



Wyoming
Department
of Health



PUBLIC
HEALTH
DIVISION



MATERNAL
& CHILD
HEALTH

Request for Applications (RFA):

2026-2027 Women and Infant Health Title V Funding

Wyoming Department of Health
Public Health Division
Maternal and Child Health (MCH) Unit
Women and Infant Health Program

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Funding Opportunity Overview

Background

The MCH Unit, Women and Infant Health Program (Program) seeks applications from community-based organizations for programs and services that align with the following Title V national performance measures: improving postpartum visits and improving infant safe sleep practices and environments. This has been an ongoing award opportunity that has awarded funding to multiple organizations since its inception. For information about past and current projects, [please visit our website](#). Visit our [FAQ page](#) for answers to frequent questions about this funding opportunity.

Eligible Applicants

Any Wyoming-based community non-profit or for-profit businesses/organizations are eligible to apply. Applicants must be registered with [SAM.gov](#), have a unique entity identifier (UEI), and be registered and in good standing with the Wyoming Secretary of State. If you need assistance with ensuring your organization can pursue and manage grants, please visit the [Grant Assistance Program](#) website for details on requesting assistance.

Funding Amount Available

The Program anticipates awarding a total of \$50,000.00. Ideally, multiple organizations addressing the priorities stated in the RFA will be awarded from this amount. For more information about the award amount and budget limits, please visit our [FAQ page](#).

Funding is contingent upon federal allocations and may be reduced or eliminated.

Term of Funding

Projects are expected to begin on October 1, 2026, and end on September 30, 2027. Unless otherwise extended or amended by the program, all projects are funded for one year.

Reserved Rights

The Program reserves the right to make an award under this RFA in part, in whole, or not at all. Additionally, the Program reserves the right to amend or withdraw this RFA at any time. If the RFA is amended after an applicant has already submitted an application, the Program will provide the applicant notice of the change and an opportunity to supplement the application, as necessary.

Allowable and Unallowable Use of Funds

Funds awarded may be used for:

- Salary and wages for any full or part-time staff working on the project

- Project supplies and materials needed
- Travel costs
- Sub-contracts

Funds awarded may not be used for:

- Construction
- Purchase of land or buildings
- Major medical equipment

For a full list of funding restrictions, please see our [FAQ page](#).

Grant and Reporting Requirements

If awarded funding, recipients will be required to submit quarterly reports and invoices throughout the funding period. Additionally, awarded applicants will be required to complete a final presentation at the end of the project period.

Reporting requirements and submission timeframes will be outlined in the Statement of Work, which will be provided when the funds are awarded. Reporting requirements will align with the project scope and support the Program with annual reporting to the federal funder.

Scope and Application

Please complete the Google Form or submit the following form and return it to natalie.hudanick1@wyo.gov by 6:00 PM MT on March 31, 2026. Once applications are reviewed and scored, selected applicants will be asked to present on their program/initiative the week of April 13, 2026.

Organization and Signatory Contact Information (<i>The person who will sign the contract if awarded</i>)	
Name:	
Organization:	
Address:	
Phone:	

E-mail Address:	
<u>Unique Entity Identifier (UEI):</u>	
Tax ID Number:	
Website (if applicable):	
Name and Title of Authorized Signatory (<i>this person will sign the contract if awarded funds</i>):	

Point of Contact Information (<i>The person who will be the Program's main contact for the project</i>)	
Name:	
Organization:	
Address:	
Phone:	
E-mail Address:	

Submission Overview

This funding opportunity is focused on two population domains and national performance measures (NPMs). Evidence-based or evidence-informed programs or initiatives are preferred. Each population domain provides a link to resources that applicants are encouraged to review regarding strategies that are most likely to improve outcomes.

Additionally, programs or initiatives that address disparities in these measures are encouraged.

Programs or initiatives that are one-time events will not be considered for funding.

1. [Women/Maternal Health NPM: Postpartum Visit](#): Projects and programs that aim to increase the percentage of women who attend a postpartum checkup within 12 weeks of giving birth and receive care components (such as a health care provider talking to them about birth control methods or what to do if they feel depressed or anxious).

Examples of potential programs/initiatives include, but are not limited to:

- Group Prenatal Care
- Guideline Adherence Protocol
- Mother-Infant Dyad Programs
- Provider Training and Education
- Postpartum Care Plans
- Patient Navigation

2. [Perinatal/Infant Health NPM: Safe Sleep](#): Projects and programs that aim to increase the percentage of infants who are placed to sleep on their backs, on a separate approved sleep surface, and without soft objects or loose bedding.

Examples of potential programs/initiatives include, but are not limited to:

- Community-Based Crib (or other approved safe sleep surface) Distribution and Safe Sleep Education
- Hospital-Based Safe Sleep Training
- Caregiver/Parent Education
- Health Care and Social Service Provider Education

You can find descriptions of each NPM by visiting this [website](#) and clicking on the information icon  under the graph for the selected measure.

What is the name of your program or initiative?	
Which NPM does your program or initiative address? <i>Select all that apply.</i>	<input type="checkbox"/> Women/Maternal: Postpartum Visit <input type="checkbox"/> Infant/Perinatal: Safe Sleep
Provide a one-sentence description of your program or initiative.	
Provide up to two (2) short-term SMART objectives your program or initiative will achieve. Learn how to write meaningful objectives with this resource . <i>Your SMART objectives should connect to your stated need(s) and chosen NPM(s).</i>	
Is the proposed program or initiative new and not yet started, OR current and existing?	<input type="checkbox"/> New/Not yet started. <input type="checkbox"/> Current/Existing
Outside of funding, please note any support you may require from the Program to complete your proposed program/initiative.	(Examples: Technical assistance on coalition building or partnership development, guidance on best practices, managing and creating budgets, etc.)
What is the estimated annual cost of your proposed program or initiative?	

<p>What is the estimated reach of your program or initiative?</p> <p>Please provide the county/counties and the estimated number of individuals to be served per year.</p>	<ul style="list-style-type: none"> • County/Counties served: _____ • Estimated number of individuals to be served: _____

Instructions: For the following section, please give an overview of your proposal. Responses to items 1 – 6 should not exceed a total of four (4) pages in length.

1. Program/Initiative Description:

Please provide an overall description of your program/initiative and how it helps achieve the goals of the selected NPM(s).

Response:

2. Create a work plan for your proposed program or initiative (work is expected to begin October 1, 2026, and last until September 30, 2027)

A work plan is a roadmap for your project. It is where you will identify the activities or tasks for your program or initiative and the timeline for each activity/task.

Description of Activity/Task	Responsible Party	Start Date	End Date

**3. Provide a breakdown and description of the estimated annual cost of your program or initiative
(we do NOT need the total annual budget of your whole organization)**

Salaries and Wages (place dollar amount here):	
Brief Description of Salaries and Wages (tell us how many staff, their full or part-time status, and expected duties that align with your project):	

Supplies (<i>place dollar amount here</i>):	
Brief Description of Supplies (<i>tell us what you will be using the supplies budget for</i>):	
Equipment (anything over \$2,500 per unit with an expected lifespan of > 1 year) (<i>place dollar amount here</i>):	
Brief Description of Equipment (<i>tell us what you will be using the equipment budget for</i>):	
In-State Travel (<i>place dollar amount here</i>):	
Brief Description of In-State Travel (<i>tell us what you will be using the in-state travel budget for</i>):	
Out-of-State Travel (<i>place dollar amount here</i>):	
Brief Description of Out-of-State Travel (<i>tell us what you will be using the in-state travel budget for</i>):	
Sub-contracts (<i>place dollar amount here</i>):	

Brief Description of Sub-contracts (<i>tell us what you will be using the sub-contracts budget for</i>):	
Other Categories (<i>place dollar amount here</i>):	
Brief Description of Other Categories (<i>tell us what you will be using the other categories' budget for</i>):	
Total Cost of program/initiative (<i>add up the above dollar amounts</i>):	

4. Need:

What need does your program/initiative address, and how specifically does it address this need?

In your response, be sure to include how you identified the need, who was involved in the identification process, and sources of information that support the identified need. Please make sure you demonstrate how your need is connected to the selected NPM(s).

Response:

5. Intended Benefit

How does your program/initiative benefit the key population you identified in your program/initiative description?

In this section, connect your intended benefit to your identified need and the selected NPM(s). Please also describe how you will engage the focus populations/families in your program/initiative.

Response:

6. Fair Access

In what ways does your program/initiative address fair health access? In what ways does your program/initiative remove obstacles to health?

Example: Your project focuses on giving safe sleep information to breastfeeding moms. Have you considered also connecting with moms who aren't breastfeeding, so all families can have access to the safe sleep information? This demonstrates fair access.

Another example: You are working with rural moms to bring them access to mental health resources. This population is often geographically isolated and may have unique barriers to accessing this care. Your project clearly demonstrates work to increase fair access for a geographically isolated population.

Response:

Application Submission and Award of Funding

Key Dates

Description	Date
RFA released	January 5, 2026
Applications due	March 31, 2026
Interviews/presentations for applications selected to move to this phase	Week of April 13, 2026
Tentative award	May 4, 2026
Tentative contract start	October 1, 2026

Submission

Please complete the Google Form or submit the above application and return it to natalie.hudanick1@wyo.gov by 6:00 PM MT on March 31, 2026.

If you have any questions, please email them to natalie.hudanick1@wyo.gov. All questions and answers will be posted on the [MCH Unit website](#). Please visit our [FAQ page](#) to see if your question has been addressed before emailing it.

Thank you for taking the time to submit your application. Your work is important in helping improve the health and well-being of Wyoming's maternal and infant populations. The next steps for this funding opportunity are outlined below.

Next Steps

Step 1: All applications will be reviewed by Wyoming MCH Unit staff. Applications will be evaluated on the following criteria and relative weights:

After review, some applicants will be asked to move on to Step 2.

Scoring

Factor	Points Possible
Application describes a feasible program that is (1) sustainable, (2) has identified who does what, (3) has a timeline of implementation, and (4) is grounded in evidence. This is based on your answers to Questions 1 and 2.	30
Budget breakdown is reasonable for the proposed program or initiative and adequately provides descriptions of budget items. This is based on your budget outlined under Question 3.	10
Application describes the need in the community and explains how the need is connected to the selected NPM. This is based on your answer to Question 4.	20
Application clearly connects the need and the key population to show the benefit of the program and explains how they will engage the focus populations. This is based on your answer to Question 5.	20
Application clearly describes fair health access considerations and addresses barriers. This is based on your answer to Question 6.	10
Application clearly aligns with the selected priority domains and NPMs.	10
Total points possible	100

Step 2: Applications scoring 65 or higher in the initial review will be invited to present their program/initiative in a 15-minute presentation, followed by a 15-minute question-and-answer period, the week of April 13-17, 2026. A PowerPoint template will be provided.

Notification of Funding

Applicants will be notified by email if they have been awarded funding by May 4, 2026.

If you are selected for funding:

- You will enter into a subrecipient agreement/contract with the Wyoming Department of Health.
- Your funding will begin on October 1, 2026.