



— Massachusetts —  
COMMUNITY HEALTH AND  
HEALTHY AGING FUNDS

Request for Proposals (RFP)

**At-A-Glance**

<b>Available Funding</b>	\$15M – 20-25 awards expected
<b>Estimated Grant Start Date</b>	July 1, 2026
<b>Eligible Applicants</b>	<ul style="list-style-type: none"><li>• Massachusetts-based non-profit 501(c)3 organizations or groups with a 501(c)3 fiscal sponsor</li><li>• Quasi-governmental organizations</li><li>• Municipalities</li><li>• Current grantees who are Massachusetts Association of Regional Planning Agencies (regional organizations that represent a wide range of communities) or statewide organizations, and who are in their final two years of their current grant, can apply for a Full Grant for an approach that reaches a <u>different geography or population</u></li></ul>
<b>Eligible Activities</b>	Community-centered approaches that disrupt barriers to health and their root

	causes including structural racism, poverty, and deep power imbalances.
<b>Ineligible Applicants</b>	<ul style="list-style-type: none"> <li>• Current grantees</li> <li>• For-profit businesses</li> <li>• Hospitals and colleges/universities are not eligible to apply as lead applicants. Hospitals that have contributed to Determination of Need (DoN) funds are not eligible to receive any funding. <i>In places where hospitals and colleges or universities play key roles as anchor institutions, these entities can be included as a partner or subcontractor (excluding hospitals that have contributed DoN dollars) with a community-based organization as the lead grantee.</i></li> </ul>
<b>Ineligible Activities</b>	<ul style="list-style-type: none"> <li>• Capital expenditure</li> <li>• Research</li> </ul>
<b>Application Deadline</b>	March 31, 2026, at 5:00 PM EST
<b>Contact</b>	<p>Please contact <a href="mailto:grants@hria.org">grants@hria.org</a> for assistance with the application portal.</p> <p>For programmatic questions, please contact: <a href="mailto:MACHHAFunds@hria.org">MACHHAFunds@hria.org</a>.</p>
<b>Website</b>	<a href="http://www.mahealthfunds.org/apply">www.mahealthfunds.org/apply</a>

## Background

In January 2017, the Massachusetts Department of Public Health (MDPH) completed a revision of the Determination of Need (DoN) regulation resulting in the creation of the Massachusetts Community Health and Healthy Aging Funds (the Funds). Resources for the Funds are from hospitals, long-term care facilities, and other healthcare entities required to contribute to the Funds. Click [here](#) for additional information about the MDPH's DoN program.

## Purpose

The Funds are an opportunity to disrupt barriers to health in communities across Massachusetts. They represent both a grantmaking and capacity-building resource to invest in organizations and communities addressing the root causes of health inequities through upstream policy, systems, and environmental (PSE) change approaches. The Funds focuses on investing in communities that have not historically and routinely benefitted from DoN funding.

The Funds are guided by the following principles:

- The [Social Determinants of Health \(SDoH\)](#) account for significant variation in [health outcomes](#).
- Policies, systems, and social/physical environments are historically based in [structural and institutional racism](#) and other forms of oppression.
- Structural and institutional racism and other forms of oppression need to be understood and disrupted to

eliminate inequities in population health outcomes and the SDoH.

The vision of the Funds is that, through contributions to equitable systems across sectors and the explicit prioritization of people of color and older adults, Massachusetts communities are transformed so that all residents have an equitable opportunity to have the highest quality of life possible.

The Funds are using a Leading with Race and Racism approach which recognizes that people of color in Massachusetts have historically and consistently had less opportunity to lead a healthy life. The Funds also recognize that Root Causes can create barriers to health for all types of populations. We encourage communities to lead with Race and Racism explicitly but not exclusively.

## **Funding Priorities**

The Funds prioritizes funding:

1. Communities that have not historically and routinely benefited from DoN funding.
2. Communities with high rates of health inequities.
3. Community-based organizations where staff and leadership are reflective of the populations they serve and have lived experiences and/or lived experiences of oppression?

In light of the current political and social landscape, we aim to address key challenges during this funding cycle. We will prioritize organizations advancing advocacy and policy efforts related to their identified Social Determinant of Health (SDoH). These efforts aim to influence public systems, laws, and institutions to drive equitable, just, and community-centered change.

- Advocacy is a general term for activities that aim to change public opinion or support a cause. Advocacy can include raising awareness, offering support, and organizing communities. It may involve drafting legislation, engaging with media, mobilizing public support, providing testimony to government officials, or signing petitions and letters aimed at shaping public policy. Ex: *Legislative advocacy*: Engaging with lawmakers to support or oppose specific bills or policies.
- Policy work involves researching, developing, analyzing, and promoting policies that address systemic issues. An example of *Policy implementation* includes supporting the rollout of policies and ensuring they are applied equitably.

Additionally, we will prioritize Immigrant-facing organizations that are led by immigrants or those with lived experience, directly engage immigrant communities, and center their voices in leadership, decision-making, and program design.

## What will the MA Community Health & Healthy Aging Funds support?

The Funds invest in approaches that work to identify, understand, and address [Root Causes of Health](#) through policy, systems, and environmental (PSE) change strategies that positively impact community conditions and health outcomes. **There are three separate funding streams for applicants to choose from; please note that each funding stream has different application questions.**

**Funding Stream Comparison**

	<b>Policy, Systems, and Environmental Change (PSE)</b>	<b>Healthy Aging</b>	<b>Community Health Improvement Planning (CHIP)</b>
<b>Approach</b>	PSE Change approaches – local, regional, or statewide levels	Healthy aging focused PSE change approaches – local, regional, or statewide levels	Local and regional CHIP
<b>Priority Geography</b>	Communities outside of Boston that have not historically	Gateway cities and rural areas that have not routinely benefitted	Communities outside of Boston that have not historically and

	and routinely benefitted from DoN dollars and have high rates of health inequities	from previous local DoN funding	routinely benefitted from DoN dollars and have high rates of health inequities
<b>Priority Population</b>	Communities with high rates of health inequities	Older adults; communities with high rates of health inequities	Communities with high rates of health inequities
<b>Who can apply</b>	Organizations that meet eligibility criteria	Organizations that meet eligibility criteria	Organizations or coalitions that meet eligibility criteria, which are leading or participating in a collaborative CHIP process
<b>Award Amounts by Grant Type</b>	<ul style="list-style-type: none"> <li>• <b>Planning:</b> Up to \$50K/yr, 1-2 yrs</li> <li>• <b>Full:</b> Up to \$200K/yr, 3-5 yrs</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Planning:</b> Up to \$50K/yr, 1-2 yrs</li> <li>• <b>Full:</b> Up to \$100K/yr, 3-5 yrs</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Planning:</b> Up to \$50K/yr, 1-2 yrs</li> <li>• <b>Full:</b> Up to \$375K total, 3-5yrs</li> </ul>

## Grant Types

### **Planning Grants**

The Funds will take applications from organizations that seek to move from short-term, time-limited efforts to long-term, sustainable approaches. **Planning Grants** will support planning, technical assistance, capacity building, and provide learning opportunities for emerging PSE, Healthy Aging, and CHIP approaches. This opportunity is to support organizations that seek organizational capacity building and technical assistance with upstream approaches and moving their work toward Policy, Systems, and Environmental (PSE) Change.

- ***Entities cannot apply for a Planning Grant and a Full PSE, CHIP or Healthy Aging Grant in the same application cycle.*** Previous Funds awardees are also ineligible to apply for Planning Grants. Recipients of planning grants are welcome to apply for a full grant in the next funding cycle; however, funding is not automatically guaranteed for planning grant grantees.

### **Full Grants**

**Full Grants** will support implementation focused activities, including technical assistance, capacity building for PSE, Healthy Aging, and CHIP approaches with strong upstream approaches.

- Organizations applying for a Full Grant may apply to more than one funding stream.

## Funding Streams

### **Funding Stream A: Policy, Systems, and Environmental (PSE) Change: General**

The PSE funding stream will invest in community-centered approaches that are intentional in addressing the root causes of inequitable health outcomes through policy, systems, and/or environmental change. We use the following definitions of PSE change. [See more about PSE change here.](#)

- **Policy Change** - Policy change includes the passing or changing of laws also known as legislation, as well as ordinances, resolutions, mandates, regulations, or rules. Government bodies, park districts, healthcare organizations, worksites, and other community institutions (schools, jails, daycares, etc.) all make policies. Policy change strategies include advocacy & education, civic engagement, and power building.
- **Systems Change** - Systems change creates fundamental shifts in how problems are solved and changes the way resources and services get distributed. It involves changes made to the policies, processes, power structures, and relationships within an organization or across organizations.

- **Environmental Change** - Environmental changes involve strategies that involve the economic, social, or physical surroundings or contexts that affect health outcomes. Environmental strategies create more lasting change when paired with systems and policy changes. Please note that the Funds project does not support capital expenses.

### **Funding Stream B: Healthy Aging**

The Healthy Aging funding stream supports strategies that focus on:

- Addressing the root causes of inequitable health outcomes through PSE change strategies, that emphasize the social determinants of health and engage communities most impacted by the SDoH that the organization seeks to focus on.
- Aligns with the [ReiMAgine Aging 2030: The Massachusetts Plan](#): This plan is a five-year roadmap to improve aging in the Commonwealth. Developed with input, from residents and community partners across the state, it aligns partners around a shared vision and outlines six key goals with strategies and actions for state agencies, local communities, organizations, and the private sector to help older adults thrive in Massachusetts.
- Focus on the [eight multi-sector domains of livability for age-friendly communities](#) defined by the World Health Organization (WHO) and the AARP.

- The Healthy Aging funding stream will prioritize funding support to [Gateway Cities](#) and [rural communities](#) that have not routinely benefitted from previous local DoN community health funding and have high rates of health inequities. Strategies may focus on geographic or population-based communities at the local, regional, or statewide levels.

### **Funding Stream C: Community Health Improvement Planning Processes (CHIP)**

The CHIP funding stream will invest in the development of local and/or regional CHIPs that help advance PSE change. During this funding period, we will prioritize the assessment, planning, and implementation phases of a community health improvement process.

A CHIP uses Community Health Assessment (CHA) data to identify priority issues, develop and implement strategies for action, and establish accountability to ensure measurable health improvement, which are often outlined in the form of a CHIP. A community health improvement process looks outside of the performance of an individual organization serving a specific segment of a community to the way in which the activities of many organizations contribute to community health improvement.

A CHIP is a long-term, systematic effort to address public health problems based on the results of community health assessment activities and a community health improvement process. This plan is used by health, human service, and governmental organizations, in collaboration with community partners, to establish priorities and align resources. A community health improvement plan is critical for developing policies and defining actions to prioritize efforts that promote health. It should define the vision for the health of the community through a collaborative process and address the range of strengths, challenges, and opportunities that exist in a community to improve the health status of all individuals within the community. Please click [here](#) for more resources on CHIP assessment and planning processes.

## **How to Apply**

Submit your proposal through the online form portal by March 31, 2026, at 5:00 PM EST. All applicants will be notified of the status of their submission in June 2026.

The application will include multiple sections:

- Organizational Eligibility Questionnaire
- Organization and Contact Information
- Application Question Responses

- Note: Each funding stream (PSE, Healthy Aging, CHIP) has different application questions.
- Required Attachments
  - Proposal (Application Question Responses)
  - Workplan (Template Provided)
  - Budget (Template Provided)
  - W-9\*
  - Tax Exempt Designation Documents\*

*\* If applying with a fiscal sponsor, please attach their W9 and Tax-Exempt Designation.*

## **Required Attachments in Application**

### **Proposal (Application Questions Responses)**

- Applicants can submit a Word document or PDF of a PowerPoint file for the proposal. Either format can use a mix of bulleted lists, narrative writing, and visual media, as long as you are able to clearly answer all elements of the application questions.
- Submission Format:
  - Word document: 4-6 pages, single spaced
  - PDF of PowerPoint file: 20-24 slides. PowerPoint slides should incorporate visuals and concise points rather than relying solely on narrative text.

### **Workplan (Template Provided)**

- The Workplan is intended to help applicants operationalize the proposed approach and help the

Funds understand how your organization will implement the approach. Please include at **least three major activities** you will conduct as part of your approach with three anticipated milestones. You are welcome to include additional details, but we understand that you may not yet have each specific detail of your approach for the full lifespan of the grant planned out yet. Our team will work with grantees to further develop their Workplan.

- Template Format: Downloadable Word document
- Submission Format: PDF

### **Budget (Template Provided)**

- Submit a budget for the full number of years you are requesting funding. For each line item, please provide a brief description of how the line item connects to the proposed activities. The Workplan and Budget work together, and there should be some alignment between proposed activities and the allocation of dollars.
- We understand that some costs for future years may be estimates. There will be an opportunity for grantees to revise their budgets, *but not the total budget amount*. Grantees may make amendments to their budgets as needed.
- Template Format: Downloadable Excel document
- Submission Format: Excel document
- Definitions (Listed in Alphabetical Order):

- **Capital Expenditures (ineligible activity)** - Expenses that are incurred to acquire, upgrade, or maintain long-term assets such as property, equipment, or infrastructure. Examples include constructing a building, buying equipment to build greenhouses, purchasing land, and more.
- **Community Engagement** - Expenses that would be considered community engagement would include: honoraria, stipends, meeting space for community events, meals provided at community events, transportation to and from community events, stipends/vouchers provided to community members for participation, time or funding to support language interpretation and/or translation related to community engagement, and any other direct costs associated with engaging the impacted community in leadership, design, implementation, and evaluation of this work. Dedicated staff time may also be included, if the role is in whole or in part dedicated to advancing community engagement (ex. social media, community outreach, or hosting and facilitation for meetings with community members in attendance).
- **Direct Operating Expenses** - Expenses related to the specific project or program. Examples include travel expenses, advertising materials, staff training, office supplies, and more.

- **Employee Compensation** – Salary or wages for any employee of the applicant organization(s) who will work on the project.
- **Indirect Rate** – Expenses necessary to support an organization’s general operations. Usually shared across projects or programs. Examples include rent and utilities, office furniture, computers, and IT systems. Applicants can request up to 20% for indirect costs.
- **Non-Employee Compensation** – Stipends or wages for non-staff individuals engaged in the project or program. These might include committee members, volunteers, focus group participants, and individual consultants.
- **Subcontracts** - If you are giving funds to other partners to do part of the initiative, list here.
- **Additional Budget Line Items**
  - **Capacity Building/Funds Events** – Grantees are required to take part in regular virtual learning opportunities and several virtual and/or in-person events. Please budget to cover 1-2 staff to prepare for, take part in, and travel to these meetings, along with other travel-related expenses.
  - **Evaluation** – We strongly encourage you to allocate resources that will allow your organization or partnership to evaluate activities listed in the proposal. Generally, we recommend at least 10% of your annual project budget be dedicated to evaluation activities. This can be requested from

the Funds or covered by other funding sources. Evaluation activities could be done by staff, an individual consultant, or another organization. If covered, please still note that in the budget template.

- **Compensation and Incentives** – We encourage you to budget for in-depth community engagement. When compensating community members (those who are not paid staff by the organization or subcontractors) for their time, we recommend the following:
  - A minimum amount of \$25/hour or at least a living wage in your region. We encourage paying individuals with an extra role, such as meeting facilitators, at a higher rate.
  - Translation, interpreter, childcare, and transportation reimbursement offered to support participation in events.

## **Application Review Process & Scoring Criteria**

All completed applications will be reviewed by a statewide review committee made up of a Massachusetts based group of residents with experience and/or subject matter expertise in a variety of SDoH-related topics. Applications will be assessed based on the following criteria:

- **Alignment with Funding Purpose** – Does the proposal demonstrate a history of and/or outline strategies to disrupt and remove structural barriers to health through

community-centered upstream policy, system, environmental approaches? How does the proposed project support the vision of the Funds?

- **Alignment with Funding Priorities** – Does the proposal serve geographies/populations experiencing high rates of inequities that have not historically and routinely benefitted from DoN dollars?
- **Budget** – Does the budget align with proposed activities? Is the proposal feasible?
- **Collaboration & Partnerships** – Does the proposal demonstrate a history and/or plan to engage diverse, cross sector organizations? How will power and decision-making be shared amongst key partners?
- **Community Engagement** – Does the proposal outline strategies to connect and build relationships with community members and key stakeholders? How will community members with lived experiences and/or lived experiences of oppression?
- and health inequities be involved in the leadership, design, implementation, and evaluation of activities?

## **What to Expect if Selected**

If your organization is selected to receive a grant, HRiA staff will work with you and your team to complete:

- **An Evaluation Plan**
- **Evaluation Activities** - Grantees will collect and report metrics as developed in an Evaluation Plan. The grantee

will share end-of-year progress for each grant year, summarizing work completed to date. Metrics include:

- Progress of PSE change strategies
- Community engagement in their activities
- Changes in racial equity
- Community level data
- **Convening and Capacity Building** - Throughout the grant period, HRiA will provide 20-30 hours annually of learning and capacity building opportunities for grantees. Grantees are expected to attend and participate in these events. These activities will be virtual and occasionally in person.
- **Reporting** - Grantee will remain in communication with HRiA and partners throughout the grant period to provide feedback, success stories, lessons learned, and status updates. Examples of these activities could include virtual site visits, short written reporting, surveys, and/or focus groups.
- **Financial Reporting:** Grantees will submit detailed financial expenditures each year. HRiA will establish formal deadlines.

## Resources for Applicants

- Learn more at: [www.mahealthfunds.org/apply](http://www.mahealthfunds.org/apply).
- A funding announcement webinar will be held on Wednesday, January 21, 2026, from 10:30 AM – 12:00 PMEST. The recording and slides are available on our website.

- HRiA will host technical assistance (TA) sessions and trainings where applicants can ask questions and get support.
- We have a robust Frequently Asked Question on the website. For programmatic questions about the **RFP** that is not on the website, contact [MACHHAFunds@hria.org](mailto:MACHHAFunds@hria.org). For technical questions about the **grant application portal**, contact [grants@hria.org](mailto:grants@hria.org) and use “MACHHAF” on the subject line.