I. PURPOSE

To create, support, and expand the opportunities of individuals in the nursing pathway and select healthcare pathways to obtain credentials and degrees that allow them to enter and/or advance their careers in the healthcare industry.

II. FUNDING

Anticipated Funding Available: *Funding only available upon appropriation by the General Assembly.*

- Fifteen (15) million dollars for a grant period of July 1, 2025-June 30, 2026.
- Allocations will be published on the ICCB website: https://www.iccb.org/path.

Allocation Methodology: ICCB is authorized under *Public Act 102-0699* to develop a funding formula to distribute funds for the PATH Program. Funding is available for all 39 community college districts. Allocations are calculated with 1. a base allocation and 2. an additional amount based upon program completions in eligible healthcare programs, with priority programs 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 (2022, 2023, 2024) and is based on a). A three-year average of completers of priority programs (high need), which are weighted at a higher among (AY2022, 2023, 2024 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 (AY2022, 2023, 2024). 2. Academic year 2024 completers for non-credit programs were also added. *Note: only completers in non-credit programs associated with PATH-approved CIP codes are counted.*

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

2. **Prioritized Programs:** The number of completers in the most recent completed Academic Year for which ICCB has collected data, weighted for high need prioritized programs. Table 1 details the 7 Classification of Instructional Programs (CIP) codes that prepare students for employment in healthcare occupations.

Table 1: Prioritized CIP Codes for the PATH Funding Formula	
Program Title	**CIPS**
Emergency Care Attendant (EMT / Ambulance).	510810
Emergency Medical Technology/Technician (EMT Paramedic).	510904
Respiratory Care Therapy/Therapist.	510908
Registered Nursing/Registered Nurse.	513801

Perioperative/Operating Room and Surgical Nurse/Nursing.	513812
Licensed Practical/Vocational Nurse Training.	513901
Nursing Assistant/ Aide and Patient Care Assistant/ Aide.	513902

3. **Included Programs:** Other programs that are in the healthcare pathway (*see all other eligible programs in Table 3*), in the most recent completed Academic Year for which ICCB has collected data, weighted at approximately 2/3 the amount of funding per completion, compared to the prioritized programs.

Allowable and Unallowable Costs

Grant recipients must adhere to the Illinois Grant Funds Recovery Act. Generally, colleges should consider capacity-building activities as well as broad, wrap around services and supports for students as a key part of program development.

TABLE 2: ALLOWABLE EXPENDITURE CATEGORY GUIDELINES	
Compensation— Personnel 2 CFR 200.430	Compensation for personnel services includes all remuneration, paid currently or accrued, for services of employees rendered during the period of performance, including but not necessarily limited to wages and salaries.
Compensation— Fringe Benefits 2 CFR 200.431	Fringe benefits are allowances and services provided by employers to their employees as compensation in addition to regular salaries and wages. Fringe benefits include, but are not limited to, the costs of leave (vacation, family-related, sick or military), employee insurance, pensions, and unemployment benefit plans. Except as provided elsewhere in these principles, the costs of fringe benefits are allowable provided that the benefits are reasonable and are required by law, employee agreement, or an established policy of the entity.
Travel Costs 2 CFR 200.474	Travel costs are the expenses for transportation, lodging, subsistence, and related items incurred by employees who are in travel status on official business. Such costs may be charged on an actual cost basis, on a per diem or mileage basis in lieu of actual costs incurred, or on a combination of the two, provided the method used is applied to an entire trip and not to selected days of the trip.
Equipment 2 CFR 200.33	Equipment is defined as an article of tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost that equals or exceeds the lesser of the capitalization level established by the recipient or subrecipient for financial statement purposes, or $10,000. See the definitions of *capital assets, computing devices, general purpose equipment, information technology systems, special purpose equipment,* and *supplies* in this section.
Supplies 2 CFR 200.94	All tangible personal property [other than those described in §200.33 Equipment]. Generally, supplies include any materials that are expendable or consumed during the course of the grant, including student stipends, gas/transportation cards, vouchers for books, and reimbursement for drug tests or fingerprinting.

Contractual Services 2 CFR 200.318	All products or services which are procured by contract. "Contract" means a legal instrument by which an entity purchases property or services needed to carry out the project or program. This includes contracting with a facility for healthcare student finger printing and drug testing services.
Training and Education 2 CFR 200.472	The cost of training and education provided for employee development.
Indirect Cost	In order to charge indirect costs to a grant, the applicant organization must have an annually negotiated indirect cost rate agreement (NICRA). There are three types of NICRA's. • 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. The organization must negotiate an indirect cost rate with the State of Illinois if they do not have a Federally Negotiated Rate or elect to use the De Minimis 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 Federally Negotiated Rate may elect a De Minimis rate of 15 percent 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.
Other Expenditures	Must first be approved in writing by appropriate ICCB staff. Please include a short description of any costs listed under this Budget Category. **Please do not include any expenditures under the "Grant Exclusive" or "Miscellaneous" tabs.**

III.   PROGRAM DESCRIPTION

All programs developed or supported through this initiative should be a part of a career pathway that allows participants to obtain an industry-recognized credential and/or a community college certificate in the shortest possible time while maintaining quality instruction and enhancing the participant's eligibility for employment in the healthcare sector (particularly CNA, LPN, RN). Eligible programs to be supported are included below. Programs may be credit or non-credit.

Target Populations: This initiative aims to meet unmet healthcare community and employment needs by increasing enrollment and retention in nursing and other healthcare pathways, specifically for underrepresented groups of students who might not otherwise be successful or able to enroll in healthcare programs. The project would focus on three populations:

1. **Incumbent workers** who are already in the workforce looking to continue their education and advance their careers in the nursing or healthcare pathway in Illinois.
2. **New, entering students on a nursing or healthcare pathway** with an identified need for support.

3. **Low-income, first generation, and minority students** as a subset of both of the aforementioned target population categories.

PATH-Eligible Programs: Table 3 lists the programs (credit and/or non-credit) that can be supported by PATH funding, and provides the program name, associated CIP, and whether the program is a "priority" program for allocation purposes. **Colleges are required to specifically address all programs proposed for funding in their implementation plans.**

Table 3: PATH-Eligible Programs		
Eligible Program	**CIP**	**Prioritized & Weighted**
Health Services/Allied Health/ Health Sciences, General.	510000	
Dental Hygienist	510602	
Hospital and Health Care Facilities Administration/ Management.	510702	
Health Unit Coordinator/Ward Clerk.	510703	
Medical Office Management/ Administration.	510705	
Health Information/Medical Records Administration/ Administrator.	510706	
Health Information/Medical Records Technology/Technician.	510707	
Medical Transcription/ Transcriptionist.	510708	
Medical Office Assistant/Specialist.	510710	
Medical Reception/Receptionist.	510712	
Medical Insurance Coding Specialist/Coder.	510713	
Medical Insurance Specialist/Medical Biller.	510714	
Medical Administrative/Executive Assistant and Medical Secretary.	510716	
Medical Staff Services Technology/Technician.	510717	
Disease Registry Data Management.	510721	
Medical/Clinical Assistant.	510801	
Clinical/Medical Laboratory Assistant.	510802	
Occupational Therapist Assistant.	510803	
Pharmacy Technician/Assistant.	510805	
Physical Therapy Assistant.	510806	
Anesthesiologist Assistant.	510809	
Emergency Care Attendant (EMT \Ambulance).	510810	Prioritized & Weighted
Allied Health and Medical Assisting Services, Other.	510899	
Cardiovascular Technology/Technologist.	510901	
Electrocardiograph Technology/Technician.	510902	
Electroneurodiagnostic/Electroencephalographic Technology/Technologist.	510903	
Emergency Medical Technology/Technician (EMT Paramedic).	510904	Prioritized & Weighted
Medical Radiologic Technology/Science - Radiation Therapist.	510907	
Respiratory Care Therapy/Therapist.	510908	Prioritized & Weighted
Surgical Technology/Technologist.	510909	
Diagnostic Medical Sonography/Sonographer and Ultrasound Technician.	510910	

Radiologic Technology/Science - Radiographer.	510911	
Polysomnography.	510917	
Mammography Technology/Technician.	510919	
Magnetic Resonance Imaging (MRI) Technology/Technician.	510920	
Clinical/Medical Laboratory Technician.	511004	
Histologic Technician.	511008	
Phlebotomy Technician/Phlebotomist.	511009	
Sterile Processing Technology/Technician.	511012	
Substance Abuse/Addiction Counseling.	511501	
Psychiatric/Mental Health Services Technician.	511502	
Community Health Services/Liaison/ Counseling.	511504	
Mental Health Counseling/Counselor.	511508	
Mental and Social Health Services and Allied Professions, Other.	511599	
Health Aide.	512601	
Home Health Aide/Home Attendant.	512602	
Registered Nursing/Registered Nurse.	513801	Prioritized & Weighted
Perioperative/Operating Room and Surgical Nurse/Nursing.	513812	Prioritized & Weighted
Licensed Practical/Vocational Nurse Training.	513901	Prioritized & Weighted
Nursing Assistant/ Aide and Patient Care Assistant/ Aide.	513902	Prioritized & Weighted

Program Strategies: This program models the [Workforce Equity Initiative](#), a statewide grant program focused on expanding short-term training opportunities for minority students in underinvested communities by providing comprehensive wraparound support and career services. For this program, the target populations are expanded to include low-income students, first-generation students, and entry-level incumbent workers. The PATH program adopts the use of *[career pathways](#)* as an overarching strategy to address pain points in the healthcare talent pipeline as well as issues of equity within preparation and employment. Strategies and allowable uses of funds are purposefully broad and flexible to allow for innovation and discretion by each college. Both **credit and non-credit programs**, *as identified by the Approved CIP list (Table 3),* can be supported through this initiative. Colleges should tailor strategies to the needs of their local community and employers.

Potential and impactful strategies include:

- *Recruitment and Outreach*: expanding current recruitment and outreach efforts; building community rapport; hiring program recruiters; collaborative partnerships to access new talent pools and additional program on-ramps
- *Accelerated Learning Strategies*: developing, implementing, and expanding dual credit pathways; bridge programming; integrated education and training; competency-based education programs; stackable credentialing; creating smooth transitions between non-credit and credit; improving the use of Prior Learning Assessment (PLA)
- *Capacity-Building Activities*: developing or expanding program/section offerings; mitigating clinical availability; hiring additional staff and instructors; staff retention efforts; professional development for faculty and staff; purchasing/upgrading equipment; expanding lab capacity

- *Work-Based Learning*: developing and offering internships, pre-apprenticeships, apprenticeships, and other opportunities
- *Wraparound Support Services*: offering academic and non-academic supports- tutoring; childcare; financial support through stipends and last dollar tuition assistance; transportation; transition services for individuals with disabilities, etc.
- *Partnerships and Collaboration*: working with universities to deliver the BSN; CBOs to deliver support services or build on-ramps; employers for coordination and referrals with the local One Stop Center, etc.
- *Customized Training:* incumbent worker training or customized training; intentional integration of essential employability skills training; modularized training programs; skills remediation and course preparation

IV. PERFORMANCE AND REPORTING

Program Metric- Number of Completions: To assess the extent to which the program is successful in preparing more individuals for employment in the healthcare field, districts will be held to a performance target for completions. Data will be disaggregated by race, ethnicity, gender, whether a student is a new entrant or incumbent worker, and income (Pell status) for the purposes of identifying opportunities to address equity gaps.

- **Completion** is defined as a student who completes a PATH-eligible program within the Academic Year, culminating in a credential. This is a duplicated count, for example, meaning 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.
- **Completion Targets:** The ICCB has set completion targets for each district based on the most recent academic year's completions, representing an approximate growth of 15%. ICCB will communicate these targets to each individual district.

Exit Survey: Colleges are required to implement an exit survey to assist in the process of gathering post-completion education and employment data. Data from the exit survey will be submitted with the Final Supplemental Report. Other data including enrollment, retention, and percentage of students employed post-completion will be captured to measure the success of the grant program or identify opportunities for improvement. While most of this data will be collected through regular ICCB MIS submissions, data via quarterly reporting, other supplemental reports may be requested throughout the fiscal year.

- Enrollment is defined as number of full-time and part-time students enrolled in eligible PATH programs.
- Full-time Retention is defined as new (i.e., first-time), full-time certificate/degree students in the Fall (denominator) that are retained the following Fall (numerator). Also included in the numerator are students that graduated during the academic year of enrollment. A variety of community college certificate programs can be completed in an academic year and, thus, there is not a need to re-enroll the following Fall.

- Part-time Retention is defined as new (i.e., first-time), part-time certificate/degree students in the Fall (denominator) that are retained the following Fall (numerator). Also included in the numerator are students that graduated during the academic year of enrollment.
- Student Employed will be captured through a data match with IDES.

Other Deliverables: Districts will carry out activities as described in their approved Implementation Plan to meet the goals of the PATH program. For FY2026, the ICCB is facilitating a learning community cohort, as well as two PATH working groups. Participation in a learning community cohort or working group is **encouraged but not required.**

Learning Community Cohort

> **Competency-Based Education II:** *This cohort is only for individuals who participated in the FY2025 CBE I cohort*. Participants of this cohort will work with a CBE coach and complete performance-based assessments and curriculum development activities as part of the learning experience, by utilizing Competent U- online learning modules developed by the Competency-Based Education Network (C-BEN). This cohort requires a significant time commitment. ICCB will be funding this cohort, which has a per-user cost, so active participation and engagement are **mandatory**. This cohort is limited to one participant per institution.

Working Groups

- **PATH Collective:** A roundtable discussion group where PATH administrators meet to share ideas related to current healthcare topics, innovative uses of PATH funds, industry partnerships, healthcare apprenticeships, and any other relevant topics. Please note that this group will be moderated by ICCB, but topic areas and discussion points are the responsibilities of the colleges. The Collective will meet either monthly or every two months.

- **Policy Workgroup:** Activities in this workgroup include reviewing proposed legislative bills; reviewing state and/or national healthcare policy; proposed administrative rules, including from other agencies or accrediting bodies, etc. that affect healthcare programs.

  Bill Review process: Each spring (January-May), ICCB reviews and monitors a number of proposed legislative bills and initiatives around healthcare, in which ICCB staff routinely ask our peers in the field for their perspectives. This advisory committee would create a small group that is "on call" during the months of January-May to assist ICCB with providing feedback regarding proposed legislation. Responsibilities would include providing feedback on healthcare-related bills with a short turnaround time, approximately 24-48 hours. Spots in this cohort are limited and participants will be chosen based on area of expertise (ex: dental hygiene, nursing, etc.).

Reporting: Institutions will be required to report on the identified data points above via three mechanisms.

- Quarterly programmatic and financial reports as required by the ICCB and submitted to iccb.grantpayments@illinois.gov and ann.l.storey@illinois.gov.
- Annual submissions through the regular ICCB MIS submissions, including any supplemental (and more current) attachments specific to the funded Healthcare Pathway Projects.
- An exit survey to assist in the process of gathering post-completion education and employment data.
- Any additional supplemental reports as required by the ICCB.
- Budget modifications may be submitted up to the final 60 days of the grant period.

FY2026 Reporting Schedule for the PATH Program		
Quarter	**Period**	**Date Due**
1	July 1 – September 30, 2025	October 30, 2025
2	October 1 – December 31, 2025	January 30, 2026
3	January 1 – March 31, 2026	April 30, 2026
4	April 1 – June 30, 2026	July 30, 2026

V. IMPLEMENTATION PLANNING

In order to receive funding under the PATH Program, districts must complete and submit an Implementation Plan, along with supporting documents. **Colleges do not need to submit this Program Design document**. For more information on the Implementation Plan, please refer to the ICCB System Rules Manual.

Summary of documents to be submitted to ICCB is below. All document templates can be found here: https://www.iccb.org/path/

1. Uniform Application Cover Page- *template provided*
2. Implementation Plan- *template provided*
3. Uniform Budget- *template provided*

VI. AGENCY CONTACT(S)

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