

Rural Health Innovation Fund (RHIF)

General FAQs

1. About the Fund

What is the Rural Health Innovation Fund (RHIF)?

The Rural Health Innovation Fund (RHIF) is an annual investment that helps rural health care providers use technology to improve how they deliver and coordinate care. It can help providers update systems, adopt digital tools and make care easier to manage for patients and providers. RHIF is part of the NC Rural Health Transformation Program (NCRHTP) and is delivered in partnership by NCDHHS and NCDIT.

How much funding is available?

About \$20 million is planned for the Rural Health Innovation Fund each year for up to five years, contingent on continued funding from CMS.

Why was the RHIF created?

Rural health care providers may not have access to the technology and tools that can make care easier to deliver, coordinate and manage. RHIF provides funding to help providers update their technology, better connect systems and information and use digital tools to improve care.

Who administers the fund?

In June 2026, NCDHHS established an Interagency Agreement with NCDIT (Division of Broadband and Digital Opportunity) to administer the RHIF.

2. Eligibility

Who can apply?

To apply for Year 1, Round 1, your organization must meet **all four** requirements:

1. Health care organization: Meet the definition in North Carolina administrative code definition ([10A NCAC 41A .0206\(a\)\(1\)](#)).

2. Serve rural North Carolinians: Be located in one of the 85 eligible rural counties **or** show that at least 40% of your patients live in rural areas.

3. Meet risk requirements: Receive a low- or medium-risk assessment. High-risk applicants are not eligible.

4. Be in good standing: Not be sanctioned or debarred by federal CMS or NC Medicaid.

How do you define "rural"?

For this funding round, your organization meets the rural requirement if:

- your facility is in one of North Carolina's 85 eligible rural counties; **or**
- at least 40% of the patients you serve live in rural areas.

The county list is based on the federal Federal Office of Rural Health Policy (FORHP) designation.

You can check whether a county is FORHP-designated using the HRSA Rural Health Grants Eligibility Analyzer **and filtering by State/County** at <https://data.hrsa.gov/topics/rural-health/rural-health-eligibility#ByStateCounty>

By Address **By State/County**

Search Criteria

Please provide a state/territory and a county.

Required fields are marked with an asterisk (*).

State / Territory *

 

County *

 

Search

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Can my organization qualify if it's located in an urban/suburban area but serves rural patients?

Yes. Your organization may qualify if at least 40% of the patients you serve live in rural areas, even if your organization is located in an urban or suburban area.

Can small independent or pediatric practices apply?

Yes, the RHIF is designed with rural and small-practice needs in mind. Independent practices, local health departments, clinics, and safety-net providers are among those who can apply.

Can technology vendors, device companies, or consulting firms apply directly?

No. Organizations that don't meet the healthcare-organization definition cannot apply directly. Applicants may, however, use any qualified vendors and should detail vendor roles in their proposals.

Are matching funds required?

No, matching funds are not required for this round.

How will I be told if I'm not eligible?

It depends on the eligibility requirement. The Technical Assistance Center will notify you after the Intake Assessment if you do not meet the health care organization, rural or good-standing requirements. NCDIT will notify applicants who do not meet the risk requirements after the full application.

If I'm not a priority provider, can I still apply and be funded?

Yes. Priority determines review order only; non-prioritized applicants are still reviewed and can be awarded.

3. What the Funds Can Be Used For

What can the funds be used for?

Funds support digital health modernization: telehealth/e-consults, remote patient monitoring, EHR upgrades/optimization, HIE connections, cybersecurity, data integration, analytics, patient portals, AI decision support, and related implementation services.

Are EHR/EMR upgrades eligible?

Yes — EHR upgrades and optimization are within scope, and RHIF is vendor-agnostic. Applicants must note in their application if they are seeking funding to support the replacement of an Electronic Medical Record (EMR) system if a previous HITECH certified EMR system is already in place as of September 1, 2025 due to CMS funds tracking.

Will RHIF fund implementation support and training (not just software/devices)?

Yes, within a defined limit. Awardees may have access to an additional 20% of their total funding ceiling to be used for implementation support. Access to that full 120% of the funding ceiling is based upon the merits of the application.

Will RHIF support cybersecurity?

Yes for cybersecurity needs — but not cybersecurity insurance. Applicants should explain how the upgrade meets their organizational and compliance needs.

Will Remote Patient Monitoring (RPM) and telehealth be supported?

Yes.

What can't funds be used for?

Broadband infrastructure buildout, building construction or renovation, food purchases, and cybersecurity insurance are all unallowable.

4. Funding Tiers

How are funding amounts determined? Your Intake Assessment score places you in one of five tiers:

Tier	Name	Range	Focus (examples)
1	Foundational Technologies	\$0–\$50,000	Core hardware, internet hardware, scheduling software
2	Baseline EHR	\$0–\$200,000	Acquire/upgrade a certified EHR that connects to NC HealthConnex
3	Interoperability	\$0–\$140,000	FHIR APIs, HIE connections, data upgrades
4	AI Clinical Decision Support	\$0–\$200,000	AI scribe, CDS, AI revenue cycle
5	Emerging Technologies	\$0–\$250,000	RPM, telehealth platforms, predictive analytics

Is the technology list fixed?

No — the technology types are examples, not an exhaustive list. RHIF is vendor-agnostic.

5. How to Apply

What are the steps?

- 1. Complete the Intake Assessment.** This determines whether you can move forward and your funding tier.
- 2. Get help if you need it.** The Technical Assistance Center can help you understand requirements and prepare your application.
- 3. Submit your application.** Complete the full application and risk assessment through the NCDIT Grant Portal.

Is help available if my organization doesn't have grant-writing experience?

The TAC provides office hours, guidance, and support on requirements, workflows, and sustainability planning.

What makes an application competitive?

It's a competitive, merit-based process. Applications showing clear impact, a strong sustainability plan, and demonstrates it is serving rural residents are favored over those that don't.

Is SAM.gov registration (or only a UEI) required for the intake or application?

Applicants are required to only have a Unique Entity ID because you are applying for a subaward and not applying directly for federal funds. You can get a UEI for your entity without having to complete an entity registration. Visit [SAM.gov](https://sam.gov) for more information.

6. Timeline & Key Dates

Milestone	Date
Intake Assessment Opens	September 30, 2026
Application Opens	October 15, 2026
Intake Assessment Closes	October 31, 2026
Application Closes	November 16, 2026 (11:59 pm)
Review Window	November–December 2026
Awards Announced	Anticipated January 2027
Round 1 Activity Completed	July 30, 2027
Year 1, Round 2 Opens	February 2027

7. After You Apply — Payment & Reporting

Is RHIF reimbursement-based or paid upfront?

RHIF uses a reimbursement model. This means your organization generally pays an approved expense first and then submits documentation to be reimbursed.

What reporting will be required?

Standard subrecipient requirements: periodic progress/outcome reports on program templates, expenditure documentation, interoperability compliance. Templates and cadence come with award agreements.

When will awards be announced?

Round 1 awards are anticipated in January 2027; all applicants are notified, and those not awarded receive appeal-process information.

How long from award to funds, and from expense report to reimbursement? Once the award agreement (reimbursement) is signed, purchases can be made. The subrecipient will then submit the paid invoice(s) requesting reimbursement along with an expense report. The timeline from the approved expense report and invoice to the payment of reimbursable funds is 60 days.

8. Getting Help

Where can I get updates or ask questions?

Email RHIF@nc.gov and visit the NCRHTP website (ncdhhs.gov/rhttp).

Will there be more information sessions?

Yes — additional sessions will be announced through official channels.

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