



**GEORGIA**  
**RURAL HEALTH TRANSFORMATION**

**Georgia Rural Enhancement and  
Transformation of Health (GREAT Health)  
Program**

**GRANTS ADMINISTRATION  
POLICIES AND PROCEDURES MANUAL**

**Helpful information and documents may be found at:**

[About the Program | Georgia Rural Health Transformation](#)

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Questions or comments concerning this manual may be addressed to the DCH GREAT Health Project Leader using the contact information below:

**DCH GREAT Health Program**  
[RHTTP.Grant@dch.ga.gov](mailto:RHTTP.Grant@dch.ga.gov)

**Helpful information and documents may be found at:**

[About the Program | Georgia Rural Health Transformation](#)

<https://greathealth.georgia.gov/about-program>

## BACKGROUND

On July 4, 2025, Congress passed H.R. 1, commonly referred to as the One Big Beautiful Bill Act (Public Law 119-21). This law created an opportunity for the State of Georgia to apply for funds under a new Rural Health Transformation Program (RHTP). States can apply for ten billion per year, for five years. Five billion per year will be evenly distributed to all States that apply and five billion will be distributed based on a methodology determined by the Secretary of the U.S. Department of Health and Human Services.

From August 11- 29, 2025, the Georgia Department of Community Health, hereinafter referred to as DCH or the Department, accepted public input on ideas to shape the grant process.

Priority was given to projects meeting the following criteria:

- Support for rural providers with “rural” being defined as a population of 50,000 or less;
- Short term projects (able to be accomplished within 24 months, or projects that include discrete components that can be implemented in 24-month increments);
- Projects that would not create ongoing obligations from the State beyond the end of the defined allocation; and
- Projects meeting at least one of the statutorily required activities.<sup>1</sup>

On December 29, 2025, the Centers for Medicare & Medicaid Services (CMS) issued a grant Notice of Award (NOA)<sup>2</sup> to DCH for the RHTP for “Georgia Rural Enhancement and Transformation of Health (GREAT Health) Program to support value-based care uptake in the State of Georgia.”

Through its administration of RHTP grants, the Department will continue its mission “to provide access to affordable, quality health care to Georgians through effective planning, purchasing and oversight,” while serving the five strategic goals of the RHTP, including:

- Make rural America healthy again;
- Sustainable Access;
- Workforce development;
- Innovative care; and
- Tech innovation.

**Note 1:** This Georgia Rural Enhancement and Transformation of Health (GREAT Health) Program Grants Administration Policies and Procedures Manual (GREAT Health P&P Manual) apply only to the administration and award of grants by DCH pursuant to the **Rural Health Transformation Program**.

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<sup>1</sup> Statutorily required activities are described in the CMS Notice of Award (NOA) and can be found at: [About the Program | Georgia Rural Health Transformation](#)

<sup>2</sup> DCH received the original Award (NOA) on December 29, 2025. DCH received an updated Federal award (NOA) on February 10, 2026, which together are referred to as “NOA”.

**Note 2:** To the extent that this GREAT Health P&P Manual conflicts with Federal and State laws and regulations, said laws and regulations control.

## SECTION 100 – ROLES AND RESPONSIBILITIES

### 1.1 ROLES AND RESPONSIBILITIES OF THE GRANTOR<sup>3</sup>.

As a Grantor, DCH is responsible for the following:

- a) Maintaining compliance with grant Notice of Award requirements from the Centers for Medicare & Medicaid Services (CMS) for the Georgia Rural Enhancement and Transformation of Health (GREAT Health) Program and its associated terms and conditions, as they may be amended by CMS from time to time.
- b) Identifying and providing funding opportunities which are consistent with the grant's overall mission of making rural America healthy again, providing sustainable access to healthcare for rural Georgians, developing the rural healthcare workforce, providing innovative care, and fostering tech innovation for rural healthcare providers.
- c) Making grant opportunities available as funding is secured for the purpose of delivering services or goods in accordance with the grantor's requirements and DCH's mission.
- d) Releasing properly encumbered funds to selected Grantees ensuring that the grant award process conforms to the requirements of the Department as well as any other applicable requirements.
- e) Serving as a resource with CMS to provide appropriate technical assistance and guidance to Grantee staff as deemed appropriate by DCH and pursuant to the terms of the granting agreement.
- f) Responding to inquiries from CMS and submitting any necessary grant scope changes.
- g) Preparing periodic reports aggregating data from grant-funded projects for distribution to interested parties.
- h) Compliance with Federal grant requirements, include but not limited to, 2 CFR 200 and CMS policies, directives, and guidance through the monitoring of the utilization/expenditure of grant funds, including financial and/or programmatic reviews of invoices, and independent audit reports for entities that receive DCH funding and ensuring final program reports are received from Grantees in coordination with grant close out.
- i) Maintaining records as required by law for the RHTP.

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<sup>3</sup> DCH is the Grantee for the CMS RHT Program. However, it is serving as the Grantor for all grants it issues pursuant to the Georgia Rural Enhancement and Transformation of Health (GREAT Health) Program. Accordingly, DCH is referred to herein as Grantor.

## **1.2 ROLES AND RESPONSIBILITIES OF THE PROGRAM MANAGEMENT OFFICE (PMO)**

As the entity drafting and implementing the project management tools, processes, and standards that will enable the successful delivery and management of the GREAT Health Program. The PMO operations will focus on maintaining alignment across all partners, identifying and mitigating major risks and issues, facilitating procedures such that initiatives and strategies are implemented on time and within budget and the State's desired outcomes are achieved. The PMO's most critical deliverables and tools include the Integrated Master Schedules (IMS), the Metrics Dashboard, the Project Management Plan, and the Risks, Actions, Issues, and Decision (RAID) Log.

Other high-level PMO responsibilities include:

- a) Providing the GREAT Health Program with program management and governance including the definition of decision rights (RACI matrix)<sup>4</sup>, management of escalation and risk resolution processes (RAID), coordination and oversight of planned Initiatives and Strategies to facilitate alignment with organizational objectives by managing governance, interdependencies, risks and resources across projects.
- b) Supporting required program policies and documentation for program compliance and cooperative agreement requirements, supporting responses to CMS as needed.
- c) Monitoring program-wide budget, including obligated and expended funds across all strategies to support financial management and Federal reporting.
- d) Creating and maintaining performance monitoring dashboards for project health (time, budget, resources) and for outcome monitoring across the Initiatives and Strategies.
- e) Developing and facilitating the management of a communications plan for GREAT Health stakeholder audiences to include communication modalities and channels; facilitating the development of key messages, content clearance, approval processes and release cadences; and facilitating timely, accurate, and coordinated information sharing across stakeholder audiences.

## **1.3 ROLES AND RESPONSIBILITIES OF GRANTS MANAGEMENT VENDOR (GMV)**

As the entity managing the grants process end-to-end in partnership with DCH leadership, the GMV will manage the application and award process, execute participation agreements and award documents, process invoices and payments, maintain subrecipient records and documentation, and provide funding guidance and allowable cost instructions.

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<sup>4</sup> A RACI matrix is a project management tool that clarifies task ownership and reduces confusion by defining who is Responsible, Accountable, Consulted, and Informed for specific project tasks.

Other high-level GMV responsibilities include, but are not limited to:

- a) Subrecipient monitoring and compliance by validating use of funds against program requirements.
- b) Program compliance and Cooperative Agreement requirements through the assurance of initiative alignment with the approved operational protocol.
- c) Development and management of strategy spending plans, including status and progress reporting, and any required data collection processes for sound financial management and Federal and State compliance reporting requirements.
- d) Ongoing monitoring of finance and performance outcomes.
- e) Facilitation and operation of Grantee support channels for technical assistance to the Grantees.
- f) Recommendations to resolve identified challenges related to Grantee low or non-performance. In its assessment to determine non-performance, actual performance data will be compared to the approved grant agreement and intended deliverables of the grant. Low performance results and/or non-compliance with the approved budget (i.e., low rate of expenditures, inappropriate use of grant funds, etc.) will prompt the GMV to seek intervention.
- g) Comply with all Grant requirements, agreement obligations, and reporting responsibilities, including any applicable Federal guidelines.

#### **1.4 ROLES AND RESPONSIBILITIES OF THE GRANTEE**

As a recipient of grant funds, the Grantee is responsible for ensuring that high quality services are delivered to achieve established performance outcomes as identified in the Grantee's Application, the Notice of Grant Award (NOGA) (if applicable), the CMS NOA, Georgia Rural Enhancement and Transformation of Health (GREAT Health) Program Grant Award Terms and Conditions (the GATC), approved Scope of Services<sup>5</sup>, work plan and deliverables. Grantee is also responsible for providing services pursuant to the Grant award in compliance with all Federal and State laws, regulations, and policies pertaining to the Grant. Additionally, Grantees are required to divulge any potential, actual or perceived conflicts of interests. Failure to provide adequate disclosure at any time may be grounds for terminating the Grant as well as additional remedies afforded to DCH pursuant to applicable law.

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<sup>5</sup> To ensure alignment, we consider the "Scope of Work" and "Scope of Services" to mean the exact same thing in this context. Both describe the tasks, deliverables, and responsibilities borne by the Grantee. This alignment shall include other such titles/headings used to describe the Grantee's statement or scope of obligations. Also note, a Scope of Work or Scope of Services may not be applicable to all Grantees.

Other Grantee responsibilities include:

- a) Timely submission of status reports, reimbursement request and documentation submitted in response to project activities in accordance with the work plan approved by DCH. Items not approved by the project agreement supporting budget are not eligible for reimbursement.
- b) Compliance with all grant requirements and agreement obligations, including any applicable Federal guidelines as stated in project conditions, which may accompany the Grant Agreement.
- c) Ensure that any approved sub-grantee / contractor meets all program requirements and maintains all documentation as required by applicable laws and for reporting responsibilities.
- d) Maintenance of a high level of fiscal and programmatic responsibility demonstrated by efficiency and effective delivery of services as prescribed in the application, and all subsequent documents associated with the grant.
- e) Retention of all required records for seven years (7) after final payments are issued and all other pending matters are closed, or for a longer period if required under the terms of the GATC / Scope of Services or applicable State or Federal law.
- f) Full cooperation with the Department and its designees during any programmatic and financial audits or in response to any requests for grant-related documentation.
- g) Attendance and participation in periodic review meetings, as needed, throughout the life of the project.
- h) Submission of a programmatic performance report for the grant as specified in the GATC. This report shall include an analysis to identify weaknesses that may result in non-performance, delays in completing required deliverables, challenges with meeting programmatic goals and / or budgeted expenditures.
- i) Submit final budget commensurate with request for Department's payment of final invoices. However, Grantee shall also submit a final budget within ten (10) days of written request by the Department.
- j) Regular review of the online GREAT Health P&P Manual to ensure ongoing compliance, accurate performance measures, and alignment with RHTP objectives.<sup>6</sup>
- k) Such other obligations and responsibilities set forth in the Grantee's Application, GATC, and Scope of Services.

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<sup>6</sup> This GREAT Health P&P Manual is subject to updates to better reflect current information, best practices, and promote compliance with Centers for Medicare & Medicaid Services (CMS) and State of Georgia requirements.

## **1.5 ROLES AND RESPONSIBILITIES OF GRANT APPLICATION EVALUATORS FOR COMPETITIVE GRANTS**

The Grant Application Evaluators assess competitive grant applications submitted in accordance with a solicitation under the GREAT Health Program for eligibility, completeness, compliance, and program alignment, in accordance with metrics set forth in the Grant solicitation announcement.

See Section 300 – [Grant Application Requirements](#) for additional information.

## **1.6 ROLES AND RESPONSIBILITIES OF DCH GRANT ASSESSOR**

The DCH Grant Assessor will assess the progress of Grantee’s efforts in implementing the Grant. The DCH Grant Assessor will review such efforts to ensure Grantee’s services are in alignment with the GREAT Health Program’s efforts to meet identified CMS metrics. Accordingly, the DCH Grant Assessor will review and measure overall Grant status and progress as well as specific milestones reached in operationalizing the GREAT Health policy vision.

See Section 600 – [Grantee Compliance](#) for additional information

## SECTION 200 – LEGAL REQUIREMENTS

### 2.1 STATE CODE OF ETHICS

DCH and other State employees are subject to the Code of Ethics for Government Service, O.C.G.A. § 45-10-1, *et seq.* (the “State Ethics Law”). Employees are directed to uphold the public trust and report corruption when discovered. Accordingly, DCH employees are directed to report any violations of the State Ethics Law to the DCH Ethics Officer, including but not limited to circumstances where they are offered gifts of any amount or are requested to deviate from their ethical obligations to the State. The DCH Ethics Officer shall investigate any matter reported hereto and may refer such matter to the DCH Office of Inspector General, State of Georgia Office of Inspector General, U.S. Department of Health and Human Services Inspector General, or law enforcement agency as may be required. Grantees or other parties who discover any potential violations of State Ethics Law shall contact the DCH Ethics Officer at [EthicsHelpline@dch.ga.gov](mailto:EthicsHelpline@dch.ga.gov).

### 2.2 CODE OF ETHICS ESTABLISHED BY EXECUTIVE ORDER

DCH and its employees are also subject to Executive Order 04.01.21.57 establishing a Code of Ethics for Executive Branch Officers and Employees (“Code of Ethics”). The Code of Ethics serves as an extension of State Ethics Law and provides a framework for ethics compliance. Critically, it requires DCH employees to recuse themselves from any situation in which the employee has a conflict of interest or where an employee’s impartiality may be questioned. Any individual who discovers any potential violations of the Code of Ethics shall contact the DCH Ethics Officer at [EthicsHelpline@dch.ga.gov](mailto:EthicsHelpline@dch.ga.gov)

### 2.3 DCH ETHICS AND PERSONNEL POLICIES

DCH’s employees and interactions with Grantees and Contractors are also subject to compliance with DCH ethics and personnel policies governing their conduct. DCH employees are expected to conduct themselves in an impartial manner and avoid the appearance of a conflict of interest. Additionally, DCH employees must not accept any gift of value from a grantee. Standards of Conduct are framed from principles referenced in O.C.G.A. §§ 45-2-1, *et seq.*; § 45-10-1; §§ 45-10-20, *et seq.*; § 45-10-40, § 45-10-80; the Governor’s Exec. Order No. 04.01.21.57, Code of Ethics, effective April 1, 2021, and the Rules of the State Personnel Board. The policy applies to all employees of the DCH and attached agencies and is expected to be adhered to at all times.

### 2.4 OPEN RECORDS REQUIREMENTS

DCH is subject to the Georgia Open Record Act (“GORA”), O.C.G.A. §§ 50-18-70, *et seq.* Information conveyed concerning grant opportunities may be subject to disclosure to other parties. O.C.G.A. § 50-5-67(d)(2) requires DCH to make available the administrative review document for public inspection upon request within one (1) business day of the posting of the Notice of Intent to Award (NOIA) or the Notice of Grant Award (NOGA). The register of proposals shall be available after the issuance of the public NOIA or NOGA to the successful bidder or offeror, but shall be redacted in accordance with GORA.

GORA permits a reasonable charge to defray the cost of reproducing documents. All Open Records Requests should be submitted to: [RHTP.ORR@dch.ga.gov](mailto:RHTP.ORR@dch.ga.gov).

If applicable, Applicants can submit a trade secret(s) affidavit and a redacted copy of their submission in accordance with GORA and the Georgia Trade Secrets Act of 1990, O.C.G.A. §§ 10-1-760, *et seq.* Failure to submit a lawful trade secret affidavit with a corresponding redacted copy may result in full disclosure of Applicant submissions. For questions related to this topic, please contact DCH Open Records at [RHTP.ORR@dch.ga.gov](mailto:RHTP.ORR@dch.ga.gov).

## 2.5 COMPLIANCE WITH APPLICABLE LAW

All Grantees are required to operate in compliance with all Federal and State laws, regulations, and policies, including but not limited to those relating to privacy and confidentiality regulations; organizational and employment practices; financial, accounting, recordkeeping, and reporting requirements. In addition, Grantees are responsible for adhering to any and all other regulations, policies, or stipulations set forth in the NOA, the GATC, and the Scope of Services, DCH compliance regulations, and any other governing entity including but not limited to the Office of Management and Budget through 2 CFR §§200.300 and 200.400, *et seq.*. Furthermore, Grant recipients must follow Generally Accepted Accounting Principles (GAAP) during their daily administration of grant funds. A non-exhaustive list of potentially applicable law, rules, and regulations governing administration of RHTP grants includes the following:

- O.C.G.A. §28-5-125. Audit of recipients of grants;
- O.C.G.A. §49-4-152. DCH authority to apply for and administer Federal grants for research, demonstration and pilot projects;
- O.C.G.A. §§50-20-1, *et seq.* State Government, Relations With Nonprofit Contractors;
- O.C.G.A. §§ 50-5-135, *et seq.* One partial exception to competitive pricing is found in the State Use Law, and one of its key aspects is dual administration. The State Use Council (hereinafter the “Council”) has certain “powers and authority” regarding the state use program. O.C.G.A. § 50-5-136. ;
- The State Purchasing Act, O.C.G.A. §§ 50-5-50, *et seq.*;
- 2 CFR Part 25, Appendix A, Award Term / Unique Entity Identifier (“UEI”) and System for Award Management (SAM.gov);
- 2 CFR Part 170, Federal Funding Accountability and Transparency Act of 2006 (“FFATA”);
- 2 CFR Part 180 (as implemented in 2 CFR Part 376), SAM.gov compliance for subawards;
- Office of Management and Budget Guidance, 2 CFR Part 200 “Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards”;
- Applicable grant regulations in 2 CFR Part 300;
- 2 CFR Part 376, “Nonprocurement Debarment and Suspension”
- 37 CFR Part 401, if applicable, Dept. of Commerce regulations governing patents and inventions;
- 45 CFR Part 46, Human Test Subjects Protection;
- Regulations and requirements of HHS, 45 CFR Parts 80, 84, 86, 91, & 92;
- 45 CFR Part 75, funding terms;
- 45 CFR Part 87, “Equal Treatment for Faith-Based Organizations”;

- 45 CFR Part 93, Lobbying;
- 45 CFR Parts 160 & 164, HIPAA, Privacy, Security and Enforcement Rules;
- Georgia Procurement Manual (Current Version);
- Department of Health and Human Services (“HHS”) Grant Policy 2.6.1, “Accepting the Award”;
- Georgia Verification of Lawful Presence Within United States, O.C.G.A. §§ 50-36-1, *et seq.*
- The ‘Georgia Security and Immigration Compliance Act’, O.C.G.A. §§ 13-10-90, *et seq.* ;
- O.C.G.A § 31-7-94, Grants to hospital authorities and rural hospital organizations;
- One Big Beautiful Bill Act, Pub. L. No. 119-21;
- CMS NOFO (CMS-RHT-26-001, dated 9/15/2025);
- Funding limitations of Social Security Act, § 2105(c)(1), (7), (9) & (h)(1)(B) – 42 U.S.C. § 1397ee;
- Title VI of the Civil Rights Act of 1964, 42 U.S.C.; 2000d, *et seq.*;
- Rehabilitation Act of 1973 § 504, 29 U.S.C. 794;
- Title IX of the Education Amendments of 1972, 20 U.S.C. §§ 1681, *et seq.*, and as applicable – Presidential Executive Order 14168 “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government”;
- The Age Discrimination Act of 1975, 42 U.S.C. §§ 6101, *et seq.*;
- Patient Protection and Affordable Care Act, 42 U.S.C. § 18116;
- The False Claims Act and potential penalties, 31 U.S.C. § 3729; 18 U.S.C. § 287; & 18 U.S.C. § 1001;
- Medicare and Medicaid anti-kickback laws, 42 U.S.C. § 1320a-7b;
- Office of Personnel Management (“OPM”) salary limitations (Current version);
- Using Procurement Contracts and Grant and Cooperative Agreements, U.S.C. §§ 6302 & 6305;
- Terms and Conditions as outlined in CMS Notice of Award No. RHTCMS332046-01-00, as it may be amended by CMS;
- Program Fraud Civil Remedies Act, 42 U.S.C. §§ 3801 – 3812; and
- Whistleblower Protection Laws – Whistleblower Protection Act; Sarbanes-Oxley Act; Dodd-Frank Wall Street Reform; and Consumer Protection Act.

## **2.6 SECURE & VERIFIABLE DOCUMENTS (IMMIGRATION AFFIDAVIT)**

Pursuant to Georgia law (O.C.G.A. §§ 50-36-1 *et seq.*), applicants for grant funding must submit a completed, signed and notarized affidavit affirming their citizenship or lawful presence in the United States. If the Grantee is a business entity (e.g. corporation, nonprofit organization, limited liability company, partnership), the individual legally authorized to sign the application on behalf of the entity is required to complete the affidavit. A copy of a secure and verifiable document must accompany the affidavit as required by O.C.G.A. § 50-36-2. The Georgia Attorney General maintains a list of secure and verifiable documents required for this purpose which may be found at: <https://law.georgia.gov/resources/immigration-reports>.

## **2.7 ANNUAL INDEPENDENT AUDIT**

In accordance with 2 CFR § 200.501, Grantees that expend more than \$1,000,000 in Federal funds annually are required to have a single audit. The audit should reflect the entire fiscal year, all Federal awards expended and must be in compliance with GAAP. A copy of the audit must be submitted to DCH upon request.

All Grantees are required to be in compliance with the financial report submission requirements specified in O.C.G.A. § 36-81-8.1. Pursuant to O.C.G.A. §§ 50-20-1, *et seq.*, nonprofit Grantees in receipt of grants of State funds exceeding \$25,000 or Federal funds above 2 CFR § 200.501 reporting threshold are required to submit unaudited financial statements or an audit report to the Georgia Department of Audits and Accounts (DOAA).

## **2.8 RECORD RETENTION REQUIREMENTS & SCHEDULE**

Per the schedules established by the Georgia Secretary of State and in accordance with 2 CFR §§ 200.334 – 200.338, Grantees are required to retain documentation related to the grant on file in the event an audit is conducted and/or the need to retrieve grant records arises. Updates to State Retention Schedules may be located online at:

[https://www.georgiaarchives.org/records/retention\\_schedules](https://www.georgiaarchives.org/records/retention_schedules).

## **2.9 ACCEPTANCE OF GIFTS/FINANCIAL INTERESTS (O.C.G.A § 50-5-78)**

Under O.C.G.A. § 50-5-78, it shall be unlawful for any employee of the Department to accept or receive, directly or indirectly, from any person, firm, or corporation to whom any contract /grant may be awarded any money or anything of more than nominal value or any promise, obligation, or contract for future reward or compensation.

## **2.10 FOREIGN COMPANIES OF CONCERN; CONCERNED GOODS; ANTI-BOYCOTT ISRAEL**

Pursuant to O.C.G.A. § 50-5-84.1, DCH shall not enter into any contractual or grant agreements with a “foreign company of concern” and will not permit grant recipients to subcontract or act as reseller for any work required to be performed under any contractual or grant agreements to any “foreign company of concern.” Additionally, DCH shall not purchase, either directly or through a third-party vendor or reseller, any “concerned goods.”

DCH shall not enter or continue any contractual or grant agreements valued at \$100,000 or more where the grant recipient is engaged or intends to engage in a boycott of Israel as defined in O.C.G.A. § 50-5-85.

## **2.11 COMPLIANCE WITH ANTI-KICKBACK ACT OF 1986, 41 U.S.C. § 51-58.**

Grantee must comply with and continue to comply with the Anti-Kickback Act of 1986, 41 U.S.C. § 51-58, and Federal Acquisition Regulation 52.203-7.

## **2.12 EXCLUSIONS**

The Grantee also agrees to abide by 42 U.S.C. § 1320a-7 and all other related provisions or laws. To that end, the Grantee shall not employ or use any company, entity, or individual that is on the Federal Exclusions List or any company, entity, or individual subject to 42 U.S.C. § 1320a-7.

### **2.13 SANCTUARY CITIES**

Pursuant to O.C.G.A. § 36-80-23, no local governing body, whether acting through its governing body or by an initiative, referendum, or other process, shall enact, adopt, implement, or enforce any sanctuary policy. DCH shall not enter into any contractual or grant agreements with entities in violation of this Georgia law.

### **2.14 DUPLICATION OR SUPPLANTATION OF FUNDING**

RHTP award funds shall not be used to duplicate or supplant existing Federal, State, or local funding sources. RHTP funds will not be used to satisfy the non-Federal share of Medicaid payments or any other Federal health care program matching requirement. RHTP funds will not be used for expenses that are eligible for reimbursement or payment under another Federal, State, or local program. Appropriate documentation reflecting these rules must be maintained by grant recipients.

### **2.15 NON-PROFIT ORGANIZATION DISCLOSURE FORM**

Non-Profit organizations that receive funds from a State organization must comply with audit requirements specified in O.C.G.A. §§ 50-20-1 *et seq.* to ensure appropriate use of public funds. DCH must report grant / contractual agreements with non-profit organizations to the Department of Audits and Accounts to ensure compliance with requirements of Georgia law. Prior to the execution of any agreements, the grantee or contractor must complete a Non-Profit Organization Disclosure Form.

### **2.16 LOBBYIST DISCLOSURE**

In addition to the terms of Vendor Lobbyist Disclosure and Registration Certification, Grantee agrees that no grant funds may be used to develop, purchase or disseminate any information or marketing materials to lobbyists or for lobbying purposes.

### **2.17 OWNERSHIP AND USE OF DATA**

All data created from information, documents, communication (verbal, written, or electronic), reports, or meetings involving or arising out of this Grant / Contract is owned by DCH (“DCH Data”). Contractor / Grantee (subcontractors and subgrantees) is expressly prohibited from sharing or publishing DCH Data without the prior written consent of DCH. In the event of a dispute regarding what is or is not DCH Data, the Department’s decision on this matter shall be final and not subject to appeal.

If DCH consents in writing to the publication of its data by Contractor/Grantee, Contractor/Grantee shall display the following statement within the publication in a clear and conspicuous manner:

“This publication is made possible by the Georgia Department of Community Health (DCH) through a grant / contract managed by (Contractor / Grantee’s name). DCH is not responsible for any misuse or copyright infringement with respect to the publication.”

The statement shall not be considered clear and conspicuous if it is difficult to read or hear, or if the placement is easily overlooked.

## **2.18 USE OF NAME OR INTELLECTUAL PROPERTY**

Grantee agrees it will not use the name or any intellectual property, including but not limited to, the State RHTP logo, DCH, Federal or State trademarks or logos in any manner, including commercial advertising or as a business reference, without the expressed prior written consent of DCH.

## **2.19 COMPLETION OF DEBARMENT CERTIFICATIONS**

Grantee certifies that neither it nor any of its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any State or Federal department or agency.

## SECTION 300 – GRANT APPLICATION REQUIREMENTS

### 3.1 SUBMISSION OF APPLICATION

All grant applications must be submitted electronically through DCH's Grants Portal. Applications must be submitted within 30 calendar days of the opening of the application window, unless otherwise stated in the Request for Grant Applications (RFGA and/or Notice of Funding Opportunity). Applications that are not submitted by the deadline will not be considered for review. Late submissions are automatically disqualified and will not move forward in the evaluation process.

Applications are logged and tracked in the DCH Grants Portal to document the date of submission and application status.

### 3.2 ADMINISTRATIVE REVIEW

After the application deadline, the GMV will conduct an administrative review of all submitted applications. This review is a pass/fail screening to confirm that applications meet the minimum requirements outlined in the RFGA.

During this review, the GMV will:

- a) Confirm that the application was submitted on time through DCH Grants Portal;
- b) Verify that all required forms, documents, and certifications are included; and
- c) Ensure the application follows the format and submission instructions in the RFGA.

Applications that are incomplete, non-responsive, or missing required information may be disqualified and will not advance to the evaluation stage.

Applicants whose applications pass the administrative review will move forward to the evaluation phase.

### 3.3 MANDATORY/REQUIRED DELIVERABLES

Each competitive application must clearly identify required deliverables as outlined in the RFGA. Deliverables should be specific, measurable, and aligned with the proposed project activities.

Failure to clearly identify required deliverables may:

- a) Result in disqualification from the award process; or
- b) Reduce the applicant's overall evaluation score.

All applications are reviewed for required deliverables before moving forward with the scoring process.

### **3.4 DIRECT GRANT AWARDS**

Direct grant awards are included in the GREAT Health application to CMS. These awards will complete an administrative review and be evaluated to ensure they align with program initiatives and strategies. A budget review, as outlined in the section titled Review of Proposed Budget, will also be conducted. Reviews focus on completeness, compliance, and program alignment.

### **3.5 COMPETITIVE APPLICATIONS EVALUATION PROCESS**

Competitive applications that pass the administrative review are evaluated based on predetermined criteria based on the program initiatives and strategies.

The purpose of the evaluation process is to assess:

- a) The quality and feasibility of the proposed program approach;
- b) Alignment with program goals and priorities;
- c) The reasonableness and appropriateness of the proposed budget; and
- d) The anticipated impact on the targeted population(s).

Applications are evaluated only against the eligibility requirements and evaluation criteria established by the grants management team. Scores are assigned based on how well the application responds to each required element.

Evaluation will focus on eligibility, completeness, compliance, and program alignment, rather than comparative scoring.

### **3.6 REVIEW OF PROPOSED BUDGET**

All applicants must submit a proposed budget using the format provided in DCH Grants Portal. Budgets are reviewed as part of the application evaluation process. Awardees will submit a final, detailed budget prior to award disbursement.

During the budget review, DCH assesses whether proposed costs are:

- a) Necessary to carry out the project;
- b) Reasonable based on the GATC and / or Scope of Services; and
- c) Allowable under applicable Federal and State regulations, and terms of CMS award.

In some cases, individual budget line items or total budget amounts may require revision or negotiation. Please note that construction is not permitted under RHTP. Minor renovations may be considered permissible on a project level basis, as determined by DCH in accordance with CMS guidance.

### **3.7 QUESTIONS AND ANSWERS**

Applicants may request technical assistance regarding the application process at [GREATgrant@rsmus.com](mailto:GREATgrant@rsmus.com). Technical assistance is limited to portal functionality and does not include guidance on program development or competitive aspects of an application.

Programmatic questions related to the funding opportunity may be submitted to the designated program contact identified in the RFGA. Additionally, for certain grant opportunities, DCH may establish a more formal Question and Answer process with specific deadlines to ensure that DCH responses to inquiries are shared with all applicants. Applicants also are encouraged to check the GREAT Health website for updates relevant to the grant process at: [About the Program | Georgia Rural Health Transformation](#)

### **3.8 QUIET PERIOD**

To preserve the integrity and fairness of the evaluation process, DCH may impose a quiet period on applicants during certain competitive evaluations. During the quiet period, applicants and their representatives will be informed of the designated DCH staff person and shall communicate only with that individual for the duration of the quiet period. However, DCH will not discuss status of any applications during the evaluation period.

Failure to comply with the communication restrictions may be grounds for disqualification from the grant review process.

### **3.9 RECOMMENDATIONS FOR AWARD**

After all applications are evaluated and scored, funding recommendations are developed based on:

- a) Final evaluation scores;
- b) Program priorities; and
- c) Availability of funds.

Final award decisions are made at DCH's discretion.

### **3.10 NOTICE OF INTENT TO AWARD (NOIA)**

Within two (2) business days of DCH's approval of the GMV's evaluation summary, DCH will post the Notice of Intent to Award (NOIA) to the DCH website. The NOIA will be posted for seven (7) calendar days to allow for any potential protest of the intent to award.

### **3.11 NOTICE OF GRANT AWARD (NOGA)**

An official notice of grant award to a successful Grantee(s). The NOGA identifies the amount of the actual award, the name(s) of the Grantee(s) awarded and the name(s) of the unsuccessful Grantee(s) and the reason for not being awarded. The NOGA will be sent to the Grantee through the DCH Grants Portal. The NOGA is made public.

### **3.12 DENIAL OF AWARD**

Applicants that do not meet minimum requirements or submit non-responsive or incomplete applications may be denied funding.

Unsuccessful applicants will receive written notification from the DCH Grants Portal. Upon request, applicants may receive feedback regarding the strengths and weaknesses of their application, when appropriate.

### **3.13 GRANT AWARD TERMS & CONDITIONS (GATC) AGREEMENT**

Successful applicants will receive a GATC from the DCH Grants Portal via email. The GATC serves as the official grant agreement and outlines:

- a) Grant Terms and Dates
- b) Approved Grant agreement (the GATC) and deliverables
- c) Award conditions and reporting requirements
- d) Required certifications and supporting documents

Grantees must review, sign, and return the GATC and all required attachments within seven (7) calendar days of receipt.

Required documentation may include:

- a) Grant agreement and Deliverables
- b) Insurance documentation
- c) Tax compliance certification
- d) Any additional documents specified in the RFGA

The Grantee's Application and the Scope of Services are incorporated into the GATC by reference as if fully written therein.

### **3.14 GRANT EXECUTION REQUIREMENTS**

The Grantee is required to date and sign (using authorized signatures only) the award package electronically through the Docusign e-sign tool within seven (7) calendar days. The grant agreement is considered fully executed only after:

- a) Signature of acceptance to the **GATC**.
- b) Signature of acceptance of O.C.G.A. § 50-36-1(f)(1)(B), **Immigration Affidavit** – a secure and verifiable documentation must be included with the affidavit (i.e., Drivers' License).
- c) Signature of acceptance for the **Certifications Regarding Lobbying**

- d) Signature of acceptance to **Business Associate Agreement (BAA)** [when applicable to secure protected health information].
- e) Completion of **Debarment** certifications.
- f) Any other document necessary to effectuate the grant in accordance with applicable law.

Please note that some of the above required documents may be completed during the application process.

The effective start date of the grant is the date the final DCH signature is executed unless otherwise specified. Costs incurred before this date are not eligible for reimbursement unless explicitly authorized.

## SECTION 400 – FINANCIAL MANAGEMENT REQUIREMENTS

### 4.1 GRANTS MANAGEMENT SYSTEM (GMS)

The DCH Grants Portal is designed to ensure that all grant funds are managed in accordance with applicable GREAT Health program requirements. The system supports accurate financial reporting, oversight of program expenditures, and compliance with applicable grant regulations.

DCH Grants Portal will support the following activities:

- a) Maintaining accurate and complete financial records related to grant funds administered under the program;
- b) Tracking the receipt, obligation, and expenditure of program funds;
- c) Reviewing reimbursement requests and supporting documentation submitted by Grantees to ensure costs are allowable, reasonable, and consistent with program requirements;
- d) Maintaining documentation necessary to support financial transactions and program audits;
- e) Monitoring expenditures against approved budgets to ensure funds are used for authorized program purposes;
- f) Maintaining internal controls to safeguard grant funds and ensure proper authorization and documentation of financial transactions; and
- g) Supporting the preparation of financial reports required by the funding agency.
- h) Compliance with the requirements as set forth in 2 CFR 200.302(b).

### 4.2 PROGRAM COSTS

Program costs, also referred to as direct costs, include all necessary and reasonable expenses that directly support the implementation of approved program activities and are not classified as administrative or indirect costs.

Direct costs are those that can be clearly identified and specifically attributed to a particular grant-funded activity, project, or service with a high degree of accuracy. Examples may include personnel working directly on the program, program supplies, equipment used for program activities, and other costs directly associated with delivering program services.

All costs charged to the program must comply with applicable Federal cost principles, including those outlined in 2 CFR Part 200, Subpart E – Cost Principles.

Program costs that are explicitly determined to be unallowable will include but are not limited to the following:

- a) Pre-award costs;
- b) New construction costs;
- c) Costs to replace payment for clinical services that could be reimbursed by insurance;
- d) The cost of independent research and development; and
- e) Purchase of covered telecommunications and video surveillance equipment.
- f) Indirect costs

The salary rate limitation outlined in the current appropriations act applies to this program. As of January 2026, the salary rate limitation is **\$228,000**.

Costs must meet the following general criteria to be allowable under Federal awards:

Type	Description
<b>Reasonable Costs</b>	A cost is considered reasonable if the nature and amount reflect what a prudent person would incur under similar circumstances. Factors such as market prices for goods or services, whether the cost is necessary for the performance of the award, and the actions that a prudent person would take are considered.
<b>Allocable Costs</b>	A cost is considered allocable if incurred specifically for the Federal award or benefits both the Federal award and other activities, and the cost can be reasonably distributed based on relative benefit. The cost must be necessary to the overall operation of the organization and assignable in part to the Federal award.
<b>Consistently Treated Costs</b>	Costs must be consistently treated as either direct or indirect (administrative) costs. This means that costs must be treated consistently in similar circumstances and must be treated consistently as either direct or indirect costs for all Federal awards.
<b>Conformance with Limitations or Exclusions</b>	Costs must conform to any limitations or exclusions set forth in 2 CFR § 200 or in the award itself. Certain types of costs may be unallowable or subject to specific restrictions under Federal guidelines.

<b>Reasonable Documentation</b>	Costs must be adequately documented. Documentation should be sufficient to demonstrate compliance with Federal requirements and the terms and conditions of the award. This includes receipts, invoices, personnel records, timesheets, and other records as appropriate.
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DCH and/or the GMV may review program costs submitted by Grantees to ensure that expenses are properly classified and comply with applicable Federal cost principles, including those established under 2 CFR Part 200.

Grantees must maintain documentation supporting all program costs charged to the grant.

#### **4.3 COST ALLOCATION**

Costs that benefit multiple programs or activities must be allocated in a manner that is reasonable, consistent, and supported by documentation. Grantees must ensure that only the portion of a cost that directly benefits the funded program is charged to the grant.

Grantees must maintain a documented cost allocation methodology that explains how shared costs are distributed among programs or funding sources.

Acceptable allocation bases may include, but are not limited to:

- a) Personnel time and effort devoted to each program;
- b) Proportional use of facilities or equipment;
- c) Number of program participants served;
- d) Other reasonable and consistently applied allocation methods; and
- e) All allocated costs must be supported by adequate documentation, such as time and effort records, usage logs, or other records demonstrating the basis for the allocation.

DCH may review cost allocation methodologies and supporting documentation to ensure compliance with program requirements. Costs that are determined to be excessive, unsupported, or not reasonably allocable to the program may be disallowed.

Grantees must retain documentation supporting cost allocations in accordance with applicable record retention and audit requirements.

#### **4.4 ADMINISTRATIVE COSTS**

Administrative costs are indirect costs incurred for common or joint organizational purposes that support multiple activities or programs. These costs typically benefit more than one program objective and are necessary for the overall operation and management of the organization.

Unless otherwise authorized or allocated by DCH as administrative funds, indirect/administrative costs cannot be charged to the program. Costs allocable to the program must directly benefit the project funded by GREAT Health.

#### **4.5 REQUEST FOR BUDGET MODIFICATIONS (LESS THAN/EQUAL 10%)**

Grantees may identify the need to make minor adjustments to their approved program budget. A reallocation of up to ten percent (10%) of an individual budget line item may be made without prior written approval from DCH, provided that the adjustment does not change the total grant award amount.

All budget adjustments must:

- a) Occur within the approved grant period;
- b) Remain within the overall approved grant amount; and
- c) Not introduce new budget categories that were not included in the originally approved budget

Grantees must document any budget adjustments and report them with the submission of their periodic financial or fiscal report. The report should clearly identify the affected budget line items and the updated expenditure amounts.

DCH will review reported budget adjustments to ensure compliance with program requirements and may request additional documentation if necessary.

Additional restrictions or thresholds for budget modifications may apply depending on the funding source (e.g., Federal or State funds).

#### **4.6 REQUEST FOR BUDGET MODIFICATIONS (GREATER 10%)**

Budget modifications that exceed ten percent (10%) of an approved budget line-item require prior written approval from DCH.

Grantees must receive written preapproval from DCH for budget modifications before implementing any requested changes. Budget modifications may not be applied retroactively unless an exception is approved by DCH with adequate justification.

Requests for budget modifications may include:

- a) Transfers exceeding 10% of a budget line item between cost categories.
- b) The addition or removal of budget line items not included in the originally approved budget.
- c) Changes necessary to support approved program activities or deliverables.

All requests must include sufficient documentation explaining the reason for the proposed change and how the modification will support the successful completion of the program objectives.

DCH will review each request to ensure that:

- a) The proposed modification is reasonable and necessary.
- b) The change does not alter the overall purpose or intent of the grant.
- c) The modification supports the approved GATC and/ or Scope of Services and deliverables.

Budget modifications must not increase the total grant award amount unless specifically authorized by the funding source.

If a modification request is approved, DCH will issue written approval and updated grant documentation reflecting the revised budget. Grantees must not implement budget changes until written approval has been received.

DCH will notify the Grantee of the approval or denial of the request within thirty (30) calendar days, unless additional information is required to complete the review.

If grant funds remain unexpended after all program requirements have been satisfied, the remaining balance will be unbillable to DCH unless prior approval has been granted for a continuation, extension, or other approved use of remaining funds.

#### **4.7 APPROVAL AND MODIFICATION OF DELIVERABLES**

All program deliverables, project timelines and work plans must be approved in writing by DCH or its designee before award disbursement.

The Grant Agreement may be amended in writing from time to time by mutual consent of the parties. All amendments to the Agreement must be in writing and fully executed by duly authorized representatives of DCH and the Grantee.

Grantees must obtain prior written approval from DCH before making any changes to approved program deliverables, project timelines, or work plans.

Requests for modifications must be submitted in writing and include a clear explanation of the proposed change, the reason for the modification, and how the change will continue to support the approved program objectives and scope of work.

DCH will review each request to determine whether the proposed modification:

- a) Is reasonable and necessary for successful program implementation;
- b) Maintains the original purpose and intent of the grant; and
- c) Continues to support the approved Grantee Application, GATC, Scope of Services and deliverables.

Grantees may not implement changes to deliverables, timelines, administrative responsibilities, or other terms of the grant agreement until written approval has been received from DCH.

Failure to obtain prior written approval for material changes to program deliverables or GATC or Scope of Services may result in corrective action, including denial of associated costs, modification of the grant award, or termination of the grant agreement and other remedies which may be available to DCH at law and equity.

#### **4.8 TERMS OF PAYMENT**

The terms of payment provide the financial reporting guidelines for organizations receiving grant funds from DCH and prescribe the uniform accounting procedures for approving and reimbursing expenses.

The amount will be determined and documented in the GATC, which reflects the terms dictated in the application to support the functions and intent of the grant. Frequency of payment will be determined within final approval of program deliverables prior to award disbursement. The final decision will be provided to the Grantee via written notification.

#### **4.9 PAYMENT METHOD**

The GREAT Health Program provides three types of funding distributions to support Grantees. Understanding the applicable method for your grant is essential to ensure timely and accurate receipt of funds.

##### **a) Reimbursement Upon Deliverables**

Grantees are reimbursed after completing and submitting approved deliverables. Payment is contingent on verification that the deliverables meet program requirements:

- i.** Submit deliverables as outlined in the grant agreement; and
- ii.** Include all required documentation with each submission.

##### **b) Invoice Payment by Milestone**

This method allows Grantees to submit invoices tied to specific project milestones. Payments are made once milestones are achieved and verified.

- i.** Clearly identify the milestone on the invoice;
- ii.** Provide supporting documentation demonstrating milestone completion; and
- iii.** Payments may be issued incrementally, corresponding to milestone completion.

##### **c) Standard Invoice Payment**

Under this method, Grantees submit invoices for approved expenses or services rendered according to the grant agreement. Payment is processed once invoices are reviewed and approved.

- i** Ensure invoices reflect the agreed-upon contract / grant or budget;
- ii** Include all required supporting documents;

- iii Submit invoices according to the schedule or terms outlined in the grant agreement; and
- iv Submit proof of payment of invoices prior in the subsequent payment request.

**d) Key Considerations for All Funding Methods**

Regardless of the method used:

- i Timely and accurate submission of deliverables or invoices is essential;
- ii Approval of deliverables, milestones, or invoices is required before funds are released; and
- iii Questions regarding funding methods should be directed to your program contact to avoid delays in payment.

**4.10 PAYMENT REQUEST (INVOICING) AND REIMBURSEMENTS**

To receive funding, subrecipients submit payment requests/invoices detailing the work performed during a covered period. The GMV reviews the pay applications and verifies that all supporting documents are attached and the accuracy of the payment request submission. If adjustments to the payment request documentation are necessary, revision comments are sent to the Grantee who modifies their request or provides additional documentation. Once approved, the GMV recommends payment to DCH who disburses the funding.

**4.11 STANDARDS FOR SUPPORTING DOCUMENTATION**

Invoices submitted to DCH must be accompanied by adequate supporting documentation which demonstrates legal obligations such as staff time already invested in the project/program, attendance records or logs of activity (i.e., trip reports), delivery receipts or invoices, approvals of salary increase, and other processing and payment documentation including vouchers and cancelled checks. Invoices submitted without all required details and reports will be returned to the Grantee and will not be processed until DCH receives correct and complete documentation.

All documentation/records must be properly maintained and should contain original signatures of authorized Grantee staff. Erroneous invoices received before the due date, will be returned to the Grantee for proper assembly.

In preparation for submitting invoices, grant recipients should be prepared to provide the following documentation to support each transaction, as applicable:

- a) **Procurement policies:** Written policies documenting the means for how goods or services are acquired. Reference 2 CFR § 200.318(a). State agencies should follow Procurements by States under § 200.317;
- b) **Solicitation package:** A detailed package meant for distribution to procure for goods or services. Common items found within package include – bid form, qualifications, specifications for requested good or service, evaluation criteria, directions how to deliver bids and due dates;

- c) **Publication / Advertisement:** Evidence of the publication, advertisement and / or solicitation of bids in the form of website postings, newspaper advertisements, etc.;
- d) **Proposals / Bid packages:** Proposals from all bidders, including qualifications, scope, approach, resumes, pricing schedules and other information submitted by offerors;
- e) **Bid evaluations:** Quantitative and / or qualitative evaluations prepared by those charged with reviewing and scoring bid packages received from offerors;
- f) **Contracts and / or Purchase Orders (PO):** Terms and conditions of the agreement with awarded contractor / Grantee, including schedules, pricing exhibits, amendments and other relevant documentation. Contracts / Agreements and POs must include CFR Appendix II to Part 200;
- g) **Noncompetitive procurement justification (Sole Source):** To be utilized only when certain conditions exist and must include detailed explanations of said conditions, in addition to other justifications as outlined in DCH's Sole Source Justification Form. Reference 2 CFR § 200.320(c);
- h) **Self-certification of increase to the micro-purchase threshold:** To be utilized only when certain conditions exist and must include detailed explanations of said conditions. Threshold may be increased from \$10,000 to \$50,000, if conditions are met. Reference 2 CFR 200.320(a)(1)(iv);
- i) **Invoices:** Third party statement which lists good delivered or services rendered during the performance period. If full value of invoice is not being requested for reimbursement, subrecipients should specifically identify line items or portions being requested;
- j) **Payroll Registers:** A system generated report which indicates personnel salary, wages and fringes paid by the entity. Pay period should be visible to ensure within the proper grant period. Calculations for partial reimbursement, if not evident on register, should be provided to avoid delays in reimbursement. Timesheets, pay stubs and other evidence must be made available upon request; and
- k) **Proof of Payment:** Cancelled check, bank statement, and / or an ACH authorization / remittance produced by the financial institution. Should include contractor/Grantee / employee name, payment date and amount. In the event a payment includes multiple invoices paid, a pay stub listing out all invoices paid will assist in ensuring tested invoice is included within payment. Evidence of payment is required for ALL transactions sought for reimbursement. For payments made with credit cards, subrecipients will be asked to provide credit card statements.

#### 4.12 FREQUENCY AND DEADLINE FOR INVOICING

To ensure timely processing of invoices, the following procedures will be followed upon receipt.

##### a) Review of Invoice

The GMV or his or her designee will review each invoice to verify that required deliverables or milestones have been met and that all necessary supporting documentation has been submitted.

If documentation is missing or incomplete, GMV will notify the Grantee and request the required information before the request can proceed.

**b) Verification of Grant Status**

As part of the review process, GMV will confirm that the grant is active and eligible for payment in accordance with the grant award executed and any approved amendments or extensions.

**c) Payment Authorization**

Once the invoice has been reviewed and approved, it will be forwarded to the appropriate DCH staff for payment processing.

**4.13 PAYMENT OF INVOICES**

Payment will be issued after DCH confirms receipt and approval of the required deliverables.

Payment approvals must be documented, and payments will be processed in accordance with applicable financial and program requirements.

**4.14 WITHHOLDING PAYMENT**

If the Grantee fails to comply with any of the reporting requirements, DCH may temporarily withhold payment until the Grantee achieves compliance. The Department may opt to deny payment for all or part of the reported cost(s) if the Grantee remains out of compliance.

**4.15 COST-SHARING**

This program has no cost-sharing requirement, meaning the Grantee does not need to contribute to the costs of this project.

**4.16 END OF FUNDING PERIOD**

The end of the funding period is specified in the GATC and / or the Scope of Services.

**4.17 ANNUAL GRANT APPLICATION**

Grantees must submit an application each year to continue receiving funding under this program. All applications are subject to the application review process outlined in this manual. Annual grant awards are contingent upon the funding received by DCH from CMS.

**4.18 GRANT TERMINATION**

The Department reserves the right to terminate a grant for any of the following reasons:

- a) Noncompliance with the GATC, the Scope of Services, the MOU, the NOA, or other legal requirements;
- b) Continuation of the funded program would be detrimental to the State and or the funding entity;
- c) Convenience of DCH, upon thirty (30) calendar day notice;

- d) Grantee's failure to provide information sufficient for continued release of funds;
- e) Grantee's failure to account properly for funds already disbursed;
- f) Unlawful act that prohibits DCH from continuing its relationship with the Grantee; or
- g) Any other act DCH or the funding entity deems to be sufficient grounds for termination.

Termination rights of the Grantee may vary and are specified in the GATC and / or Scope of Services.

#### **4.19 INDEMNIFICATION**

Unless prohibited by law, Grantee hereby releases and agrees to indemnify and hold harmless Indemnitees. Indemnification obligations are specified in the GATC and / or Scope of Services.

## SECTION 500 – APPEAL CHALLENGE PROCEDURES

### 5.1 APPEAL CHALLENGES

Appeals must be submitted in writing, signed by an authorized Grantee official. An appeal has been “filed” when it has been received by the RHTP Reviewing Officer at [RHTP.Grant@dch.ga.gov](mailto:RHTP.Grant@dch.ga.gov). Applicants / Grantees are responsible for checking the RHTP website: [About the Program | Georgia Rural Health Transformation](#) as applicable to view the NOIA and related Grant documents. All appeals will be reviewed by an RHTP Reviewing Officer designated by DCH’s Commissioner. A decision by the RHTP Reviewing Officer will be the final DCH administrative decision regarding the appeal.

Type of Protest/Appeal	Protest/Appeal Filing Deadline
Appeal to Competitive Solicitation Process	Two (2) business days prior to the closing date and time of the solicitation
Challenge to Notice of Intent to Award (NOIA)	Seven (7) calendar days from the date of the NOIA posting
Non-Compliance Appeal	Ten (10) calendar days from the date of Non-compliance Notice

### 5.2 SUBMISSION REQUIREMENTS for APPEALS

The appeal must be made through the email address above and provide:

- i. Contact information for the petitioner.
- ii. Identify the disputed Notice of Intent to Award, or the non-compliant issue(s).
- iii. A clear and coherent statement of reasons for the appeal.
- iv. Whether an appeal has been filed with any other government agency, and if so, which agency.
- v. Any supporting documentation to substantiate any claim.

### 5.3 APPEALS NOT ACCEPTED

Any appeal submitted for any reason listed below will be automatically deemed denied.

Appeals will not be accepted:

- a) for incomplete applications;
- b) based upon dissatisfaction with the amount of a grant award;

- c) if received after the deadlines specified above; and/or
- d) based upon DCH cancellation of a proposed grant award.

#### **5.4 BASIS FOR APPEALS**

The following are acceptable reasons to file for appeal:

- a) The application was declined on the basis of review criteria other than those appearing in the guidelines.
- b) The application was declined due to influence of selection committee who may have willfully failed to disclose conflicts of interest.
- c) The application was declined because erroneous information was provided by DCH or its designees during question-and-answer period, if applicable.
- d) To contest a DCH finding of non-compliance of grant award.

#### **5.5 IDRR APPEAL PROCESS**

Grantee may request an Informal Dispute Resolution Review (IDRR) by the RHTP Reviewing Officer to:

- Contest the Competitive Solicitation Process
- Challenge a Notice of Intent to Award solicitation/NOIA
- Contest an issue of non-compliance

The process is as follows:

- a) Grantee submits a proper appeal within the requisite timeframe as stated above.
- b) DCH reviews the appeal submission (Grantee may be asked to submit additional documentation or evidence.)
- c) RHTP Reviewing Officer will perform a desk review of the appeal.

#### **5.6 ISSUANCE of DECISION**

The decision of the RHTP Reviewing Officer is the final administrative decision of DCH.

##### **a.) Challenge a Competitive Solicitation Process or a NOIA**

Upon review of the submitted appeal documentation, the RHTP Reviewing Officer shall either confirm the NOIA selection(s) or develop and implement an appropriate remedy based upon applicable laws, regulations and these policies and procedures. If the Reviewing Officer's decision changes a funding decision as a result of an appeal, the timing of the payment of the Grant will be coordinated by DCH. The decision of the RHTP Reviewing Officer is the final administrative decision of DCH.

**b.) Contest a finding of non-compliance**

Upon review of the submitted appeal documentation relating to a Grant compliance matter, the RHTP Reviewing Officer shall issue a decision. The decision of the RHTP Reviewing Officer is the final administrative decision of DCH. Grantee may be allowed to correct/cure deficiency or noncompliant issue(s).

The Department may take any or all of the following actions, as appropriate, to address non-compliance with Grant terms and conditions:

- i.** Require the submission of a Corrective Action Plan, subject to DCH review and approval;
- ii.** Require return of funding;
- iii.** Suspend payments;
- iv.** Refer issues to the DCH Office of Inspector General (OIG) or other appropriate oversight agency;
- v.** Terminate the Grant issued to Grantee in whole or in part;
- vi.** Other remedies to promote compliance with GREAT Health Grant terms.

## SECTION 600 – GRANTEE COMPLIANCE

### 6.1 PURPOSE

DCH is required to monitor activities under Federal awards to ensure compliance with applicable Federal requirements and that performance expectations are being achieved. Monitoring must cover each program, function, or activity and will include subrecipient monitoring as appropriate.

Monitoring activities are discussed throughout the Performance and Financial Monitoring and Reporting section of 2 CFR § 200 (§ 200.328 thru 200.343).

Monitoring serves as a mechanism to identify, prevent and correct mismanagement, fraud, waste or abuse. Additionally, it is intended to achieve the following:

- a) Verify recipients and subrecipients adhere to Federal statutes, regulations, and the specific terms of the grant agreement;
- b) Track performance to assess whether projects are achieving stated goals, objectives and timelines;
- c) Provide financial oversight to ensure funds are spent appropriately, financial management systems are adequate and costs are allowable;
- d) Identify high-risk projects and provide mitigation for corrective actions; and
- e) To ensure Grantees are in compliance with grant agreements.

RHTP monitoring includes but is not limited to these monitoring activities:

- a) Risk-based monitoring plans that classify subrecipients as high, medium, or low risk;
- b) Onboarding and training for subrecipients on allowable costs and reporting;
- c) Site visits or virtual monitoring for higher-risk entities;
- d) Audit review and resolution tracking;
- e) Standardized monitoring tools, checklists, and Corrective Action Plans templates; and
- f) Documentation of technical assistance provided to subrecipients.

### 6.2 ROLES AND RESPONSIBILITIES OF DCH GRANT ASSESSOR

The DCH Grant Assessor will assess the progress of GREAT Health in meeting identified CMS metrics by measuring overall status as well as specific milestones reached in operationalizing the GREAT Health policy vision.

These high-level Assessor responsibilities include:

- a) Designing and implementing a comprehensive evaluation framework aligned to GREAT Health program goals, initiatives and strategies, and performance metrics.
- b) Developing logic models, evaluation questions, and measurable indicators to assess program effectiveness, quality, cost, and impact.
- c) Establishing data collection strategies, including quantitative and qualitative methods, ensuring compliance with data governance, privacy, and security standards.
- d) Analyzing claims, encounter, operational, and stakeholder data to assess outcomes, identify trends, and evaluate return on investment and cost-effectiveness.
- e) Monitoring program performance against benchmarks and requirements, identifying risks, gaps, and areas for continuous improvement.
- f) Producing clear, evidence-based reports, dashboards, and briefings for DCH leadership, Federal partners, and external stakeholders.
- g) Preparing annual reports aggregating data from grant-funded projects for distribution to all interested parties.
- h) Providing actionable recommendations to inform policy decisions, program refinements, and future funding strategies.

### **6.3 RISK ASSESSMENT**

The Department will conduct risk assessments of each Grantee to evaluate potential risks posed by the grantee to determine the amount and frequency of monitoring procedures. The Department will evaluate financial stability, management systems and standards, history of performance, audit reports and findings, and the ability of the applicant to implement requirements.

The risk assessment will evaluate the following:

- a) Financial stability.  
The Grantee's record of effectively managing financial risks, assets, and resources;
- b) Management systems and standards.  
Quality of management systems and ability to meet the management standards prescribed in this part;
- c) History of performance.  
The Grantee's record of managing previous and current Federal awards, including compliance with reporting requirements and conformance to the terms and conditions of Federal awards, if applicable;
- d) Audit reports and findings.  
Reports and findings from any audits and compliance review including but not limited to those pursuant to 2 CFR Part 200, Subpart F or the reports and findings of any other available audits, if applicable; and

e) Ability to effectively implement requirements.

The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on recipients of Federal awards.

Additionally, the following are considerations when determining the frequency of monitoring activities:

- a) Frequency of prior monitoring and disposition of findings (if any);
- b) Dollar value of project;
- c) Notification/alerts of potential problems;
- d) Complexity of project; and
- e) In follow-up to training and/or technical assistance provided.

A risk assessment score (low risk, medium risk, or high risk) is assigned to each Grantee, which directly relates to the level of monitoring for each. The risk assessment will be updated annually, along with a subsequent monitoring plan for each Grantee.

#### 6.4 INFORMAL MONITORING

Informal monitoring consists of regular management, programmatic and supervisory activities taken by the Department to ensure compliance with terms and conditions of the grant. Any communication between DCH staff and/or the GMV and/or Grantee about project activities, funding, reporting, quality of performance, or internal controls constitute informal monitoring.

#### 6.5 FORMAL MONITORING

The Department will collaborate with CMS in the implementation and conducting of monitoring activities to assess the risk of non-compliance, fraud, and/or fiscal negligence as required for any subrecipients / Grantee. Unless CMS directs otherwise, this process begins with an evaluation by the GMV of inherent risks to the program, the GMV's evaluation of specific risk at the grant application level, and individual evaluations of the internal control and performance environment of each Grantee. These assessments directly impact the level of detailed test work performed during annual audits, helping to ensure the extent of auditing procedures is commensurate with the level of risk for each Grantee.

Inherent risk is assessed across the following functional areas (as applicable):

▪ Reporting	▪ Claims and disputes
▪ Procurement	▪ Document control
▪ Disbursements	▪ Milestone fieldwork
▪ Change Management	▪ Others as identified

As a part of its ongoing monitoring efforts, the GMV shall conduct regular audits of financial records, performance data, and other information for each Grantee. The frequency and extent of these procedures will vary by Grantee, as determined by the risk assessment or other criteria, and typically include inquiry, observation, and inspection of data and records, within the following functional areas (if applicable):

▪ 2 CFR Compliance / Single Audit	▪ Subcontracting
▪ State Reporting	▪ Change Orders
▪ Procurement	▪ Inspections
▪ Disbursements	▪ Environmental

The GMV employs transparent communication with each Grantee by providing a monitoring notification letter to each Grantee, inclusive of the scope of the monitoring event. During fieldwork, auditors will conduct interviews with Grantee personnel, obtain and review outside auditor reports, analyze commitment and expenditure data, and review management and performance reporting, as applicable. The GMV will select sample transactions for further testing, and will perform vouching, recalculation, validation, and other auditing techniques to identify if instances of non-compliance, fraud, or fiscal negligence have occurred. Observations identified during audits will be shared with Grantees, and reportable findings communicated to the State Auditor and Federal cognizant agency, as applicable. The GMV will maintain a log of observations and findings for each Grantee, provide this information to DCH, and will conduct follow-up procedures as determined. Depending on the severity of the issue and any determined actions by the State or Federal agencies, DCH may require of a Grantee a repayment of funds, reduce future payments, or impact an organization’s eligibility for future programs.

In some instances, compliance and monitoring procedures may involve inquiry, observation, and inspection of information provided by personnel other than the subrecipient / Grantee.

**6.6 NON-COMPLIANCE**

The Department may take steps to address non-compliance or unsatisfactory performance by the Grantee.

See Section 500 – Appeal Challenge Procedures for additional information