submission procedures for the RHT Program's reporting cycle. Following the submission of the initial Annual Report, all subsequent reporting will transition to a web-based application housed within the Medicaid Data Collection Tool (MDCT), referred to as the MDCT RHTP platform. This platform serves as a centralized workspace for States to submit updates, upload evidentiary documentation, and communicate with their POs. The first submission utilizing this new system will be the first Quarterly Report due on November 30th, 2026.¹ Detailed instructions for navigating and completing reports via the MDCT RHTP platform are outlined in [Section VIII. Subsequent Reporting – MDCT RHTP Platform](#).

Note: Details pertaining to the initial Excel-based Annual Report have been relocated to the Appendix for historical reference.

¹ The due date for Quarterly Report #1 was extended to November 30th, 2026 due to the previously communicated due date, November 29th, falling on a weekend. Please note the extended deadline when leveraging previous communications.

VIII. MDCT RHTP Platform Overview & Guidance

The following guidelines outline how to complete programmatic Annual and Quarterly Reports using the MDCT RHTP platform. It details instructions for system data entry, requirements for uploading supporting documentation, and conducting reviews with POs.

Note: This platform transition alters the data collection format only; it does not change the scope, requirements, or nature of the information collected from States. Training and technical assistance covering system access, user roles, and platform navigation will be provided prior to launch.

For continuity and ease of use, data from initial Annual Report submissions will be pre-populated within the MDCT RHTP platform, establishing the baseline reference for all subsequent reporting cycles. States will use the web-based system to input all reporting requirements directly. This includes initiative and checkpoint progress updates, quantitative metrics, State Policy Action Commitment, success stories, and long-term sustainability plans. Note that Obligated and Spent Funds reporting will continue to be completed using the designated reporting Excel template and uploaded to the MDCT RHTP platform as an attachment.

Throughout each reporting period, States should continue to collaborate closely with their POs to review reported progress, examine supporting evidentiary documentation, and evaluate milestone and checkpoint achievements.

For any technical questions regarding access, functionality, or system issues with the MDCT RHTP application, please reach out to the MDCT Help Desk at MDCT_help@cms.hhs.gov. The help desk hours are 9am–5pm ET, Monday-Friday (excluding holidays).

Instructions

The reporting interface is structured into seven sequential sections designed for State progress reporting and data entry:

1. General Information

- 2. Initiatives**
- 3. Initiative Attachments**
- 4. State Policy Action Commitments**
- 5. Obligated and Spent Funds**
- 6. Sustainability and Highlights**
- 7. Review & Submit**

Please note that the MDCT RHTP system displays below utilize sample data for demonstration purposes only. Additionally, the displays below all reflect the Annual Report view in the MDCT RHTP platform.

1. General Information

As shown in Figure 2 below, general information should be entered for key personnel and points of contact for any inquiries related to the report.

Figure 2: General Information

RHTP

General Information

Initiatives

Initiative Attachments

State Policy Action Commitments

Obligated and Spent Funds

Sustainability and Highlights

Review & Submit

General Information

Authorized Organizational Representative (AOR) Required
 Enter the name for CMS to contact with questions about this report.

Authorized Organizational Representative (AOR) Contact email Required
 Enter the email address for the AOR.

Principal Investigator or Program Director Required
 Enter the name for CMS to contact with questions about this report.

Principal Investigator or Program Director Contact email Required
 Enter the email address for the PI/PD.

Point of Contact (POC) listed in NoA (optional)
 Optionally added and approved by CMS.

Point of Contact (POC) email (optional)
 Enter the email address for the Additional Point of Contact listed in the NoA.

Continue →

Figure 3 below displays the relevant data fields on the General Information page, followed by instructions and example values for completing each field. ***Please note, the examples are notional and should only be used as a guide.***

Figure 3: General Information Instructions

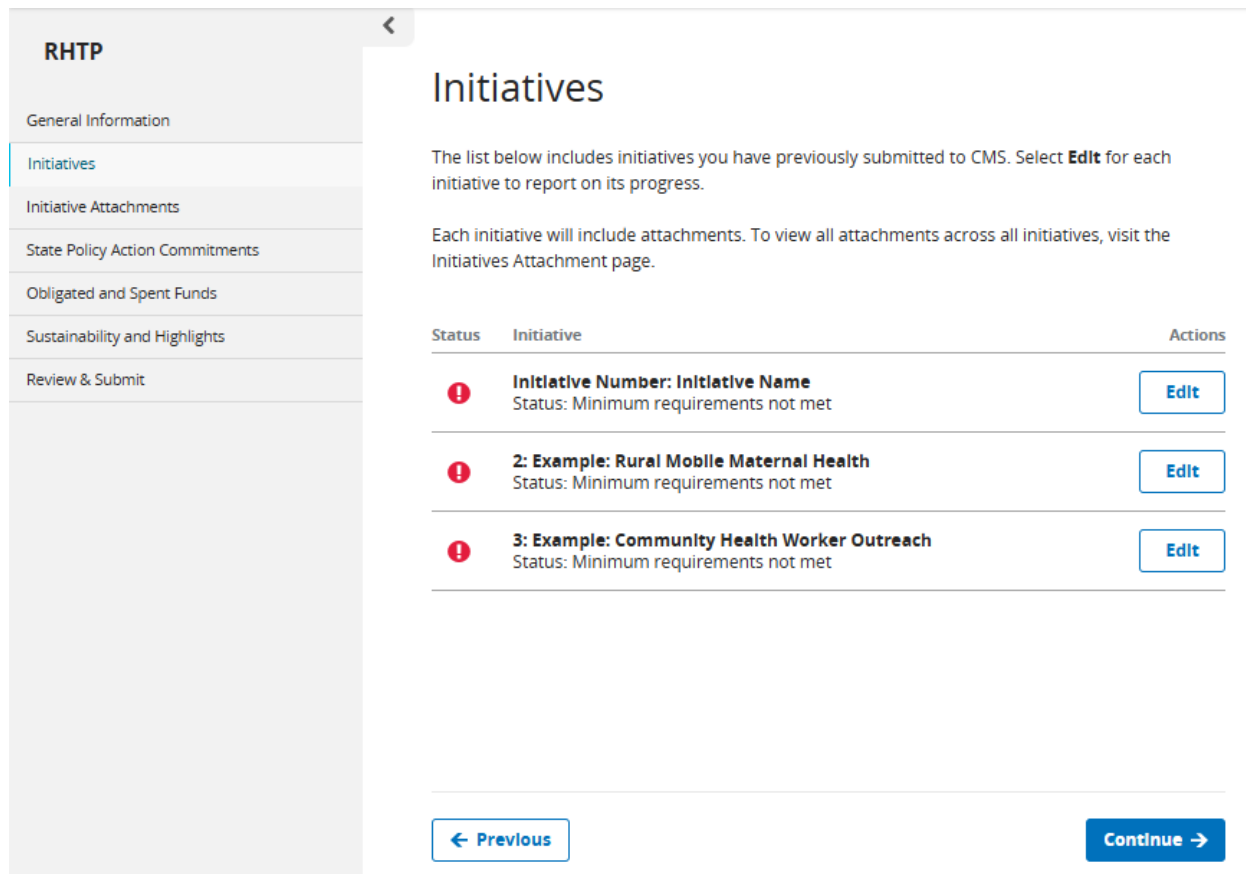
Data Field	Instructions	Example
Authorized Organizational Representative (AOR)	Enter person's name or a position title for CMS to contact with questions about this report.	<i>Jane Smith</i>
Authorized Organizational	A department or program-wide email address is	<i>JaneSmith@state.gov</i>

Data Field	Instructions	Example
Representative (AOR) Contact email	acceptable.	
Principle Investigator or Program Director	Enter person's name or a position title for CMS to contact with questions about this report.	<i>John Williams</i>
Principle Investigator or Program Director Contact email	A department or program-wide email address is acceptable.	<i>JohnWilliams@state.gov</i>
Point of Contact (POC) listed in the NoA (Optional)	Optionally added and approved by CMS.	<i>Jane Doe</i>
Point of Contact email (Optional)	Enter the email address for the additional POC listed in the NoA.	<i>Jane Doe@state.gov</i>

2. Initiatives

This section is pre-populated based on State-reported information from the initial Annual Report, displaying each initiative's name and number. To submit updates for the current reporting period, select **"Edit"** next to the corresponding Initiative as shown below in Figure 4.

Figure 4: Initiatives



RHTP

- General Information
- Initiatives**
- Initiative Attachments
- State Policy Action Commitments
- Obligated and Spent Funds
- Sustainability and Highlights
- Review & Submit

Initiatives

The list below includes initiatives you have previously submitted to CMS. Select **Edit** for each initiative to report on its progress.

Each initiative will include attachments. To view all attachments across all initiatives, visit the Initiatives Attachment page.

Status	Initiative	Actions
!	Initiative Number: Initiative Name Status: Minimum requirements not met	Edit
!	2: Example: Rural Mobile Maternal Health Status: Minimum requirements not met	Edit
!	3: Example: Community Health Worker Outreach Status: Minimum requirements not met	Edit

[← Previous](#)
[Continue →](#)

Figures 5, 6, 7, and 8 below display the Initiatives reporting section, including fields for entering a narrative summary, updating performance metrics, and managing checkpoint status and attachments.

Figure 5 below displays the fields where States enter their narrative summary and the number of people served. Both fields are required for the Annual Report and optional for the Quarterly Report.

The “Number of People Served” field is included to better understand the number of individuals who have benefited from the RHT Program funds during the



reporting period. This number is separate from metrics and does not impact annual rescoring. This element is intended to help demonstrate the anticipated reach and impact of the initiative and, over time, help tell the story of how RHT Program investments are affecting rural communities. For purposes of this reporting field, “benefited” should not be interpreted as a broader or separate category from “served.” Rather, the terms are being used synonymously for purposes of the existing Number of People Served field.

Figure 5: Initiative Number/Name

Initiative Number: Initiative Name

Use this page to provide information about your initiative and the metrics you use to measure its progress. Then, update any checkpoints for review.

What is included in Annual Reporting vs Quarterly Reporting? —

Annual Reporting Data should include:

- Initiative Progress Narrative
- Initiative People Served
- Initiative Metrics
- Initiative Checkpoints

Quarterly Reporting should include any available updates to:

- Initiative Checkpoints

Quarterly Reporting may also include:

- Initiative Progress Narrative (Optional)
- Initiative People Served (Optional)
- Initiative Metrics (Optional)

Narrative (optional)

Narrative is optional for quarterly reporting. Limit responses to 2,000 characters, or approximately 250–350 words.

[Initiative Progress Narrative Guidance](#)

2000 characters allowed

Number of people served (optional)

Number of People Served is only reported annually. If this number is not applicable for the initiative, enter N/A.

Invalid entries will automatically clear.

[Reporting Guidelines](#)

Figure 6: Tracking Initiative Performance Metrics

Track Initiative Performance Metrics Required

The metrics for each initiative will be **pre-populated** based on the information previously provided. Metric values are only required to be reported annually. Any value reported on a Quarterly Report will be pre-populated but editable for the remainder of the Program Year. Contact your Project Officer if the metrics listed are incorrect.

Additionally, **"As of Date"** is NOT today's date. This must be the historical date on which the metric value was either extracted from a database or calculated by the State. This value should not be updated until the metric value is updated or the previous value is confirmed by subsequent analysis. Current Values: Enter a number, currency (e.g., \$100), percentage (e.g., 50%), or N/A if no data. **Invalid entries will automatically clear.**

#	Status	Metric	Target	Previous annual value	Current value	As of Date MM/DD/YYYY
1	Active	Metric Name (ex. Rural provider retention rate)	90%			03/24/2026
2	Active	Metric Name (ex. Number of rural providers with loan repayments)	100			04/02/2026

Checkpoints

Checkpoints are grouped into the stages listed below. On this page, you can take the following actions on any checkpoint unless otherwise noted.

- Add or remove attachments of evidentiary documentation.
- Select the checkbox when the checkpoint is complete and ready for CMS review.
- Leave comments for CMS, or respond to comments from them by attachment.

[Understanding Your Initiative Attachments](#)

Understanding initiative statuses



Within the Metrics table in Figure 6 above, the metrics values for each initiative will be pre-populated starting Quarterly Report #1 based on information previously provided. The metric values will carry over automatically from quarter to quarter, allowing for modifications as needed. States are only required to report metric values annually. Metric reporting fields can be updated throughout the year until each Annual Report is due. States should reach out to their PO if they have questions about their pre-populated metrics. CMS is working to get the target values prepopulated in MDCT.

Figures 7 and 8 below display the checkpoint stages page within MDCT, where States can upload attachments and mark these as ready for review by CMS for POs to iteratively review and provide feedback as States progress. States can attach evidentiary documentation on this page by selecting **“Upload Attachments,”** or on the following page, Initiative Attachments (below).

Figure 7: Checkpoint Stages 0 - 2

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
0.1	Establish governance	☐			
0.2	Submit project plan to CMS	☐			

Stage 1: Project Preparation

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
1.1	CMS approval of project plan	☐	Not applicable		
1.2	Launch initiative	☐			

Stage 2: Early Implementation

+ Upload attachments

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
2.1	Continue initiative activities	☐			
2.2	Achieve at least one milestone	☐			
2.3	Establish metric reporting methodology	☐			
2.4	Submit updated project plan to CMS	☐			

Figure 8: Checkpoint Stages 3-5

Stage 3: Midway Implementation

[+ Upload attachments](#)

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
3.1	CMS approval of updated project plan	☐	Not applicable		
3.2	Complete Q2 2028 milestones	☐			
3.3	Report initial metric progress to CMS	☐			

Stage 4: Preparing for Completion

[+ Upload attachments](#)

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
4.1	Share final deliverables plan with CMS	☐	Not applicable		
4.2	CMS approval of final deliverables plan	☐			
4.3	Complete post-program planning	☐			

Stage 5: Full Implementation

[+ Upload attachments](#)

#	Checkpoint	Ready for CMS Review	Attachments	Status	Actions
5.1	Submit final deliverables for CMS	☐			
5.2	Complete all 2030 milestones	☐			
5.3	Report updated metric progress to CMS	☐			

[Back to Initiatives](#)

Figure 9 below includes the relevant data fields in the Initiatives section, instructions for how to fill out each data field, and an example data value for each field. ***Please note, the examples are notional and should only be used as a guide.***

Figure 9: Initiative Progress Instructions

Data Field	Instructions	Example
Narrative	Provide a concise update on the progress of each initiative during the reporting period. Responses should focus on key activities completed, milestones reached, challenges encountered, and any notable outcomes or impacts to date. This section is intended for progress reporting purposes only and should not repeat the full project narrative from the NCC Kit. Please focus on recent initiative progress and avoid including broad background information unless it is necessary for context. States are encouraged to include any relevant updates that may be important for CMS to understand the status, implementation progress, or emerging results of the initiative. Note: Initiative Progress Narrative is only required to be reported in the Annual Report and is optional for Quarterly Reports. Please limit responses to 2,000 characters, or approximately 250–350	<i>Over the past year, we deployed five fully equipped Mobile Maternity Clinics across 12 of our most underserved counties, effectively eliminating geographic barriers to care. This proactive approach has enabled us to deliver over 2,500 prenatal and postpartum visits directly to expectant mothers, driving a 40% increase in first-trimester care initiation. By integrating satellite-enabled telehealth for high-risk specialist consultations and employing local community health workers to build trust, we have not only expanded essential access but fundamentally transformed the maternal health infrastructure for our rural populations.</i>

Data Field	Instructions	Example
Number of People Served	words.	
	Provide best estimate of the number of individuals who have benefited from RHT Program funds during the reporting period. Estimates should be reasonable, supported by available data, and reflect the scope and reach of the initiative. The number of people served should report the current period reach, not future projections. If States have the number of people who have been served already, then they should report the number of people who have been served already for the initiative by the end of the reporting period. If no individuals were served/benefitted during the reporting period, report 0 rather than a projection of future reach. A reported value of zero (0) for Year 1 is fully anticipated and acceptable, particularly where initiatives remain in Stage 0 – Planning or Stage 1 – Project Preparation. N/A is not an acceptable response as each initiative is expected to serve or benefit individuals at some point during the RHT Program. For system-based initiatives that do not provide direct services (e.g., IT systems, Health Information Exchanges), States may define the number of people served more broadly. For example: • For health system-level initiatives, the number served may reflect the total	500

Data Field	Instructions	Example
	population served by the system. - For statewide systems (e.g., HIEs), the number served may reflect the number of patients with data in the system or the total number of state residents. - These estimates do not need to be de-duplicated and do not need to be limited to rural populations if the initiative has a broader reach. - States should aim to provide the most accurate and justifiable estimate possible and may include brief context in the narrative section if helpful for CMS's understanding. Note: Number of People Served is only required to be reported in the Annual Report and is optional for Quarterly Reports.	
Metric	The metric for each initiative will be pre-populated based on the information previously submitted. Note: Initiative Metrics are only required to be reported in the Annual Report and are optional for Quarterly Reports.	
Status	Metric status will be displayed with the following potential statuses: - Active - Abandoned This field is read-only for States and can only be updated by CMS.	<i>Active</i>
Target	Target values will be pre-populated² and will be updated based on States' information from previous reports. This field is read-only for States and can only be updated by CMS.	90

² CMS is working to get target values prepopulated in MDCT as soon as possible.

Data Field	Instructions	Example
Previous Annual Value	Previous Annual Report values that States have reported will be displayed. This field is read-only for States and can only be updated by CMS.	5
Current Value	Enter the current value of each metric relevant to the reporting period. Note: The Current Value field is only required to be reported in the Annual Report and is optional for Quarterly Reports.	90
As of Date (MM/DD/YYYY)	Enter the 'as of date' of the metric. The "As of Date" column should be populated to reflect the date on which the State measured or analyzed the data being reported for the applicable reporting period. Examples may include: 1) The date a contractor reported metric values to the State 2) The date a State pulled data from their data systems	04/19/2026

3. Initiative Attachments

This section prepopulates the attachments, initiatives, checkpoints, and statuses previously entered on the Initiatives page. Depending on the attachment's status, States may add, edit, or delete these files, as well as add or respond to comments from their POs.

If an attachment applies to multiple initiatives (such as a single project plan or metric methodology file), States can upload it once to the general Initiative Attachments page. This page accepts both informational attachments and those intended for rescoring. Both informational attachments (attachments for reference purposes only) and attachments intended for rescoring may be submitted on this page shown below (Figure 10).

Figure 10: Initiative Attachments

RHTP

- General Information
- Initiatives
- Initiative Attachments**
- State Policy Action Commitments
- Obligated and Spent Funds
- Sustainability and Highlights
- Review & Submit

Initiative Attachments

The table below lists all attachments added to any initiatives. From here you can:

- Add new attachments
- Edit or delete existing attachments dependent on their status
- Leave or respond to comments on any attachment
- Utilize the comment icon to add new comments and adjust statuses where appropriate by attachment

Understanding initiative statuses +

+ Add Attachment

Attachment name ↓	Initiatives ↓	Checkpoint ↓	Status ↓	Actions
StateX Init 1 Checkpoint 0.1.docx	#Initiative Number	0.1 Establish governance	Pending Review	Manage Comment

← Previous

Continue →

The page also includes guidance defining the various Attachment Statuses and review stages, including:

- **Pending Review (System Automated):** This status is applied automatically when a new attachment is added. It lets CMS know the document is ready to be reviewed. While in this status, if no comments have been made, full editing power is retained by the State, and the file can be deleted or swapped freely.
- **Needs Revision (CMS Project Officer):** A reviewer selects this status when a document requires updates or corrective context before it can be formally approved. CMS uses this status when a document needs updates or corrections

from the State. This status may be utilized during the iterative checkpoint review process that may take place prior to a quarterly/annual reporting deadline. Please review CMS feedback and upload a revised version as needed.

- o Example A: The PO may provide feedback via comment within the MDCT RHTP platform to the State on a piece of evidence submitted for a checkpoint that needs additional information to be considered "Accepted."*
- **Informational (CMS or State User):** CMS or the State may use this status for documents that are for reference only. These documents are not used for scoring. Once selected, the file is locked from deletion, so it remains a permanent part of a State's record-keeping history.
 - o Example A: A State may use this status to classify a PO's email approval as "informational only."*
 - o Example B: A State may use this status to maintain an updated Project Plan throughout the program.*
- **Archived (CMS or State User):** This status allows hiding older, outdated file versions from the active workspace view without purging them from the historical audit trail. CMS or the State may use this status for documents that are no longer part of the active submission but should be kept for records. Archived documents will not carry over from one report to the next.
 - o Example A: A State may classify a previously uploaded attachment as 'archived' if they are replacing it with a more recent piece of evidence.*
 - o Example B: The PO may determine a piece of evidence does not meet the checkpoint criteria (aka is "rejected") so the evidence should be moved to 'archived' status.*
- **"Locked for Scoring (CMS Admin Only):** Assigned by CMS when a record is undergoing formal review and scoring; content is locked in a read-only state and cannot be modified or deleted. States have been advised throughout the reporting process to work with their PO in advance of reporting deadlines to resolve questions and reach alignment between the State and PO. 'Locked for Scoring' is ideally the status after the State and PO have aligned with what is "acceptable."

Relevant Initiative Actions

1. Uploading an attachment

To upload evidentiary documentation, select “+ **Add Attachment**” located below the ‘Understanding Initiative Statuses’ section as illustrated in Figure 9 above. A pop-up window will display checkboxes to designate which initiatives the file applies to. Below these checkboxes, use the dropdown menu to select the corresponding stage/checkpoint, as displayed in Figure 11 below.

*Figure 11: Upload Initiative Attachments
Dropdown Menu*

Which initiative does this attachment apply to?

☒ Initiative Number: Initiative Name

Which stage/checkpoint does this attachment apply to?

0.1 Establish governance

- Select an option -

☒ 0.1 Establish governance

0.2 Submit project plan to CMS

1.2 Launch initiative

2.1 Continue initiative activities

2.2 Achieve at least one milestone

2.3 Establish metric reporting methodology

2.4 Submit updated project plan to CMS

After selecting the corresponding initiative and checkpoint, if applicable, select a file or files to upload as evidentiary documentation for the corresponding checkpoint, as shown in Figure 12 below.

Figure 12: Upload Initiative Attachments

Upload Initiative Attachments ✕ [Close](#)

Which initiative does this attachment apply to?

☒ Initiative Number: Initiative Name

Which stage/checkpoint does this attachment apply to?

Select a file or files to upload

Attaching to: Initiatives(s): Initiative Number; 0.1 Establish governance

Drag files here or [Choose from folder](#)

2. Adding a comment to an attachment

If a State needs to communicate with their PO regarding a specific file, they can utilize the optional commenting feature. On the Initiative Attachments dashboard, select **“Comment”** next to the relevant attachment to enter and submit remarks, shown in Figure 13 below. *Figure 13: Add Comments to Attachments*

Attachment name ↑	Initiatives ↑	Checkpoint ↑	Status ↑	Actions
StateX Init 1 Checkpoint 0.1.docx	#Initiative Number	0.1 Establish governance	Pending Review	Manage Comment

Once the comment feature is selected, States will be directed to the screen below, in Figure 14, where they can enter comments. States should use this function to share evidence with the PO for review and feedback. This step is optional, not an official submission, and only for the purposes of iterating with the PO before later

selecting “Submit RHTP Report.” To allow ample time for review and feedback, States are advised to work with their PO in advance of the deadline to resolve questions and reach alignment on the progress they intend to report and ensure what the State ultimately submits is acceptable.

Figure 14: Add Comments to Attachment

Use the field below to leave comments for your CMS Project Officer.

Attachment: StateX_Init_1_Checkpoint_0.1.docx

Comment

↗

[Add comment](#)

3. Editing attachments

To update attachment files or the initiative(s) or checkpoint(s) the attachment applies to, select “**Manage**” in the Actions column. States can select or deselect the initiatives to indicate where the attachment applies. Selecting “**Manage**” from the Actions column will list the applicable initiatives. From this interface, States have the option to modify their status. Actions can also be taken to delete the file or align it to the respective checkpoint as illustrated by Figures 15-17 below.

Manage Attachments

Figure 15: Managing Attachments

Status

Use the field below to manage the attachment status. Certain statuses restrict the ability to modify or remove files. View “Understanding initiatives status” instructions on previous page for more detailed definitions:

- **Needs Revision, Informational, Archived:** The attachment will no longer be able to be deleted.
- **Locked for Scoring:** The attachment is locked and cannot be edited or deleted.

Current status: Pending Review

Status (optional)

Pending Review

✓ Pending Review

Informational

Archived

Figure 16 below displays the screen on which States can select which initiative and stage/checkpoint their attachment applies to.

Adjust initiatives and stage/checkpoint

Figure 16: Managing Attachments (Continued)

update the file's checkpoint across all linked initiatives.

- Why can't I replace files? Federal record-keeping mandates require an unedited audit trail of all uploaded evidence.
- What should I do instead? If your file has no comments and is in "Pending Review," you can delete it entirely from the system below. If deletion is locked, change the status above to Archived, then upload your new document as a fresh attachment.

Which initiative does this attachment apply to?

☒ Initiative Number: Initiative Name

Which stage/checkpoint does this attachment apply to?

0.1 Establish governance
^

- Select an option -

✓ 0.1 Establish governance

0.2 Submit project plan to CMS

1.2 Launch initiative

2.1 Continue initiative activities

2.2 Achieve at least one milestone

2.3 Establish metric reporting methodology

2.4 Submit updated project plan to CMS

Delete attachment

Warning

Figure 17: Deleting Attachments

an initiatives, stages, and checkpoints and will be removed from the system.

Delete attachment

Save changes

Figure 17 above displays the warning States will receive upon choosing to delete an attachment. States' ability to delete an attachment is dependent on the attachment's status. An attachment cannot be deleted if it is locked for scoring or in "Needs Revision, Informational, or Archived." An erroneous file may only be deleted while it is in 'Pending Review' status and has no associated comments. Once an attachment has been reviewed, modified, or commented on, deletion is disabled and the file status must be designated as "Archived".

4. Viewing an attachment's comments

In the Actions column, as shown in Figure 18, select **"Comment"** to view a historical log of comments associated with the selected attachment.

Figure 18: Viewing Attachment Comments

Add comment to attachment [✕ Close](#)

Use the field below to leave comments for your CMS Project Officer.

Attachment: StateX_Init_1_Checkpoint_0.1.docx

Comment

[Add comment](#)

Previous Comments

Adam Admins 9/22/2026, 2:49:38 PM
Replying to State Comment: Ready for Review

Zeez State 9/22/2026, 2:44:54 PM
Comment

4. State Policy Action Commitments

The page below, as displayed in Figure 19, lists any State Policy Action Commitments as outlined in the State’s approved application. Each commitment can be expanded to update its status, evidence, and comments for the current reporting period.

Only official legislation links and attachments are recognized as valid evidence to demonstrate progress toward the fulfillment of a policy commitment. Promotional content, such as press releases and marketing links, will not be accepted as sufficient evidence. The “CMS Status Evaluation” field will be prepopulated with CMS’ evaluation of that specific State Policy Action Commitment

from the initial Annual Report. States cannot edit this field.

Figure 19: State Policy Action Commitments

RHTP

General Information

Initiatives

Initiative Attachments

State Policy Action Commitments

Obligated and Spent Funds

Sustainability and Highlights

Review & Submit

State Policy Action Commitments

The commitments listed here are based on those identified in a State's approved application. Expand each one to update its status, evidence, and comments.

[Expand all](#) [Collapse all](#)

D.2. Physician Assistant - PA Compact

Current Status

50 Points: Legislation filed to become a PA Compa... ▾

CMS Status Evaluation

50 Points: Legislation filed to become a PA Compa... ▾

Supporting Evidence

States should only submit legislation links and attachments as acceptable evidence for their State policy action commitments. CMS will not accept press releases or promotional links/attachments as substantial evidence.

Links (optional)

Add URL to exact policy.

+ Add link

Attachments (optional)

Upload state legislation.

+ Upload Attachments

Notes (optional)

Include any additional information about this policy commitment that you would like CMS to be aware of.

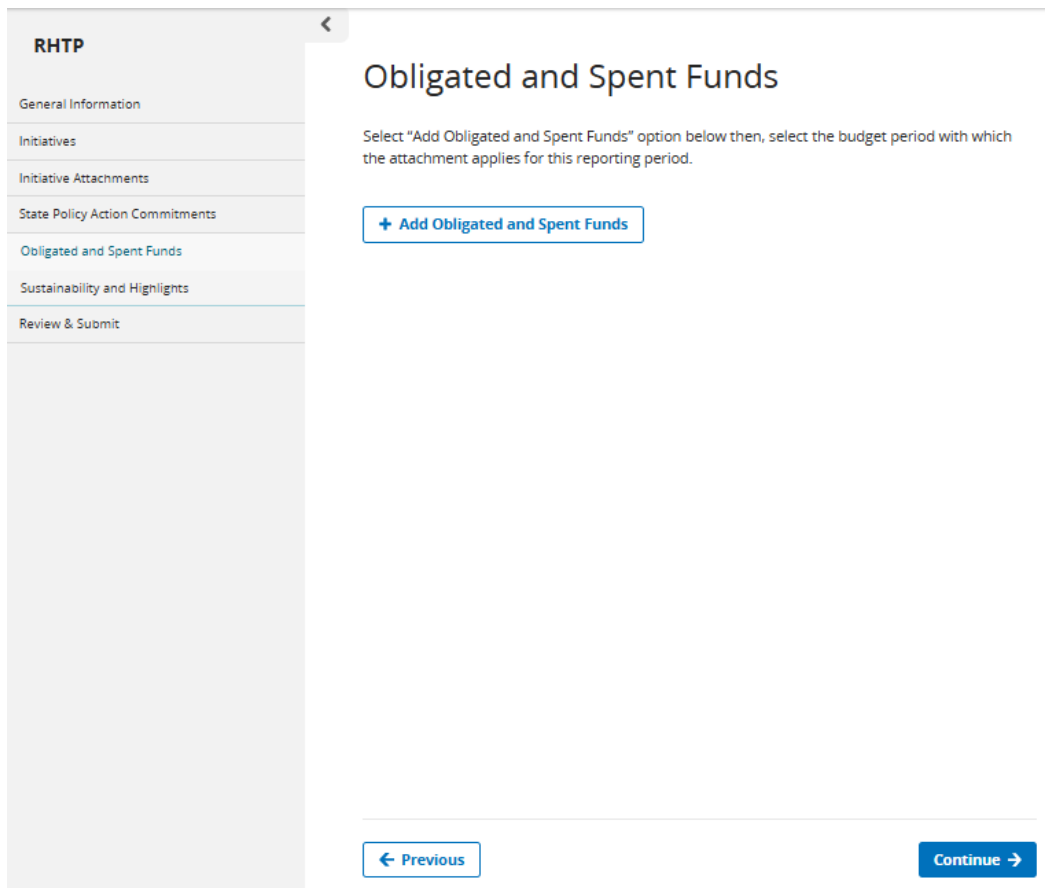
← Previous

Continue →

Figure 20 below outlines the relevant data fields on the State Policy Action Commitments page, along with instructions for completing each field and illustrative example values, where applicable. **Please note, the examples are notional and should only be used as a guide.**

Figure 20: State Policy Action Commitments Page Instructions

Data Field	Instructions	Example
Current Status	Select from the dropdown the corresponding status/updates for each commitment during the reporting period. Please note that each dropdown menu is specific to the selected technical score factor (D.2., D.3., etc.).	<i>50 Points: Legislation filed to become a PA Compact (Technical Score Factor D.2).</i>
Supporting Evidence: Links	Provide link(s) to State legislation that validates the current status of the State Policy Action Commitment.	<i>Link to the exact policy.</i>
Supporting Evidence: Attachments	Upload State legislation attachment(s) that validates the status of the State Policy Action Commitment.	<i>State Legislation attachment and/or URL.</i>
Notes and Comments	Provide any additional context or details around the status of the State Policy Action Commitments, if needed. If possible, in the notes section, please highlight the exact section of the legislation that corresponds to the State Policy Action Commitment status change.	<i>The bill was signed into law on July 15, 2026, and becomes effective January 1, 2027.</i>



RHTP

- General Information
- Initiatives
- Initiative Attachments
- State Policy Action Commitments
- Obligated and Spent Funds**
- Sustainability and Highlights
- Review & Submit

Obligated and Spent Funds

Select "Add Obligated and Spent Funds" option below then, select the budget period with which the attachment applies for this reporting period.

[+ Add Obligated and Spent Funds](#)

[← Previous](#) [Continue →](#)

5. Obligated and Spent Funds Reporting

Refer to the **Obligated and Spent Funds Reporting Guide** for detailed instructions on completing these forms. Complete the Obligated and Spent Funds Excel template and upload the file directly by selecting **"+ Add Obligated and Spent Funds"**, as demonstrated in Figure 21 below.

Figure 21: Obligated and Spent Funds

Figures 22 and 23 below display the interface States can use to upload their Excel template(s) for the respective reporting period and select the relevant budget period for that specific file.

Figure 22: Obligated and Spent Funds File Upload

Add Obligated and Spent Funds

[✕ Close](#)

Which budget period does this document apply to?

Budget Period 1

Select a file or files to upload

Attaching to: Budget Period 1

Figure 23: Add Obligated and Spent Funds

Drag files here or [Choose from folder](#)

Which budget period does this document apply to?

- Select an option -

✓ - Select an option -

Budget Period 1

Budget Period 2

Budget Period 3

Budget Period 4

Budget Period 5

6. Sustainability & Highlights

On this page, Sustainability and Highlights, qualitative updates on program successes and long-term sustainability planning may be shared. Note that Sustainability and Highlights submissions are open quarterly but are only required annually. Figure 24 displays the corresponding data entry fields from the Annual

Figure 24: Sustainability and Highlights

Report view.

Figure 25 below displays where States can enter updates pertaining to their sustainability plans and supporting documentation.

Figure 25: Sustainability Planning

RHTP

General Information

Initiatives

Initiative Attachments

State Policy Action Commitments

Obligated and Spent Funds

Sustainability and Highlights

Review & Submit

Sustainability and Highlights

Success Stories

Share success stories that you want to highlight as result of your State's implementation of the RHT Program. **Required**

Limit responses to 3,000 characters, approximately 400–500 words.

3000 characters allowed

Success Stories: Supporting Evidence

Upload supporting documentation (e.g., press releases illustrating success stories).

Links (optional)
Add URLs to supporting documentation.

+ Add link

Attachments (optional)
Upload supporting documentation.

+ Upload Attachments

Sustainability Planning

What are the most significant updates or changes to your sustainability plan based on the past year's experiences, successes, and challenges? Please include any activities to establish and begin operation of a state-specific Rural Health Sustainability Fund and to raise capital from private and public sources other than the RHTP for long-term investment in activities authorized under permissible uses A through K in the state, including the amount of any RHTP funds used for that purpose.

(Optional)

Limit responses to 3,000 characters, approximately 400–500 words.

3000 characters allowed

Sustainability Planning: Supporting Evidence

Upload supporting documentation.

Figure 26 below outlines the relevant data fields of the Sustainability and Highlights page, along with instructions for completing each field and illustrative example values, where applicable. ***Please note, the examples are notional and should only be used as a guide.***

Figure 26: Sustainability and Highlights Page Instructions

Data Field	Instructions	Example
Success Stories	Share success stories that you want to highlight as a result of your State's implementation of the RHT Program. Please limit responses to 3,000 characters, approximately 400–500 words.	<i>In a rural community with no local obstetrician, our new mobile health clinic (Initiative 1) provided prenatal care to 45 expectant mothers. One patient was able to receive all her prenatal checkups locally, avoiding a 3-hour round trip to the nearest city. This consistent care led to the early detection of a complication, ensuring a healthy delivery for both mother and baby.</i>
Sustainability Planning	What are the most significant updates or changes to your	<i>Based on the high demand for the mobile clinic, we have initiated</i>

sustainability plan based on the past year's experiences, successes, and challenges?

Please include any activities to establish and begin operation of a state-specific Rural Health Sustainability Fund and to raise capital from private and public sources other than the RHTP for long-term investment in activities authorized under permissible uses A through K in the state, including the amount of any RHTP funds used for that purpose.

discussions with the State Medicaid agency to establish a permanent reimbursement pathway for mobile health services. Furthermore, we have secured a partnership with the State University's nursing school to create a clinical rotation program on the mobile unit, which will provide a sustainable staffing pipeline and reduce future personnel costs.

Please limit responses to 3,000 characters, approximately 400–500 words.

7. Review & Submit

On this final page, as shown below in Figure 27, all previously entered report information is displayed for review prior to submission. Carefully review all components to ensure accuracy and completeness. A warning label will indicate if errors or missing required responses have been detected.

Figure 27: Review and Submission

RHTP

General Information
Initiatives
Initiative Attachments
State Policy Action Commitments
Obligated and Spent Funds
Sustainability and Highlights
Review & Submit


Your form is not ready for submission
Some sections of the RHTP Report have errors or are missing required responses.

Review & Submit

Request PO Feedback
Highly Optional. This does NOT lock your report. Use this strictly if you want to flag a section for early alignment with your PO via the platform similar to email correspondence.

[Request PO Feedback](#)

Ready to Submit?
Double check that everything in your RHTP Report is accurate. To make edits to your report after submitting, contact your CMS RHTP Lead to unlock your report.
[Status Definitions](#)

Section	Status	
General Information	 Not started	Edit
Initiatives	 Complete	Edit
Initiative Attachments		Edit
State Policy Action Commitments		Edit
Obligated and Spent Funds	 Not started	Edit
Sustainability and Highlights	 Not started	Edit

Post Submission Activities
After submitting your report, download the PDF copy of the report and the ZIP file of attachments, then upload them to Grant Solutions for official record-keeping.

[Review PDF](#)
[ZIP Attachment Files](#)

[Submit RHTP Report](#)

Two submission actions are available within the system:

1. Request PO Feedback: Selection of this option, as displayed in Figure 28 below, permits a draft report to be shared with the PO for review and feedback. States should use this function to share evidence with the PO for

review and feedback. This step is optional, not an official submission, and only for the purposes of iterating with the PO before later selecting “Submit RHTP Report.” To allow ample time for review and feedback, States are advised to work with their PO in advance of the deadline to resolve questions and reach alignment on the progress they intend to report and ensure what the State ultimately submits is acceptable. Optional comments may be included to communicate specific elements needing attention. Editing capabilities remain active while in review. States will then be notified once their PO has completed the feedback request.

- Example A: “Hello PO, the evidence for the B.4. State Policy Action is ready for preliminary review, please let us know if you have any questions.”
- Example B: “Hello PO, would you mind taking a look at our evidence for Checkpoints 2.4, 3.2, and 3.3 as well as State Policy Actions B.4 and C.3. Let us know if you have any feedback or if it’s ready to submit.”

Figure 28: Request PO Feedback

Request PO Feedback
[✕ Close](#)

Add a comment below to detail to the CMS PO what section of the report is ready for feedback. Once you select Request PO Feedback, an email notification will be sent to your PO's. You can continue to edit your report.

Add Comment

Request PO Feedback
[Cancel](#)

2. Submit RHTP Reports

- Upon formal submission of the report, States should check that all data entries within the report are complete and accurate. On the Review and Submit page, the Status column displays the completion state of each section. To review specific criteria and explanations for each designation, select “Status Definitions,” as displayed in Figure 29 below.

Figure 29: Status Definitions

Status Definitions
✕ [Close](#)

- **Complete:** Minimum requirements met.
- **Incomplete:** Minimum requirements not met; One or more required fields for this reporting period are missing or empty. Please fill them out to unlock report submission.
- **No Status:** Section has no required fields.

- b. Following the review and verification of all required data, States may proceed to formally submit the completed report.
- c. Upon selecting **“Submit RHTP Report”** States will be prompted with a confirmation window to verify their submission. Once confirmed, the report transitions to a locked, read-only state and cannot be modified for the remainder of the reporting period. **Beginning with the first quarterly progress report, all Annual and Quarterly Reports must be formally submitted via this action in MDCT prior to the reporting deadline.**

Figure 30: Submission Confirmation

Are you sure you want to submit?
✕ [Close](#)

You won't be able to make edits after submitting unless you send a request to CMS to unlock your submission. After review, your CMS RHTP Lead will contact you if there are corrections to be made, and your report status will change to “In revision” in the RHTP Report dashboard.

Submit RHTP Report
[Cancel](#)

After submission via the MDCT RHTP platform and acceptance by CMS, States may export the reporting package as a PDF download, including all submitted data and evidentiary documentation platform as a Zip file for recordkeeping.

Following its review, CMS will upload the report as submitted in MDCT to GrantSolutions on the State's behalf for the official record. The State must not separately submit these quarterly or annual progress report materials to

GrantSolutions. Reporting materials submitted outside the MDCT RHTP platform, including directly to GrantSolutions, will not be considered for CMS review or scoring.

IX. Appendix

A. Annual and Quarterly Reporting Periods

Figure 31: Reporting Periods

Report	Reporting Period Start Date	Reporting Period End Date	Due Date
Budget Period 1: December 29, 2025, to October 30, 2026 (10 months)			
Annual Report # 1	December 29, 2025	July 31, 2026	August 31, 2026*
Quarterly Report # 1	August 1, 2026	October 30, 2026	November 30, 2026*
Budget period 2: October 31, 2026, to October 30, 2027			
Quarterly Report # 2	October 31, 2026	January 30, 2027	March 1, 2027
Quarterly Report # 3	January 31, 2027	April 30, 2027	June 1, 2027*
Annual Report # 2	August 1, 2026	July 31, 2027	August 30, 2027
Quarterly Report # 4	August 1, 2027	October 30, 2027	November 29, 2027
Budget period 3: October 31, 2027, to October 30, 2028			
Quarterly Report # 5	October 31, 2027	January 30, 2028	February 29, 2028
Quarterly Report # 6	January 31, 2028	April 30, 2028	May 30, 2028

Annual Report # 3	August 1, 2027	July 31, 2028	August 30, 2028
Quarterly Report # 7	August 1, 2028	October 30, 2028	November 29, 2028
Budget period 4: October 31, 2028, to October 30, 2029			
Quarterly Report # 8	October 31, 2028	January 30, 2029	March 1, 2029
Quarterly Report # 9	January 31, 2029	April 30, 2029	May 30, 2029
Annual Report # 4	August 1, 2028	July 31, 2029	August 30, 2029
Quarterly Report # 10	August 1, 2029	October 30, 2029	November 29, 2029
Budget period 5: October 31, 2029, to October 30, 2030			
Quarterly Report # 11	October 31, 2029	January 30, 2030	March 1, 2030
Quarterly Report # 12	January 31, 2030	April 30, 2030	May 30, 2030
Annual Report # 5	August 1, 2029	July 31, 2030	August 30, 2030
Quarterly Report # 13	August 1, 2030	October 30, 2030	November 29, 2030
Final Report	December 29, 2025	October 30, 2030	February 27, 2031

Please note: Deadlines falling on a weekend and/or holiday will extend to the next business day. The following deadlines have been updated and are marked with an asterisk in the table above: Annual Report #1 (deadline extended to August 31,

2026), Quarterly Report #1 (deadline extended to November 30, 2026), and Quarterly Report #3 (deadline will extend to June 1, 2027).

B. Resources

For additional information on RHT Program reporting, please refer to the resources below.

1. [Rural Health Transformation \(RHT\) Program | CMS](#)
2. [Rural Health Transformation FAQ](#)

C. State Progress Reporting Frequently Asked Questions (FAQs)

Below are FAQs that cover the Annual and Quarterly Reports, reporting submission process, evidentiary documentation, and State reporting noncompliance.

Reporting Submission Process

1. How should States submit Annual Reports?

- a. During the initial program year (covering a 10-month period from 12/29/25 – 7/31/26), States received a standardized Excel Reporting Template to complete the first Annual Report (due August 31, 2026). For all subsequent reporting, the program will transition to a web-based interface. The platform will be deployed prior to the first quarterly reporting deadline. States will input reporting information into the MDCT RHTP platform for iteration with the PO.

2. Will there be iteration between PO and State before or after each reporting deadline?

- a. To allow ample time for review and feedback, States are advised to work with their PO in advance of the deadline to resolve questions and reach alignment on the progress they intend to report and ensure what the State ultimately submits is acceptable. States that do not take advantage of the advance review process may risk submitting evidence that CMS may “Reject.”
- b. The PO may accept the State’s evidence, request additional information or clarification, or determine with the State that a different level of

progress has been achieved. States should use the outcome of that review to prepare their final submission.

- c. CMS does not plan to return to States after the reporting deadline for additional clarification or substantive iteration on checkpoint or State Policy Action evidence. This is consistent with the approach used during the application process.

3. Will States have the opportunity to revisit the target and target completion date after reporting the baseline?

- a. States will be able to change targets and target completion dates up until Checkpoint 3.3 (Report Initial Metric Progress to CMS). After this Checkpoint, States should only change targets and target completion dates due to extenuating circumstances. To submit Checkpoint 3.3, “Report Initial Metric Progress to CMS,” States must first have established baselines and targets to be able to report progress against them.

Evidentiary Documentation

1. Do States have to provide evidentiary documentation?

- a. Yes, States are required to provide evidentiary documentation for each of the initiative checkpoints completed and for progress indicated for State Policy Action Commitments. However, there is an exception for checkpoints 1.1 and 3.1 as those are automatically reviewed upon submission of 0.2 and 2.4.
- b. The type of evidentiary documentation that States should submit will vary depending on the checkpoint. Please refer to the Checkpoint Guidance tab in the first Annual Report Excel.

2. How should States compile evidentiary documentation?

- a. Please refer to [Submitting Evidentiary Documentation](#) section for more information and examples of acceptable evidentiary documentation.

State Reporting Non-Compliance

1. What does it mean if a State fails to submit required reports?

- a. Per the Program Terms and Conditions, failure to submit required reports is considered a violation of the terms of the Cooperative Agreement.

2. Is there an opportunity for States to address non-compliance before further action is taken?

- a. Yes. Per the Program Terms and Conditions, States will be issued a notice of non-compliance and provided a 90-day remediation period to correct the identified issues.

3. What actions may CMS take if non-compliance is not remedied within the remediation period?

- a. If non-compliance is not resolved, CMS reserves the right to take one or more of the following actions as stated in the Program Terms and Conditions:
 - i. Recover previously issued payments.
 - ii. Withhold future payments, including both workload and baseline funding.

4. Can non-compliance result in suspension or termination of the award?

- a. Yes. Per the Program Terms and Conditions, significant performance issues—such as misuse of funds or failure to carry out approved activities—may result in suspension or termination of the award. In such cases, the State would be ineligible for further funding until the non-compliance is resolved.
- b. Per the Program Terms and Conditions, at any time, CMS can decrease funding, recover funding, or terminate an award if a State fails to fulfill the requirements of the award. The award may also otherwise be terminated to the extent authorized by law, if the agency determines the award no longer effectuates program goals or agency priorities.

D. Getting Started – Submitting the Initial Annual Report³

To facilitate a timely and accurate initial Annual Report submission, States should coordinate closely with their Project Officers (POs) to establish an ongoing, rolling review of the report's various components. Because revisions cannot be accommodated after the August 31st, 2026 submission deadline, this continuous collaboration is critical to confirm that all elements are finalized, reviewed, and approved in a timely manner.

In the initial Annual Report, States are to provide the definition of 'rural area' that the State used to determine whether subrecipients were considered to be rural. States will use this same definition to determine rural entities throughout the duration of the RHT Program, therefore, the definition does not need to be included in subsequent reporting. States will report their definition of rural in the [Additional Information Form](#).

For example, in this field, a State may report that they define rural using the following definition from the Health Resources & Services Administration (HRSA):

- *Non-metropolitan counties*
- *Outlying metropolitan counties with no population from an urban area of 50,000 or more people*
- *Census tracts with Rural-Urban Commuting Area (RUCA) codes 4-10 in metropolitan counties*
- *Census tracts of at least 400 square miles in area with population density of 35 or fewer people per square mile with RUCA codes 2-3 in metropolitan counties*

Instructions

The Excel Reporting Template is organized into four core sections:

- **Initiative Reporting Section**
 - o Checkpoint Guidance Tab
 - o Initiative Forms
- **State Policy Actions Form**
- **Obligated and Spent Funds Reporting Section**

³ Please note: The "Getting Started – Submitting the Initial Annual Report" section is an archived view of content from previous versions of the Reporting Expectations Guide, published prior to the Annual Report #1 due date.

- o Entity Type Guidance Tab
- o First-Tier Entities Form
- o Use of Funds Form
- o Downstream Reporting Form
- **Additional Information Form**
 - o Success Stories
 - o Sustainability Planning
 - o Rural Definition

Important Formatting Note: Please do not alter the underlying structure of the **Excel Reporting Template**, though States may adjust row heights and column widths for readability. To streamline reporting, CMS will pre-populate certain fields—such as Initiative Name and Initiative Number in the Initiative Forms—based on the State’s approved application. Please note that all forms (tabs), with the exception of the Downstream Reporting Form, must be fully completed for the initial Annual Report to be considered final. The Downstream Reporting Form will be required starting with the first Quarterly Report.

Alongside the Excel Reporting Template, States should submit all supporting evidentiary documentation directly to their PO for review, via email, to accompany the initial Annual Report. This submission should include any files demonstrating progress toward initiative checkpoints and State Policy Action Commitments. See the [Submitting Evidentiary Documentation](#) section below for more information. **All forms (tabs) must be completed, with the exception of the Downstream Reporting Form, for the submitted initial Annual Report to be considered final.**

The sections below provide additional details for each of the four main components of the Excel Reporting Template.

1. Initiative Forms

The purpose of the Initiative Forms is to report on the progress, metrics, and checkpoint completion for each approved State initiative.

In the Excel Reporting Template, there will be a separate Initiative Form (tab) for each initiative. Figures 32 and 33 below show a draft Initiative Form completed with a hypothetical example to illustrate the required information.

Figure 32: Initiative Form (Top)

#	Initiative Name
1	Rural Mobile Maternal Health Initiative
Narrative	
Over the past year, we deployed five fully equipped Mobile Maternity Clinics across 12 of our most underserved counties, effectively eliminating geographic barriers to care. This proactive approach has enabled us to deliver over 2,500 prenatal and postpartum visits directly to expectant mothers, driving a 40% increase in first-trimester care initiation. By integrating satellite-enabled telehealth for high-risk specialist consultations and employing local community health workers to build trust, we have not only expanded essential access but fundamentally transformed the maternal health infrastructure for our rural populations.	
Number of People Served	
620	

Figure 33: Initiative Form (Bottom)

Metrics			
#	Metric	Current Value	As of Date
1	Number of Maternal Care Providers	5	7/15/2026
2			
3			
4			
Stage 0 – Planning			
	Checkpoint	Yes/No	Attachment(s)
0.1	Establish governance	Yes	StateX_Init_1_Checkpoint_0.1a.pdf
0.2	Submit project plan to CMS	Yes	StateX_Init_1_Checkpoint_0.2a.xlsx
Stage 1 – Project Preparation			
	Checkpoint	Yes/No	Attachment(s)
1.1	CMS approval of project plan	Yes	StateX_Init_1_Checkpoint_1.1a.msg
1.2	Launch initiative	Yes	StateX_Init_1_Checkpoint_1.2a.pdf
Stage 2 – Early Implementation			
	Checkpoint	Yes/No	Attachment(s)
2.1	Continue initiative activities	Yes	StateX_Init_1_Checkpoint_2.1a.xlsx
2.2	Achieve at least one post-launch milestone	Yes	StateX_Init_1_Checkpoint_2.2a.xlsx
2.3	Establish metric reporting methodology	No	
2.4	Submit updated project plan to CMS	No	
Stage 3 – Midway Implementation			
	Checkpoint	Yes/No	Attachment(s)
3.1	CMS approval of updated project plan	No	
3.2	Complete Q2 2028 milestones	No	
3.3	Report initial metric progress to CMS	No	
Stage 4 – Preparation for Completion			
	Checkpoint	Yes/No	Attachment(s)
4.1	Share final deliverables plan with CMS	No	
4.2	CMS approval of final deliverables plan	No	
4.3	Complete post-program planning	No	
Stage 5 – Full Implementation			
	Checkpoint	Yes/No	Attachment(s)
5.1	Submit final deliverables to CMS	No	
5.2	Complete all 2030 milestones	No	
5.3	Report updated metric progress to CMS	No	

Figure 34 below includes the relevant data fields in the Initiative Form, instructions for how to fill out each data field, and an example data value for each field. **Please note, the examples below are notional and should only be used as a guide.**

Figure 34: Initiative Form Instructions

Data Field	Instructions	Example
Initiative Number	This field will be pre-populated in the Excel Reporting Template.	1
Initiative Name	This field will be pre-populated in the Excel Reporting Template.	<i>Rural Maternal Mobile Health Clinic Initiative</i>
Narrative	Provide a concise update on the progress of each initiative during the reporting period. Responses should focus on	<i>Over the past year, we deployed five fully equipped Mobile Maternity Clinics across 12 of our most underserved counties, effectively eliminating</i>

Data Field	Instructions	Example
	key activities completed, milestones reached, challenges encountered, and any notable outcomes or impacts to date. This section is intended for progress reporting purposes only and should not repeat the full project narrative from the NCC Kit. Please focus on recent initiative progress and avoid including broad background information unless it is necessary for context. States are encouraged to include any relevant updates that may be important for CMS to understand the status, implementation progress, or emerging results of the initiative. Note: The Narrative is only required to be reported in the Annual Report and is optional for Quarterly Reports. Please limit responses to 2,000 characters, or approximately 250–350 words.	<i>geographic barriers to care. This proactive approach has enabled us to deliver over 2,500 prenatal and postpartum visits directly to expectant mothers, driving a 40% increase in first-trimester care initiation. By integrating satellite-enabled telehealth for high-risk specialist consultations and employing local community health workers to build trust, we have not only expanded essential access but fundamentally transformed the maternal health infrastructure for our rural populations.</i>
Number of People Served	Provide your best estimate of the number of individuals who have benefited from the RHT Program funds during	620

Data Field	Instructions	Example
	the reporting period. Estimates should be reasonable, supported by available data, and reflect the scope and reach of the initiative. For system-based initiatives that do not provide direct services (e.g., IT Systems, Health Information Exchanges) States may define the number of people served more broadly. For example: ▪ For health system-level initiatives, the number served may reflect the total population served by the system. ▪ For statewide systems (e.g., HIEs), the number served may reflect the number of patients with data in the system or the total number of state residents. ▪ These estimates do not need to be de-duplicated and do not need to be limited to rural populations if the initiative has a broader reach. ▪ States should aim to provide the most accurate and justifiable estimate possible and may include brief context in the	

Data Field	Instructions	Example
	narrative section if helpful for CMS's understanding. Note: Number of People Served is only required to be reported in the Annual Report and is optional for Quarterly Reports.	
Metrics	The metrics for each initiative will be pre-populated based on the information provided in your application or most current information available based on clarifications in your Initiative Information Report. Note: Metrics are only required to be reported in the Annual Reports and are optional to report in Quarterly reports.	
Metric Current Value	The latest value for the corresponding metric.	5
Metric As of Date	The date that the current value was measured in the following format: (XX/XX/XXXX).	03/15/2026
Checkpoints	For each stage, the checkpoint number and description are pre-populated .	0.1 Establish Governance
Yes/No	Select "Yes" if the checkpoint is complete; Select "No" if the checkpoint is not yet complete.	Yes
Attachment(s)	Paste in the attachment file names of the evidentiary documentation files that	<i>StateX_Init_1_Checkpoint_0.1a.pdf</i> <i>StateX_Init_1_Checkpoint_0.2b.xlsx</i> <i>StateX_Init_1_Checkpoint_1.1c.msg</i>

Data Field	Instructions	Example
	correspond to the relevant initiative and checkpoint.	
	Alternatively, States may compile evidentiary documentation into a Master Initiative Attachments PDF and reference the Initiative # and Stage/Checkpoint # section heading in the Master Initiative Attachments PDF.	<i>OR</i> <i>"Initiative 1 Checkpoint 0.1 Evidentiary Documentation" section in the Master Initiative Attachments PDF</i>

2. State Policy Action Commitments Form

The State Policy Action Commitments Form is designed to capture the progress and status of the specific policy commitments established in a State's approved application. Please note that States are only eligible to receive credit for policy actions committed to in their initial application.

Figure 35 below shows a draft State Policy Action Commitment Form completed with a hypothetical example to illustrate the required information. **Please note, there are additional fields in a section titled "CMS Review (CMS Use Only)" in the State Policy Action Commitment Form (not pictured in Figure 34 below), which should not be populated by States.**

Figure 35: State Policy Action Commitments Form

Score Factor	Workload Funding Score Factor Criterion	Baseline	Commitment	Current Status	Supporting Evidence	Optional Comments/Notes
B.2.	Presidential Fitness Test	0 Points: A State does not require schools to reestablish the Presidential Fitness Test	100 Points: A State requires schools to reestablish the Presidential Fitness Test that is aligned with federal guidance associated with Executive Order 14327	0 Points: A State does not require schools to reestablish the Presidential Fitness Test	StateX_SPA_B.2.pdf	
B.3.	SNAP Food Restriction Waiver Policy	0 Points: State has no pending or approved USDA SNAP food restriction waiver prohibiting the purchase of non-nutritious items or no pending State bill requiring a food restriction waiver be submitted to USDA	100 Points: USDA approved State waiver prohibiting the purchase of non-nutritious items in SNAP	75 Points: State submitted a waiver prohibiting the purchase of non-nutritious items in SNAP and waiver is in processing with USDA	SNAP Food Waiver Legislation: www.legislature.state.X.gov/bills/2026/HB125	
B.4.	Nutrition Continuing Medical Education	0 Points: States that have no requirement for nutrition to be included in continuing medical education (CME) for physicians as well as no pending State bill requiring nutrition to be included in CME for physicians	100 Points: Requirement for nutrition to be included in CME for physicians is currently in place and enforced	0 Points: States that have no requirement for nutrition to be included in continuing medical education (CME) for physicians as well as no pending State bill requiring nutrition to be included in CME for physicians	StateX_SPA_B.4.pdf	
C.3.	Overall CON Score	50 Points: 45-79 score from the Cicero report for States with moderate CONs across facility categories	100 Points: 0 score from Cicero report for States with no CONs across facility categories	50 Points: 45-79 score from the Cicero report for States with moderate CONs across facility categories	www.legislature.state.X.gov/bills/2026/HB102	
	CON - Behavioral Outpatient	Restricted	Commitment Made	Restricted		
	CON - Medical Outpatient	Restricted	Commitment Made	Restricted		
	CON - Behavioral Inpatient	Unrestricted	No Commitment			
	CON - Imaging	Unrestricted	No Commitment			
	CON - Medical Inpatient	Restricted	Commitment Made	Restricted		
	CON - Day Services	Restricted	Commitment Made	Restricted		
	CON - Long-term Care Facilities	Restricted	Commitment Made	Restricted		
	CON - Ancillaries	Restricted	Commitment Made	Restricted		
	CON - Other	Restricted	Commitment Made	Restricted		

Figure 36 below outlines the data fields within the State Policy Action Commitment Form, along with specific instructions for completing each field and illustrative examples. **Note: These examples are strictly notional and are provided solely for guidance.**

Figure 36: State Policy Action Commitment Form Instructions

Data Field	Instructions	Example
Score Factor	This data field is pre-populated with the relevant score factor labels.	<i>B.2.</i>
Workload Funding Score Factor Criterion	This data field is pre-populated with the relevant score factor criterion.	<i>Presidential Fitness Test</i>
Baseline	This data field is pre-populated with a baseline value for each State Policy Action score factor. The baseline refers to the category of the baseline score for the State Policy Action score factor.	<i>The baseline values are unique to each State Policy Action and will be consistent with the State's State Policy Action Commitment report. Examples include:</i> <i>• No points (0)</i> <i>• Partial points (1–99)</i> <i>• Full points (100)</i>
Commitment	This data field is pre-populated , and the value depends on if the relevant State Policy Action Commitment was made and approved by CMS.	<i>If a State Policy Action Commitment was made in the application:</i> <i>• Partial Points (1-99)</i> <i>• Full points (100)</i> <i>• Commitment Made</i> <i>If a State Policy Action Commitment C was not made in application:</i> <i>• No Commitment</i>
Current Status	Select the current status from the dropdown menu (options reflect the scoring methodology in the NOFO and are dependent on the specific State Policy Action Commitment). If the State Policy Action Commitment was made, the Current Status cell for that Score Factor will appear white and the status	<i>For State Policy Action Commitment B.3. (for example) dropdown options include:</i> <i>• Not Yet Started</i> <i>• 0 Points: No pending State legislation</i> <i>• 25 Points: Active bill in the State legislative process</i> <i>• 50 Points: State bill was passed to submit a USDA waiver</i>

Data Field	Instructions	Example
	can be indicated with the dropdown. If a State Policy Action Commitment was not made, the cell will be greyed out.	75 Points: Waiver is in processing with USDA 100 Points: USDA approved waiver - Commitment abandoned <i>Note: Specific options will depend on each Score Factor.</i>
Supporting Evidence	Provide any links to sources or attachments that confirm the status of the State Policy Action Commitment.	<i>Examples may include:</i> - URL to policy on State website - State legislation attachment
Optional Notes/Comments	Provide any additional context or details around the status of the State Policy Action Commitment, if needed.	<i>The bill, titled "XYZ" was signed into law on July 15, 2026, and becomes effective January 1, 2027. See "Section 4 PA Licensure Compact" on Page 16 of the bill.</i>

3. Obligated and Spent Funds Reporting Tabs

The purpose of the Obligated and Spent Funds Reporting tabs is to track RHT Program spending across initiatives, use of funds categories, and entities. Please refer to the **Obligated and Spent Funds Reporting Guide** for more information on how to populate the First-Tier Entities, Use of Funds, and Downstream Reporting tabs.

4. Additional Information Form

The purpose of the Additional Information Form is to share qualitative updates on program successes, long-term sustainability planning, and the definition of rural, as defined by the State. Figures 37, 38, and 39 below show the Additional Information Form completed with a hypothetical example to illustrate the required information.

Figure 37: Success Stories

Success Stories
Please share success stories that you want to highlight as result of your State's implementation of the RHT Program.
In one of our rural counties, a community with no local obstetrician, our new mobile health clinic (Initiative 1) provided prenatal care to 45 expectant mothers. One patient was able to receive all her prenatal checkups locally, avoiding a 3-hour round trip to the nearest city. This consistent care led to the early detection of a complication, ensuring a healthy delivery for both mother and baby.

Figure 38: Sustainability Planning

Sustainability Planning
What are the most significant updates or changes to your sustainability plan based on the past year's experiences, successes, and challenges?
Based on the high demand for the mobile clinic, we have initiated discussions with the State Medicaid agency to establish a permanent reimbursement pathway for mobile health services. Furthermore, we have secured a partnership with the State University's nursing school to create a clinical rotation program on the mobile unit, which will provide a sustainable staffing pipeline and reduce future personnel costs.

Figure 39: Rural Definition

Rural Defintion
Please provide the definition of 'rural area' that the State used to determine whether subrecipients were considered to be rural.
We defined rural using the following definition from the Health Resources & Services Administration (HRSA). They defined the following area as rural:
Non-metropolitan counties
Outlying metropolitan counties with no population from an urban area of 50,000 or more people
Census tracts with Rural-Urban Commuting Area (RUCA) codes 4-10 in metropolitan counties
Census tracts of at least 400 square miles in area with population density of 35 or fewer people per square mile with RUCA codes 2-3 in metropolitan counties

Figure 40 below outlines the data fields within the Additional Information Form, along with specific instructions for completing each field and illustrative examples.

Note: These examples are strictly notional and are provided solely for guidance.

Figure 40: Additional Information Form Instructions

Data Field	Instructions	Example
Success Stories	Provide narrative example(s) of how the RHT Program has positively impacted rural communities in your State. Focus on specific, compelling stories that demonstrate the program's value. Please limit responses to 3,000 characters, approximately 400–500 words.	<i>In a [rural county] with no local obstetrician, our new mobile health clinic (Initiative 1) provided prenatal care to 45 expectant mothers. One patient was able to receive all her prenatal checkups locally, avoiding a 3-hour round trip to the nearest city. This consistent care led to the early detection of a complication, ensuring a healthy delivery for both mother and baby.</i>
Sustainability Planning	Describe significant updates to your State's plan for continuing the program's	<i>Based on the high demand for a mobile clinic, we have initiated discussions with the State Medicaid</i>

Data Field	Instructions	Example
	impact after the grant period ends. This should be based on your experiences, successes, and challenges from the past year. Please limit responses to 3,000 characters, approximately 400–500 words.	<i>agency to establish a permanent reimbursement pathway for mobile health services. Furthermore, we have secured a partnership with the State University's nursing school to create a clinical rotation program on the mobile unit, which will provide a sustainable staffing pipeline and reduce future personnel costs.</i>
Definition of Rural	Please provide the rural definition the State used to determine whether subrecipients were considered to be rural.	<i>We defined rural using the following definition from the Health Resources & Services Administration (HRSA). They define the following areas as rural:</i> <i>• Non-metropolitan counties</i> <i>• Outlying metropolitan counties with no population from an urban area of 50,000 or more people</i> <i>• Census tracts with Rural-Urban Commuting Area (RUCA) codes 4-10 in metropolitan counties</i> <i>• Census tracts of at least 400 square miles in area with population density of 35 or fewer people per square mile with RUCA codes 2-3 in metropolitan counties</i>

5. Submitting Evidentiary Documentation

For the initial Annual Report, States will submit all evidentiary documentation to their PO for review, via email. To allow ample time for review and feedback, States are strongly encouraged to provide documentation to their POs on a rolling basis prior to the final submission deadline.

Evidentiary documentation is only required for the following two components:

- **Initiative Checkpoints:** Documentation requirements vary depending on the specific checkpoint. States should provide evidence that directly corresponds to and demonstrates completion or progress for each individual checkpoint. Refer to the **Checkpoint Guidance tab** in the Excel Reporting Template for examples of acceptable evidence.
- **State Policy Actions Commitments Form:** For each State Policy Action Commitment for which there is an update in the Current Status, States must provide evidentiary documentation or a direct URL (e.g., a link to legislation, regulation, or a state register) that demonstrates progress toward the policy commitment. States may include a hyperlink directly within the Excel Reporting Template or submit a corresponding file.

To assist POs in understanding which pieces of evidentiary documentation apply to each checkpoint or State Policy Action, consider the following file name guidelines:

- The file name of each piece of evidentiary documentation should be clearly labeled with the State Name, Initiative Number, and Stage/Checkpoint Number or SPA that it corresponds to for ease of review (e.g., “StateX_Init_2_Checkpoint_0.1.pdf” or “StateX_SPA_B.2.pdf”).
- If multiple pieces of evidentiary documentation apply to the same initiative, States should indicate this using a, b, c, etc. at the end of the file name (e.g., “StateX_Init_2_Checkpoint_0.1a.pdf” and “StateX_Init_2_Checkpoint_0.1b.docx”).
- If one piece of evidentiary documentation applies to the same checkpoint across multiple initiatives, list the initiatives or provide a number range in the file name (e.g. “StateX_Init_1_2_Checkpoint_0.1.pdf” or “StateX_Init_2-7_Checkpoint_0.1.pdf”).

6. Submitting the Initial Annual Report

For the initial Annual Report, States must:

- Complete the Excel Reporting Template;
- Submit all associated evidentiary documentation for all checkpoint and State Policy Action Commitment progress for the reporting period.

Prior to the submission deadline, States will compile and upload all required materials into GrantSolutions for official recordkeeping.

RHT Program Annual Reports will be submitted as an “Application Message” within the NCC kit application in GrantSolutions after the NCC application has been submitted. Each Application Message may include up to 5 files, with a maximum file size of 1 GB per file. States may submit multiple messages as needed.

Supported file formats

include: .bmp, .txt, .csv, .jar, .odt, .ods, .odp, .msg, .potx, .pptx, .ppt, .rtf, .tif, .gif, .jpeg, .png, .docm, .docx, .doc, .pdf, .jpg, .xlsx, .xltx, .xls, and .xml. Zip files and other compressed file formats are not accepted.

Given the evidentiary documentation requirements for each checkpoint and each initiative, some States may have dozens of individual pieces of evidence to submit. When uploading files to GrantSolutions, States may either (1) upload individual pieces of evidentiary documentation for each checkpoint or collection of checkpoints by sending multiple Application Messages, or (2) consolidate some or all their evidentiary documentation into a Master Initiative Attachments PDF. Additional implications for each option are described below.

Uploading Individual Attachments Across Multiple Application Messages

If a State chooses to upload individual files across multiple Application Messages, they should submit the Application Message with a standardized subject indicating the total number of messages, knowing that there is a maximum of 5 attachments per message. See below for examples of standardized subjects of Application Messages:

- RHT Program Annual Report_1 of 3
- RHT Program Annual Report_2 of 3
- RHT Program Annual Report_3 of 3

States are encouraged to group these messages based on what makes sense for the state. For example, organizing information by a common checkpoint (e.g. for checkpoint 0.2, submitting project plans for all initiatives as one file) or by initiative (e.g. for one initiative, submitting evidence for 0.1, 0.2, 1.1, 1.2, and 2.1 as one file).

Consolidating Evidentiary Documentation into a Master Initiative Attachments PDF

If a State chooses to consolidate evidentiary documentation into a Master Initiative Attachments PDF, States should submit the consolidated PDF in addition to the Excel Reporting Template in a single Application Message. This consolidated PDF should be ordered by initiative number and then by stage/checkpoint number, with headings added to the PDF that clearly indicate to which checkpoint each page is mapped.

If a States chooses this option, this will change how they fill out the “Attachments” section of the Initiative Form in the Excel Reporting Template. In the “Attachments” section of the Initiative tabs, States should reference the initiative number and stage/checkpoint number section heading of the Master Initiative Attachments PDF. If some evidentiary documentation is in Excel or another file format that is less conducive to PDF conversion, the State may choose to upload these other files separately and include the file name as a placeholder in the Master Initiative Attachments PDF.

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