Fiscal Year 2027

Illinois Rural Health Initiative—REACH: Rural Education, Access, Careers, and Health

Notice of Funding Opportunity
Non-Competitive

Application Due Date/Time: September 18, 2026, 5:00 p.m.
Submit Application To: Euna
https://il.amplifund.com/Public/Opportunities/Details/3ba17f10-3932-4936-8de4-efe3eb378d9a

UNIFORM NOTICE OF FUNDING OPPORTUNITY (NOFO)
SUMMARY INFORMATION

1.	Awarding Agency Name:	*Illinois Community College Board (ICCB)*
2.	Agency Contact:	*Ann Storey, ann.l.storey@illinois.gov*
3.	Announcement Type:	*Non-Competitive*
4.	Type of Assistance Instrument:	*Grant*
5.	Funding Opportunity Number:	
6.	Funding Opportunity Title:	*FY2027 Illinois Rural Health Initiative—REACH: Rural Education, Access, Careers, and Health*
7.	CSFA Number:	
8.	CSFA Popular Name:	
9.	CFDA Number(s):	
10.	Grant Period	*August 1, 2026 – June 30, 2027*
11.	Anticipated Number of Awards:	
12.	Estimated Total Program Funding:	*$9,300,000*
13.	Award Range	
14.	Source of Funding:	*Federal*
15.	Cost Sharing/Matching Requirement:	*No*
16.	Indirect Costs Allowed Restrictions on Indirect Costs	*Yes* *No*
17.	Posted Date:	
18.	Closing Date for Applications:	*September 18, 2026, 5:00 p.m.*
19.	Technical Assistance:	*Webinar* *August 17, 2026* *11:00a – 12:30p*

A. Background and Purpose

The Illinois Community College Board (ICCB) is inviting eligible applicants to apply for the **FY2027 Illinois Rural Health Initiative—REACH: Rural Education, Access, Careers, and Health** initiative and will be awarding approximately **nine point three** million dollars in grant funds. The purpose of this funding is to strengthen healthcare workforce pipelines in rural Illinois through the expansion and enhancement of the professional clinical and allied health workforce. More specifically, funding will support:

- Expansion of high-need healthcare programs
- Increased instructional and clinical capacity
- Enhanced student supports
- Workforce partnerships
- Innovative delivery models that address rural barriers

Rural communities throughout Illinois continue to face significant healthcare workforce shortages, limited healthcare access, and barriers to education and training opportunities. Eighty-five of Illinois's 102 counties are classified as rural by the Health Resources and Services Administration (HRSA), and many of these communities experience persistent shortages in healthcare support professionals and frontline healthcare workers. Illinois's Rural Health Transformation Program is designed to deliver critical funding and drive sustainable change to the state's most underserved rural communities.

This initiative aims to strengthen rural healthcare delivery systems by improving access to training, increasing credential attainment, and bolstering employment outcomes in rural Illinois communities.

B. Eligible Applicants and Method of Submission

Community college districts who meet the definition of rural are invited to submit proposals under this NOFO. Those colleges are listed below. The "rural" classification is defined by the Health Resources and Services Administration (HRSA) using the following criteria: 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 areas with a population density of 35 or fewer per square mile with RUCA codes 2-3 in metropolitan counties; census tracts with Research Report Series (RRS) 5 and RUCA codes 2-3 that are at least 20 square miles in area in metropolitan counties.

1. Black Hawk College
2. Carl Sandburg College
3. College of Lake County
4. Danville Area Community College
5. Elgin Community College
6. Heartland Community College
7. Highland Community College

8. Illinois Central College
9. Illinois Eastern Community College
10. Illinois Valley Community College
11. John A. Logan College
12. John Wood Community College
13. Joliet Junior College
14. Kankakee Community College
15. Kaskaskia College
16. Kishwaukee College
17. Lake Land College
18. Lewis & Clark Community College
19. Lincoln Land Community College
20. McHenry County College
21. Parkland College
22. Prairie State College
23. Rend Lake College
24. Richland Community College
25. Rock Valley College
26. Sauk Valley Community College
27. Shawnee Community College
28. Southeastern Illinois College
29. Southwestern Illinois College
30. Spoon River College
31. Waubonsee Community College

Completed application packets will be uploaded to Euna.

C. Grant Priorities: Programs and Funding

Programs: All programs developed or supported through this initiative should be part of a career pathway that allows participants to obtain an industry-recognized credential and/or a community college certificate in the shortest possible amount of time while maintaining quality instruction and enhancing the participant's eligibility for employment in the healthcare sector. Colleges will prioritize recruiting, training, and retaining clinical health professionals, with an emphasis on clinically rigorous programs that are designed specifically to meet rural workforce needs. Colleges will be allowed use grant funds to support the following priority programs, which were determined by state and national trends, in coordination with priorities set forth by the federal Centers for Medicare and Medicaid Services and are identified in the table below. **Please note that these are the only eligible programs for this initiative.**

Table 1: Prioritized CIP Codes for the Illinois Rural Health Initiative—REACH: Rural Education, Access, Careers, and Health

Eligible Program	CIP
Dental Hygienist	510602
Physical Therapy Assistant	510806

Respiratory Care Therapy/Therapist	510908
Registered Nursing/Registered Nurse	513801
Nurse Midwife/Nursing Midwifery	513807
Perioperative/Operating Room and Surgical Nurse/Nursing	513812

Prioritizing these healthcare programs is vital to mitigating the severe medical workforce shortages plaguing the state's rural counties.

By expanding pipelines for registered and perioperative nurses, physical therapy assistants, and respiratory therapists, Illinois community colleges directly stabilize understaffed rural critical access hospitals, ensuring residents do not have to travel hours to larger cities for emergency or rehabilitation care. Furthermore, training dental hygienists and nurse midwives locally directly combats the expanding maternal and oral health deserts across rural Illinois. Community colleges will train healthcare workers who are not only competent, but who also understand the specific socioeconomic realities of their patients. Ultimately, Illinois community colleges will leverage the grant resources to transform local students into permanent, lifesaving healthcare workers for the state's most vulnerable populations.

Anticipated Funding Available: *Funding available through the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award with 100 percent of funding by CMS/HHS. The Illinois Department of Health and Family Services will act as the pass-through agency for these funds.*

- Nine point three (9.3) million dollars for a grant period of August 1, 2026 – June 30, 2027
- Allocations will be published on the ICCB website.

Allocation Methodology: Allocations are calculated with 1) a base allocation and 2) an additional amount based upon program completions in eligible healthcare programs, with the priority program (Nursing) weighted higher within the allocations. The process for calculating allocations is as follows:

1. An average completer number is calculated using an average of the three most recent academic years (2023, 2024, 2025) and is based on:
   a). A three-year average of completers of priority programs (high need), which are weighted at a higher among (AY2023, 2024, 2025 data) and
   b). A three-year average of the number of completers in other eligible programs in the healthcare pathway, weighted at approximately 2/3 the amount compared to the priority programs (AY2023, 2024, 2025).

2. Academic years 2024 and 2025 completers for non-credit programs were also added. *Note: only completers in non-credit programs associated with RHT-approved CIP codes are counted*.

1. **Base Funding:** $100,000 per district base allocation.

2. **Prioritized Program:** The number of completers in the most recent completed Academic Year for which ICCB has collected data, weighted for high need in eligible and the prioritized program. Table 1 details the six Classification of Instructional Programs (CIP) codes that prepare students for employment in healthcare occupations.

D. Grant Activities

Required Activities: Proposals should address all three priority areas—building capacity, program development and expansion, and further development of a wraparound student support service model.

1. **Building Regional and Institutional Capacity**
   This activity is designed to support community colleges in ***building capacity at their institutions for the expansion of clinical and allied health workforce*** and is intended to prepare and position institutions for program development, expansion, coordination, and implementation. Use of funds could include, but not necessarily be limited to the following:
   - ✓ Institutional and regional collaboration and systems building
   - ✓ Healthcare partnerships and alignment
   - ✓ Faculty and instructor training
   - ✓ Curriculum mapping and development
   - ✓ Equipment modernization

2. **Program Development and/or Expansion**
   This activity is focused on ***developing and/or expanding healthcare programming, including developing Nurse Midwife programs.*** Use of funds can include, but is not limited to:
   - ✓ Curriculum development and pathway development, including competency-based education, dual credit, bridge programs, and adult education integrated education and training
   - ✓ Hiring or upskilling of faculty
   - ✓ Testing and assessment preparation for certificates and credentials
   - ✓ Improving technology and instructional materials

3. **Further Developing a Wraparound Student Support Services Model**
   This priority focuses on colleges ***continuing the designing and implementing of programs with a student-centered approach***, specifically as new curriculum is created and implemented. A strong student support model includes effective strategies for recruitment, retention, and comprehensive services that help students succeed. Uses of funds can include, but are not limited to:
   - ✓ Investments in academic advising and career guidance
   - ✓ Supplemental instruction
   - ✓ Wraparound support services and barrier reduction (academic and non-academic)

- ✓ Community needs assessments
- ✓ Partnering with community-based organizations to braid barrier reduction funding

Other Allowable Activities: The expectation is that applicants will propose activities that will align with Illinois's vision for the Rural Health Transformation Program, which is to transform rural healthcare delivery, create opportunities for individuals in rural settings to overcome barriers to care, and build a resilient rural healthcare workforce. Grantees should utilize existing frameworks and resources, where applicable. Other allowable activities that can be carried out by applicants could include:

- Creating tele-dentistry hubs and using digital imaging tools to connect local patients with dentists further away.
- Partnering with small rural hospitals to dedicate entire wards for peer-led, immersive student nurse training.
- Offering stackable, online-heavy certificates that transition local doulas into fully credentialed midwives.
- Engaging in innovative instructional models, such as competency-based education, virtual reality, and offerings in other modalities
- Improving technology and instructional materials to align with current industry standards and expectations, such as virtual reality (VR) simulation.
- Developing specialized training modules focusing on respiratory illnesses unique to farming communities.
- Training students on farms or local production facilities to design injury-prevention and rehabilitation plans for rural workers.

E. System Collaboration

To support these three priorities, grantees will be required to participate in systemwide collaborative efforts, including but not limited to, developing competency-based healthcare curriculum. Other systemwide efforts include participation in various meetings, learning communities, or conferences. Most meetings or learning communities will take place virtually, but applicants should budget for or be willing to travel 1-2 times during the grant period.

F. Application Package and Deliverables

1. **Uniform Grant Application** Applicants must complete each section of the "Applicant Completed" section in the GATA Uniform Grant Application in its entirety. If a question is not applicable, please enter NA. *A template is provided on the ICCB Grant Opportunities webpage, see above link.*

2. **Application Narrative**
   The eligible applicant must submit a narrative of no more than eight pages (charts and graphs are a part of the page limitation), double-spaced, 12-point font that must include the following information in the order listed below and utilizing a header for each Numbered Section. ***Narrative Sections****: No template is provided. Your application must follow the cadence of the sections below, or points may be deducted.*

I. Project Implementation and Context:

a. *Program Identification*: Identify what programs your project will support, develop, revise, and/or expand. It may be helpful to put this information into a table, such as the following.

Program Name	CIP	Credit, Non-Credit, or Both	Culminating Credential(s)	Will this program be developed, revised, expanded, or supported?

b. *Regional Context:* Describe the healthcare workforce shortages within your service region as related to the priority programs: Dental Hygienist, Physical Therapy Assistant, Respiratory Care Therapy/Therapist, Registered Nurse/Registered Nursing, Nurse Midwife/Nursing Midwifery, and Perioperative/Operating Room Nurse/Nursing. Additionally, identify any projects happening in the region that this initiative could be aligned to and how you anticipate coordinating with these efforts (e.g. secondary schools, healthcare employers, community-based organizations, public health agencies, etc.).

c. *Barriers and Target Population*: Identify current barriers to expanding enrollment or completion (e.g. limited clinical placements, faculty shortages, equipment needs, program capacity, accreditation requirements, low enrollment, etc.) and describe how the proposed project will address these barriers. Of the target populations, which population(s) will your grant aim to serve?

II. Project Work Plan:

Clearly describe the project activities, associated timeline, and person(s) responsible for each activity to be carried out during the grant period. *A chart or table is encouraged*. Please refer to the list of required and allowable activities that these grant funds can be utilized for. Activities should aim to move the needle on your indicators of accountability. Please utilize the following sections to guide the organization of your work plan.

1) *Employer and Community Engagement:* Engaging in strategic partnerships within your region to conduct needs assessments, inclusive of both labor market and community readiness, develop and implement new programs, curriculum, work-based learning opportunities, etc. Partnerships must include employers, high school districts, labor organizations, and local workforce boards. Other partners could include other institutions of higher education, community-based organizations, industry associations, etc. Activities should detail what partners will be engaged (and how) during the grant process and any other activities that will contribute to grant goals

regarding employer and educational partner engagement. Please specifically address the following:

i. What employers, secondary school systems, and/or agencies will the college be collaborating with to prepare and employ students?
ii. Describe the strategies for engaging these collaborative partners.
iii. If clinical availability issues exist, what strategies will be employed to help mitigate those issues?

2) *Pathway Mapping:* Creating career pathways and programs of study that provide seamless transition from high school to postsecondary education and employment. This includes dual credit and other accelerated onramps such as adult education integrated education and training programs and non-credit to credit pathways, with healthcare focus. Grantees should also consider mapping pathways to include maternal health and substance abuse programs. Activities should detail what partners will be engaged in the pathway mapping; process for which collaboration will occur; and any other activities that will contribute to grant goals regarding education partner engagement, number of students enrolled (including dual credit students), and number of students retained or employed.
3) *Build Capacity and Infrastructure:* Activities may include updating existing programs/programs of study, purchasing or upgrading equipment to meet or exceed current industry standards, providing professional development and training to faculty and staff- including externship opportunities, creating partnerships and identifying efficiencies to maximize capacity.
4) *Develop, Revise, or Expand Programs*: Activities should detail processes for which programs may be developed, revised, or expanded; what staff will be responsible for each step in the process; what partners will be engaged (and how); and any other activities that will contribute to grant goals regarding employer and educational partner engagement and number of programs to be developed or revised. Please specifically address the following:

i. How will you recruit for these programs? Describe strategies to recruit students specifically from rural and underserved communities.
ii. Describe how you will promote careers in Dental Hygiene, Physical Therapist Assistant, Respiratory Therapy, Registered Nursing, Nurse Midwifery, and Perioperative/Operating Room Nursing to prospective students, including high school students, adult learners, and incumbent healthcare workers.
iii. Describe student retention and completion supports that will be provided and explain how the institution will encourage graduates to work in rural communities after program completion.

5) *Support Students Enrolled in Eligible Programs:* Activities should detail the

plan for providing support to students, including eligibility, intake, services offered; who is responsible for each activity; what partners are engaged (and how); and any other activities that will contribute to grant goals regarding number of students engaged, enrolled, retained, or employed. Please specifically address the following:

i. Identify who will be responsible for supporting and tracking student progression. Identify frequency of touchpoints. (e.g. Student Success Coach, monthly check ins, etc.)
ii. What wraparound support services will be available to students?
iii. How will students be informed of available supports?

6) <u>*Program Accountability:*</u> Activities should detail who is responsible for tracking progress against grant metrics; process for how the grantee will collect all data elements. **This is especially important because reporting the outcomes of this grant is a priority for Illinois HFS and federal CMS**.
7) All other activities carried out under the grant to support the project goals.

III. Performance Metrics: All metrics and goals below are ***anticipatory***; based on your project proposal, what do you anticipate for the following metrics. Providing this information in a chart is highly encouraged.

1) **Number of students to be engaged in this grant and any relevant demographics, including race, ethnicity, and gender**. *This refers to students participating in career exploration activities; students enrolled in priority and eligible programs, students participating in eligible adult education bridge programs, etc.*
2) **Number of students to be enrolled in priority and related programs**. *Enrollment is defined as the number of full-time (considered 12 hours or more in a term or 24 hours or more in an academic year) and part-time students enrolled in priority and eligible programs.*
3) **Number of completers**. *Students are considered completers for the purposes of this grant if they complete an eligible program in the academic year for which the grant is active. Completion means a student has completed a program that culminates in an industry-recognized credential (e.g. certificate, certification, degree). The count may be duplicated meaning, for example, that if a student completes a 16-week program in the fall semester and then transitions into another eligible program in the spring semester and completes, the student would be counted for two completions. The count will include students completing both credit and non-credit programs, that are on the eligible program list. All programs must be identified in the Program Overview Chart for approval by the ICCB. Completers may include students who began a program prior to the academic year for which the grant is being implemented. The grant program supports districts to implement activities that improve student retention.)*

4) **Number of programs to be developed.**
5) **Number of programs to be revised or expanded.**
6) **Number of employers engaged**. *Engagement means contributing to curriculum development and alignment activities, hosting work-based learning opportunities, donating equipment, hosting facility tours, participating in hiring events, hiring students.*
7) **Number of education partners** (high schools, four-year institutions) engaged in pathway development and alignment.

IV. **Partnerships:** Description of all partnerships and a brief description of the role each partner will play in the grant project. Partnerships should include employers, high school districts/area career centers, labor organizations, and local workforce boards. Other partners could include other institutions of higher education, community-based organizations, adult education providers, industry associations, etc.

V. **Contingency Plan:** Brief description of plan and budget in the event that the program plan must change, and funds are not able to be spent as defined in the original narrative and budget (e.g. unsuccessful in hiring Navigator A). *No more than one page.*

4. Uniform Budget

Both the application budget and budget template are required to submit this application. Applicants should submit budgets based on the total estimated costs for the project. Costs should be in line with allowable and reasonable costs outlined in this notice of funding opportunity. Grantees should ensure that they have the institutional capacity to fully execute this grant, and all funding provided with it. Grant funds must be expended within the allowable timeframes of the grant period.

Uniform Budget Instructions:

- Please download the budget template (provided in Euna), carefully read the instructions, provide the required information, and upload the completed budget document.
- **DO NOT UPLOAD A PDF** copy of your Budget. Please leave the budget document in Excel format. However, you can upload the Signed Certification page in PDF format.

Euna Budget Instructions:

- Use the information in the "Section A" tab of the completed Uniform Budget spreadsheet to complete the budget in Euna Grants. Enter the estimated expenditures from the Section A tab of the Uniform Budget into the corresponding expenditure categories in Euna Grants.
- **DO NOT enter individual expenses**. Euna Grant budgets that do not match the Section A tab (budget category totals only) will be returned for revisions.
- The following expenditure categories are allowable: Personnel, Fringe Benefits, Travel, Equipment, Supplies, Contractual Services, Consultant Services, Training and Education, Other, Grant Exclusive Line Item, and Indirect Cost.

5. **Federal Funding Accountability and Transparency Act (FFATA) Form**

   This form is a requirement for federally funded grants. Download the FFATA in Euna, complete it, and upload the form.

6. **Programmatic Risk Assessment**

   All applicants must submit a Programmatic Risk Assessment form for each grant program. Download the Programmatic Risk Assessment from the application forms found on the opportunity in Euna, complete it, and upload the completed form. The form must remain an Excel file.

NOTE: For ICCB grants that permit student support as an allowable expenditure, direct student support should be categorized in the Grant Exclusive tab of the Uniform Budget. Direct student support is when a student directly (ex. tuition assistance, stipends) or indirectly (ex. childcare, transportation, examination fee assistance) receives grant funds. Restrictions on direct student support set by federal, state, or grant specific rules or statutes supersede this guidance. Exclusive Line Items are not included in the indirect base. *Note that tangible items that the institution maintains control or ownership of (lending libraries, loaner laptops, etc.) should remain in the applicable tab, and not in the Grant Exclusive tab.*

Student Support Subsidies, paid directly to or on behalf of participants, include but are not limited to the following:

- Income replacement
- Transportation subsidies (gas cards, public transit passes, etc.)
- Childcare subsidies
- Housing costs
- Food benefits (vouchers, gift cards, institutional food bank, etc.)
- Tuition assistance and fees
- Books
- Student supplies (field specific supplies/uniforms, laptops, tablets, etc.)
- End-of-program employment assistance
- Legal barrier assistance (criminal record sealing, expungement fees, etc.)
- Drivers license reinstatement fees
- Liability insurance fees

If you have any questions regarding Student Support Subsidies, please refer to ICCB's Guidance for Student Support Subsidies or submit a question through the general application question process and the answer will be posted in the FAQ.

Grant Deliverables

1. Carry out deliverables of the proposed scope of work, encompassing all required activities for the selected Objective.
2. Submit required programmatic and fiscal reports on a quarterly basis to ICCB. Reporting templates and other instructions will be made available to grant recipients at a later date.
3. Report on achievement of performance metrics or participate in surveys/information collection as necessary.
4. Participate in any required collaboration efforts, operational meetings, or learning workshops.
5. Submit at least one student success story at the end of the grant period. Template can be accessed (https://www.iccb.org/grants/grant-resources/).
6. Provide to the ICCB copies of any curriculum, documents, toolkits, modules, press releases etc., that are developed because of these grant funds.

G. Application and Submission Information

- **Technical Assistance**: An optional bidder's conference webinar will be held, inclusive of Euna system training. A recording of the webinar will be made available on the ICCB Grant Opportunities webpage.

Monday, August 17 @ 11:00a – 1:00p
Meeting Link

- **Questions**: All questions must be submitted electronically to ICCB.cte@illinois.gov. Phone calls will not be accepted. Include in the subject line: **[College Name]** FY2027 Illinois Rural Health Initiative--REACH Grant question. All questions and answers will be posted in an FAQ on the ICCB website.

- **Submission**: Each grant application package must be submitted no later than 5:00 p.m. on **September 18, 2026**, to **Euna**. Details are as follows:

    - **Link**: https://il.amplifund.com/Public/Opportunities/Details/3ba17f10-3932-4936-8de4-efe3eb378d9a
    - To complete the application and upload materials needed for the application, please see the funding opportunities are on the State of Illinois' grants opportunity site at https://gata.illinois.gov/grants/csfa.html. Templates are also posted on the ICCB's website - https://www.iccb.org/grant-opportunities/.
    - All application submissions must come through the Euna system and must be received in Euna no later than the deadline.
    - Applications will not be accepted outside of the Euna system regardless of the reason. *Note: Alternate submission formats may be provided upon request as a "reasonable accommodation" under ADA, Section 504, or Section 508*

accessibility requirements.

- Applications from applicants that do not meet the eligibility criteria or that are incomplete will not be considered for review. (ICCB is not required to notify applicants of any missing elements required in a complete application).
- All required information and attachments must be included as part of the grant application to be evaluated for funding. It is the applicant's responsibility to ensure the correct documents are uploaded and complete in the Euna system.

G. Funding Information

- *Grant Period:* The grant period is August 01, 2026 - June 30, 2027.
- *Funding Availability:* A total of $9,300,000 available is for grants to community colleges for educational purposes as outlined under this NOFO. Only one application per college will be accepted.
- *Cost Sharing or Matching:* No cost sharing or matching is required.
- *Indirect Cost Rate:* There are no restrictions on Indirect Cost. To charge indirect costs to a grant, the applicant organization must either 1.) have an annually negotiated indirect cost rate agreement (NICRA), or 2.) elected a De Minimis rate in the GATA system. Please be sure to complete the Indirect tab of the budget worksheet.
  - ✓ Federally Negotiated Rate: Organizations that receive direct federal funding may have an indirect cost rate that was negotiated with the Federal Cognizant Agency. ICCB will accept the federally negotiated rate.
  - ✓ State Negotiated Rate: Organizations may negotiate an indirect cost rate with the State of Illinois if they do not have a Federally Negotiated Rate. The indirect cost rate proposal must be submitted to the State of Illinois within 90 days of the notice of award.
  - ✓ De Minimis Rate: An organization that has never received a Federal or State Negotiated Rate may elect a De Minimis rate of 15% of modified total direct cost (MTDC). Once established, the De Minimis rate may be used indefinitely. The State of Illinois must verify the calculation of the MTDS annually in order to accept the De Minimis rate.
- *Allowable and Unallowable Costs:* All costs must be reasonable and necessary to achieve the goals and outcomes of the program.

H. Review Criteria and Selection Process

The ICCB staff will use the criteria listed in this NOFO to review the applications. Funding is calculated using the allocation formula described in this NOFO. Revisions to applications may be requested based upon compliance with the requirements of this NOFO and the grant proposal. **All components of the application must be submitted for it to be scored**.

I. State Awarding Agency Contact

- **Ann Storey, Director for Healthcare Programs**

- Email: ann.l.storey@illinois.gov