Notice of Funding Opportunity

Application due Wednesday, June 24, 2026

SAMHSA
Substance Abuse and Mental Health Services Administration

Center of Excellence for Eating Disorders

Opportunity number: SM-26-031

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Before you begin

If you believe you are a good candidate for this funding opportunity, secure your SAM.gov and Grants.gov registrations now. If you are already registered, make sure your registrations are active and up-to-date.

SAM.gov registration (this can take several weeks)

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI).

See Step 2: Get Ready to Apply

Grants.gov registration (this can take several days)

You must have an active Grants.gov registration. Doing so requires a Login.gov registration as well.

See Step 2: Get Ready to Apply

Apply by the application due date

Applications are due by 11:59 p.m. Eastern Time on Wednesday, June 24, 2026.

To help you find what you need, this NOFO uses internal links. In Adobe Reader, you can go back to where you were by pressing Alt + Left Arrow (Windows) or Command + Left Arrow (Mac) on your keyboard.

Step 1:
Review the Opportunity

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Basic information

Substance Abuse and Mental Health Services Administration (SAMHSA)

Need tagline

Important Resources

Applicants are expected to follow guidance provided in the ***FY 2026 NOFO*** *Application Guide* (the *Application Guide*). This document provides information about the application process, including registration, required attachments, budget, and federal policies and regulations. In addition, see the SAMHSA Grants Glossary for definitions of terms used in this NOFO.

Authorizing Statute

Section 520A of the Public Health Service Act, as amended (42 U.S.C. 290bb-45)

Agency Contacts

Program and Eligibility Questions

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Financial and Budget Questions

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Review Process and Application Status Questions

Angela Houde
Office of Financial Resources
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Key Facts

Opportunity Name: Center of Excellence for Eating Disorders

Short Title: COE-ED

Opportunity Number: SM-26-031

Announcement Version: Modified

Federal Assistance Listing: 93.532

Eligible Applicants: Domestic public and private non-profit entities.

See Eligibility for complete eligibility information.

Key Dates

Application deadline: June 24, 2026

Expected Award Date: September 1, 2026

Expected Start Date: September 30, 2026

Response to Executive Order 12372:
See **Intergovernmental Review** and *Section J* in the *Application Guide.*

240-276-1091
Angela.Houde@samhsa.hhs.gov

Summary

The purpose of this program is to create a Center of Excellence for Eating Disorders (COE-ED). The Center will provide national training and technical assistance (TTA) to healthcare providers on screening, brief intervention, and referral to treatment for eating disorders. The Center will also provide TTA to paraprofessionals and relevant non-clinical community service providers. The TTA is intended to identify and support individuals across the lifespan, including children and youth, with or at risk for eating disorders.

With this program, SAMHSA aims to close critical gaps in knowledge, improve healthcare outcomes, and increase public understanding for individuals with or at risk for eating disorders.

This program is designed to advance SAMHSA's Strategic Priorities and the Make America Healthy Again agenda.

Funding Details

Funding Type: Cooperative Agreement

Estimated Total Available Funding: $1,873,148

Estimated Number of Awards: 1

Estimated Award Amount: Up to $1,873,148 per year per award

Length of Project Period: Up to 5 years

Your annual budget cannot be more than $1,873,148 in total costs (direct and indirect) in any year of the project.

Annual continuation awards are contingent on the availability of funds, progress in meeting project goals and objectives, timely submission of required data and reports, compliance with all terms and conditions of award, and alignment with SAMHSA, HHS, and Trump Administration priorities.

Program Description

Purpose

The purpose of this program is to create a Center of Excellence for Eating Disorders (COE-ED). The Center will provide national training and technical assistance (TTA) to healthcare providers on screening, brief intervention, and referral to treatment for eating disorders. The Center will also provide TTA to paraprofessionals and relevant non-clinical community service providers. The TTA is intended to identify and support individuals across the lifespan, including children and youth, with or at risk for eating disorders.

The COE-ED will strengthen workforce capacity to address the full spectrum of eating disorders (e.g., anorexia nervosa, bulimia nervosa, binge-eating disorder, avoidant/restrictive food intake disorder (ARFID), and other specified feeding or eating disorders), including cases complicated by co-occurring mental health and substance use disorders. TTA must address identification and response across various populations and age groups, including children, adolescents, adults, older adults, and males, recognizing that eating disorders occur across demographic groups.

The required activities of the COE-ED are to:

- Convene a technical expert panel (TEP).
- Develop and deliver TTA.
- Identify and deliver an eating disorder pediatric training model for pediatric providers.
- Develop and maintain a website.
- Establish and maintain collaborative partnerships.
- Develop and implement an outreach, awareness, and engagement plan.

Eating disorders are serious mental disorders associated with significant psychiatric and medical complications and elevated risk of suicide and mortality. Nearly all people with a lifetime diagnosis of an eating disorder have a co-occurring psychiatric disorder, most often a mood disorder, anxiety disorder, or substance use disorder.[1] Misconceptions about who is affected, delayed identification, and limited access to specialty care contribute to preventable morbidity and mortality. Many general medical and behavioral health settings lack standardized protocols to identify and manage eating disorders and common co-occurring conditions.

The COE-ED aligns with the SAMHSA Strategic Priorities such as (1) addressing serious mental illness; and (2) improving access to evidence-based treatment.

All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations and applicable judicial holdings. Accordingly, discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate; racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation; denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic; illegal immigration; or any other initiatives that compromise public safety. If an application does not align, the application will not receive funding to the extent permitted by law and applicable court orders.

In addition, applications must also align with SAMHSA Strategic Priorities and the application and budget narrative must not support harm reduction as outlined in SAMHSA's Dear Colleague Letter on harm reduction.

As of October 1, 2025, HHS has adopted 2 CFR Part 200, with some modifications included in 2 CFR Part 300. These regulations replace those in 45 CFR Part 75.

Key Personnel

Key Personnel are essential to the successful implementation and oversight of your SAMHSA-funded project. These individuals, whether their salaries are paid by this grant, must play a substantive role in project execution and be actively involved in monitoring, reporting, and compliance activities throughout the project period.

The Key Personnel for this program are:

- **Project Director (PD):** The PD oversees the grant to ensure goals are met, all reports are filed on time, and all rules are followed. The PD is responsible for project oversight, including technical and programmatic aspects of the award and oversight of evaluation activities. The PD must have demonstrated expertise and/or experience in the field of eating disorders. This position must be filled by one individual with 1.0 level of effort of a full-time equivalent (FTE) position.
- **Evaluator:** The Evaluator is responsible for overseeing all aspects of the required data systems, management, collection, analyses, and reporting

requirements, including providing training to and supporting grant staff in understanding and appropriately reporting all required data. This position must be filled by one person serving a minimum 0.25 FTE level of effort.

Below are the expectations, requirements, and compliance obligations for Key Personnel under this NOFO:

- Key Personnel are expected to participate regularly in program monitoring and maintain consistent communication with SAMHSA staff.
- Key Personnel selected/hired for this grant must be based only on merit and qualifications. Executive Orders strictly prohibit using demographics (like race or sex) to give preference in hiring.
- Key Personnel must have the skills, time, and commitment to meet the expectations of the grant.
- If awarded funding, approved Key Personnel will be identified on the Notice of Award.
- Changes to Key Personnel require written prior approval from SAMHSA. This includes:
  - Replacing or removing Key Personnel.
  - Reducing any Key Personnel's level of effort by 25% or more.

Required Activities

Funds for this program are primarily used for training and technical assistance. In the Project Narrative, you will provide the following:

- **B.1**: The unduplicated number of individuals you propose to train each year of the project.
- **B.2**: A description of how you will implement the required activities.

Nothing in the required or allowable activities described below allows grant recipients to use grant funds for prohibited activities described in the Funding Restrictions and Limitations section of this NOFO.

Your organization is required to implement all the required activities listed below:

1. Convene a technical expert panel (TEP)

When: Within 3 months of award for first meeting, future meetings at twice per year.

Convene a virtual technical expert panel (TEP) at least twice per year. The TEP should be comprised of 8-15 stakeholders to guide project implementation, evaluate product development proposals, review all COE-ED-developed products, and other TTA activities.

TEP representatives must be approved by the GPO and include the following representatives:

- Healthcare providers, including primary care providers, pediatric providers, public health professionals and mental health professionals.
- Paraprofessionals and non-clinical community service providers.
- Researchers and scientists.
- Eating disorder stakeholder organizations.
- Individuals with lived experience of eating disorders as well as family members and caregivers.

2. Develop an Implementation TTA Workplan

When: Within three months of award; updated annually in subsequent years and submitted within 90 days after the end of each budget period.

Develop an implementation workplan that guides the COE-ED team to achieve COE-ED goals. The Government Project Officer (GPO) will review and approve the submitted implementation workplan. The workplan should align and build upon the Merit Review Section B “Proposed Implementation Approach”.

The implementation plan must include the following:

- COE-ED project scope.
- COE-ED goals and measurable objectives (and progress made towards achieving the objectives in subsequent budget periods).
- Identification of all proposed activities, including due/completion dates and COE staff responsible for each activity.
- Identification of any challenges with outreach and engagement and possible strategies to resolve those challenges.
- The process to track and monitor progress.

3. Develop and Deliver Training and Technical Assistance (TTA)

When: Within 6 months after award.

Develop and deliver evidence-based training and technical assistance (TTA), educational materials, and resources to improve clinical and community capacity nationwide to address eating disorders across the lifespan, including children and youth.

The goal of the TTA is to strengthen identification, screening, brief intervention, referral to treatment, and ongoing care coordination for individuals experiencing, or at risk for, eating disorders and co-occurring mental health and substance use disorders.

TTA activities must be informed by identified gaps, barriers, system capacity, workforce needs, and input from the Technical Expert Panel (TEP).

3a. Target Audiences and Topics

The Center must provide TTA to the following audiences:

- Healthcare providers, including primary care providers, pediatric providers, and behavioral health professionals. TTA for healthcare providers must focus on:
  - Screening for eating disorders.
  - Brief intervention strategies.
  - Referral to appropriate levels of care.
  - Care coordination for individuals across the lifespan experiencing, or at risk for, eating disorders and co-occurring conditions.
- Paraprofessionals and non-clinical community service providers. TTA for this audience must focus on:
  - Identifying signs and symptoms of eating disorders.
  - Supporting individuals with, or at risk for, eating disorders.
  - Facilitating appropriate referrals and follow-up.

3b. Required TTA Content Areas

At a minimum, TTA must address:

- Validated screening approaches appropriate to clinical and community settings (e.g., tools suitable for primary care, behavioral health, and emergency settings).

- The distinction between screening and diagnosis, including appropriate triage pathways.
- Medical risk factors, warning signs, and escalation protocols.
- Level-of-care criteria and referral navigation.
- Management of co-occurring mental health and substance use disorders, and other health conditions (e.g., intellectual/developmental disabilities).
- Suicide risk identification and linkage to crisis resources, including 988 where appropriate.
- Strategies to address common misconceptions that may delay detection or appropriate care.

3c. TTA Products and Delivery Methods

TTA materials and activities may include, but are not limited to:

- Guidance documents, clinical guidelines, and protocols.
- Fact sheets, toolkits, and manuals.
- Issue briefs on special topics related to eating disorders.
- Virtual resources such as training modules, webinars, and other online learning platforms.

4. Create and implement an Evaluation Plan to Evaluate the Impact of TTA Delivery

When: Within 6 months after award, and continuous throughout the project period.

Create and implement an Evaluation Plan to evaluate the impact of TTA delivery on the primary audiences, including measures of practice improvement, increased workforce capacity, and knowledge transfer. Evaluation findings must be used to inform continuous quality improvement and refinement of TTA activities throughout the project period.

5. Identify and deliver an eating disorder pediatric training model for pediatric providers

When: Within 6 months after award.

Identify and deliver at least one eating disorder pediatric training model for pediatric providers for prevention, screening, early intervention, treatment, and ongoing support for youth with, or at risk of developing an eating disorder.

You should:

- Review the needs of the field and current research to identify at least one eating disorder evidence-based training model for pediatric providers.
- Identify how you will engage pediatric providers.
- Provide virtual TTA to pediatric healthcare providers on the appropriate application of the eating disorder pediatric training model(s).
- Include guidance on family engagement, coordination with schools, and developmentally appropriate care planning.

6. Develop and maintain a website

When: Within 6 months after award.

Develop and maintain a public-facing website that includes:

- Information on the COE-ED's mission, purpose, audience, and populations of focus.
- A repository of evidence-based TTA materials reflecting model programs and best practices on identification, intervention, effective treatment, and ongoing support of individuals with, or at risk for, eating disorders and co-occurring conditions.
    - This may include both TTA materials developed under this program, as well as coordinated access to existing TTA materials.
- Implementation briefs summarizing replicable state or local models and lessons learned to support adoption and reduce duplication of efforts.

7. Establish and maintain collaborative partnerships

When: Within 4 months after award.

Establish and maintain collaborative partnerships. Leverage these networks to maximize reach of TTA dissemination, support coordinated care pathways, and reduce duplication of efforts.

This must include coordination with:

- Other centers of excellence, TTA Centers, and Federally-supported psychiatric consultation lines (e.g., National 988 Suicide and Crisis Lifeline, National Maternal Mental Health Hotline).
- Federal departments, agencies, and offices (e.g., Health Resources and Services Administration (HRSA), Centers for Disease Control & Prevention (CDC), National Institutes of Health, Veterans Administration).

- SAMHSA-supported technical assistance (TA) programs to identify opportunities for fostering regional and national alliances among behavioral health entities and promote a coordinated approach to delivering TA.
    - Annually, participate in at least one SAMHSA coordinated TTA meeting, policy academy, or forum.
    - Participate in SAMHSA bi-monthly, virtual TTA Project Director and Evaluator meetings.
    - Annually, contribute to and actively participate in virtual planning and coordination as requested in at least one SAMHSA-supported awareness or communication effort such as Eating Disorder Awareness Month, National Recovery Month, National Suicide Prevention Month, National Prevention Week, or Mental Health Awareness Month.

This may include coordination with:

- States/territories, political subdivisions of states/territories, community health settings, non-profit and professional organizations.
- Individuals with lived experience and families in program planning and resource development.

8. Develop and implement an outreach, awareness, and engagement plan

When: Within 6 months after award.

Develop and implement an outreach, awareness, and engagement plan. The plan must address:

- How different forms of communication (e.g., social media, digital newsletters, direct 1:1 contact) will be used to engage TTA recipients.
- Development of a quarterly newsletter that provides updates to stakeholders, including new TTA resources.
- Participation and contribution to national awareness campaigns to improve public understanding and reduce stigma, promote timely identification, effective treatment of, and recovery from eating disorders and co-occurring conditions.
- Strategies to improve public understanding of eating disorders across demographic groups and reduce stigma that may delay help-seeking.

Allowable Activities

Allowable activities are **not** required. However, your organization may propose to use funds for the following activities:

1. Support the integration of screening, brief intervention, and referral to treatment protocols with health information technology systems for individuals experiencing, or at risk for, eating disorders.
2. Develop and provide training materials to healthcare providers to provide screening, brief intervention, and referral to treatment tailored for members of the military and veterans experiencing, or at risk for, eating disorders.
3. Develop guidance for clinicians and families on navigating nutrition treatment goals within existing food assistance programs, as appropriate.
4. Develop and disseminate training resources for school-based professionals (e.g., school nurses, counselors, coaches) to support early identification and referral pathways.
5. Consult, as appropriate, with the Departments of War and Veterans Affairs on prevention, identification, intervention for, and treatment of eating disorders in relation to eating disorders impacting members of the military and veterans.
6. Consider the communities that will be affected by this project and engage them in the overall program planning. To do so, SAMHSA encourages applicants to:
    - Engage communities, when practicable, during the design phase.
    - Develop programs in consultation with communities benefiting from or impacted by the program.

Eligibility

Eligible Applicants

Eligible applicants are domestic public and private nonprofit entities, including:

- States and territories (Guam, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, American Samoa, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau), including the District of Columbia.
- Political subdivisions of states.
- Indian tribes, or tribal organizations (as such terms are defined in Section 5304 of Title 25).
- Health facilities or programs operated by or in accordance with a contract or award with the Indian Health Service.
- Public or private nonprofit organizations, including faith-based organizations.

Note: If you are a nonprofit organization, you must provide documentation of your non-profit status in Attachment 8 of your application.

For general information on eligibility for federal awards, see the Grant.gov website. For specific eligibility questions, see Agency Contacts.

Cost Sharing

Cost sharing/match is not required for this program.

Data Collection, Performance Measurement, and Performance Assessment

Your organization must collect and report data under the Government Performance and Results (GPRA) Modernization Act of 2010. In the Project Narrative, Section D, you will provide your plan for data collection and reporting. You can visit SAMHSA's Performance Measures webpage to view the Training and Technical Assistance tool and forms.

The following data will be entered into SAMHSA's Performance Accountability and Reporting System (SPARS) using the **Training and Technical Assistance (TTA) Program Monitoring Tool**:

- Descriptive data on the title, intended audience, population of focus, topic, and other data on each project event using the **TTA Event Description** form. Data must be uploaded or entered into SPARS within 30 days of event completion.
- Anonymous, voluntary post-event survey data from participants using the **TTA Post Event** form. Survey responses must be collected at the end of each event and uploaded or entered in SPARS within 30 days after the event.
- Anonymous, voluntary follow-up survey data for events that are longer than three hours from participants who consent to follow-up. Survey responses must be collected using the **TTA Follow-Up** form at 60 days after the end of the event and uploaded or entered into SPARS within 120 days after the event.

You will receive training and technical assistance on SPARS after award.

The required data collected and reported to SAMHSA should also be used for continuous quality improvement. Performance measures and data will also be reported to the public as part of SAMHSA's Congressional Budget Justification.

Your organization is required to conduct an evaluation of your project to build an evidence base for the program. You will be asked to provide findings and recommendations. Your evaluation will enable you to improve project performance and increase understanding of factors that contribute to the success of your program. SAMHSA will provide additional requirements on the scope and expectations of the evaluation after award.

Performance Assessment

Discretionary awards should include clear benchmarks/objectives for measuring success and progress towards relevant goals.

Recipients are required to submit programmatic progress reports that demonstrate if you are meeting the objectives you selected for this project and achieving the outcomes you anticipated, and if any changes need to be made.

You must review your performance data to find out if you are making progress and improving project management. Refer to Reporting Requirements for information on submitting these reports.

For more information on completing this section, see Developing Goals and Measurable Objectives and Developing the Plan for Data Collection and Performance Measurement.

Cooperative Agreement Requirements

These awards are being made as cooperative agreements because they require substantial post-award federal staff participation in the oversight of the project. Under this cooperative agreement, the roles and responsibilities of your organization and SAMHSA staff are:

Your organization must:

- Comply with terms and conditions of this cooperative agreement.
- Work with SAMHSA staff in implementing and monitoring the project.
- Submit performance measures data via SPARS.
- Submit all required workplans, performance assessments, evaluations, financial reports, and continuation award applications.
- Attend and take part in calls with your Government Project Officer (GPO).
- Attend and take part in virtual meetings.
- Incorporate SAMHSA feedback into selection of TA topics, TA recipients, and the timing, content, and delivery methods used.
- Incorporate SAMHSA feedback into the focus and content of TA materials.

SAMHSA staff roles

Your **Government Project Officer (GPO)** is responsible for program monitoring, providing technical assistance and conducting site visits. Your

GPO will work with you on implementing program and evaluation activities and make recommendations about program continuance.

Your **Grants Management Specialist (GMS)** within SAMHSA's Office of Financial Resources is responsible for ensuring that your project is complying with all applicable federal laws, regulations, guidelines, and the terms and conditions of award. They will frequently participate with your SAMHSA GPO on the monthly monitoring calls.

SAMHSA staff will:

- Schedule routine conference calls and provide technical assistance and consultation.
- Oversee publication of project results, as well as packaging and dissemination of products and materials to make findings available to the field.
- Review or approve one stage of a project before work may begin on a later stage during a current approved project period.
- If needed, help you develop a selection process for sub-awards and review sub-recipient contracts and awards.
- Provide input into selected TA topics, TA recipients and the timing, content, and delivery methods used.
- Provide input into the focus and content of TA materials.

Other Requirements

- Ensure all products developed and maintained with SAMHSA funds are accessible to individuals with disabilities in accordance with Section 504 and Section 508 of the Rehabilitation Act of 1973. See HHS 508 Policy and SAMHSA 508 Accessibility.
- Collaborate with SAMHSA-supported TTA programs to identify opportunities for fostering regional and national alliances among behavioral health entities and promote a coordinated approach to delivering TA.
- Participate fully in a central SAMHSA learning management system (LMS). If applicable, details on the LMS will be provided.
- Ensure all products are shared with SAMHSA, on a monthly basis, for archiving in a SAMHSA-designated repository. Specific instructions will be provided by the respective GPOs post-award.

SAMHSA Strategic Priorities and Other Expectations

When developing your project, you must consider **SAMHSA's Strategic Priorities**, which includes recovery, a commitment to innovation, data, gold-standard science, and access to high quality services for all, which align with the Administration's Make America Healthy Again initiative. In addition, there are other expectations included in *Section I* in the *Application Guide* that you must consider as you design your project.

As a part of the project funded under this NOFO, the recipient is required to adhere to the following principles where consistent with the authority and scope of the award and its activities:

1. **Evidence-Based and Outcome-Focused Practices:** Design and deliver services using evidence-based or evidence-informed approaches grounded in gold-standard science, establish measurable performance goals, and use data to monitor outcomes and drive continuous improvement and accountability.
2. **Program Integrity and Fiscal Stewardship:** Administer funds in accordance with all applicable federal statutes, regulations, and award conditions; maintain strong internal controls; and ensure the efficient and effective use of taxpayer dollars while preventing waste, fraud, and abuse.
3. **Partnership and Coordination:** Consistent with program purpose and authorization, promote coordination with law enforcement, juvenile and criminal justice systems, civil courts and civil commitment systems (including Assisted Outpatient Treatment programs where available and in alignment with state law), crisis services (including the 988 Crisis and Suicide Lifeline), and state, tribal, territorial, local, and community partners, as appropriate, to engage individuals in prevention activities, treatment, and support while tailoring services to meet community needs.

In addition, the recipient should advance the following objectives in programs that are authorized to advance them:

4. **Treatment for Serious Mental Illness and Complex Needs:** Serve individuals with the most serious and complex behavioral health needs, including those with serious mental illness and co-occurring substance use and mental health disorders, through access to evidence-based treatment.

You must demonstrate ongoing compliance with these principles and objectives, in all programs that are authorized to advance them, through program design, implementation, reporting, and evaluation. Failure to meaningfully align funded activities with the applicable requirements may result in corrective action, additional reporting requirements, or other enforcement actions consistent with federal grant regulations found at 2 C.F.R. Part 200 and the terms and conditions of this award.

As referenced in the SAMHSA's Dear Colleague letter on MAT, if your proposed project funds training/TA related to MAT/MOUD, this funding should be used to provide training to clinicians and other behavioral health providers on the clinically appropriate use of medications in the treatment of substance use disorders, including options for safe tapering and discontinuation when clinically indicated, and regular, at least annual, reviews for continuing treatment. This training should include strategies to support shared decision-making by ensuring patients are fully informed of the risks and benefits of medication treatment initiation, continuation, and discontinuation. Training must ensure providers educate patients about and facilitate access to comprehensive substance use treatment and recovery support services.

Training should include tools to support the development of individualized comprehensive treatment plans with patients that include consideration of medication treatment duration, and tapering and discontinuation, as clinically indicated based on the patient's individual circumstances, recovery, and preferences.

Recipient Meetings and Technical Assistance

You are expected to participate in SAMHSA technical assistance activities as directed by SAMHSA.

We plan to hold virtual grant meetings and your full participation in these meetings is expected. You will be given more information about these meetings at a future date.

Funding Restrictions and Limitations

The following are funding restrictions for this project:

- Food is an unallowable expense.
- Recipients must comply with all applicable federal anti-discrimination laws material to the government's payment decisions for purposes of 31 U.S.C. § 3729(b)(4).

- The indirect cost rate may not exceed **8 percent** of the proposed budget. Even if an organization has an established indirect cost rate, under training and technical assistance awards, SAMHSA reimburses indirect costs at a fixed rate of **8 percent** of modified total direct costs, exclusive of tuition and fees, expenditures for equipment, and subawards and contracts more than $25,000. (See 2 CFR 300.414(c)(1)(i))[2]
- Capitalizable infrastructure, such as computer systems or software, is recoverable as depreciation through the **capped 8 percent indirect cost rate.**
- Discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate:
  - Racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation.
  - Denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic.
  - Illegal immigration.
  - Any other initiatives that compromise public safety.
- Discretionary awards must not support harm reduction as outlined in SAMHSA's Dear Colleague Letter [PDF] on harm reduction.
- Discretionary awards must not support "housing first" policies that fail to ensure accountability and fail to promote treatment, recovery, and self-sufficiency.

You must also comply with SAMHSA's Standards for Financial Management, Standard Funding Restrictions and Principles in Section G in the Application Guide.

All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations and applicable judicial holdings. Applications must also align with SAMHSA Strategic Priorities.

If an application does not align, the application will not receive funding to the extent permitted by law and applicable court orders.

Step 2:
Get Ready to Apply

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Get Registered

SAM.gov

You must have an active account with SAM.gov to apply. SAM.gov registration can take several weeks. Begin that process today.

To register:

- Go to SAM.gov Entity Registration and select Get Started. From the same page, you can also select the Entity Registration Checklist for the information you will need to register.
- You must agree to the financial assistance general certifications and representations specifically. Those for contracts are different.

When you register, you will also receive your required Unique Entity Identifier (UEI).

Once you register:

- You will have to maintain your registration throughout the life of any award.
- If your organization has multiple UEIs, use the one associated with your physical location.

Grants.gov

You must also have an active account with Grants.gov. You can see step-by-step instructions in the Grants.gov Quick Start Guide for Applicants.

eRA Commons

You must register in eRA Commons. Register at least six weeks before the application deadline.

See guidance at eRA Help and Tutorials and in Section A of the Application Guide.

Find the Application Package

The application package has all the forms you need to apply. You can find it online. Go to Search Grants at Grants.gov or eRA ASSIST: SM-26-031.

If you can't use Grants.gov to download application materials, you may request them from dgr.applications@samhsa.hhs.gov.

Step 3:
Build Your Application

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Application checklist

Make sure that you have everything you need to apply:

Narratives

Component	Form to use	Page limit
☐ Project abstract	Project Abstract Summary form	1 page
☐ Project narrative	Project Narrative Attachment form	15 pages
☐ Budget narrative	Budget Narrative Attachment form	None

Attachments

Insert each in the Other Attachments form (Grants.gov) or Other Narratives Attachment form (eRA ASSIST) in this order.

Component	Page limit
☐ 1. Letters of commitment, if applicable	None
☐ 2. Data collection instruments and interview protocols	None
☐ 3. Sample consent forms	None
☐ 4. Project timeline	2 pages
☐ 5. Biographical sketches and position descriptions	See Biographical Sketches
☐ 6. Confidentiality and SAMHSA Participant Protection	None
☐ 7. Letter to the State Point of Contact	None
☐ 8. Documentation of nonprofit status	None
☐ 9. Negotiated Indirect Cost Rate Agreement (NICRA), if applicable	None

Other required forms

Use each required form in Grants.gov or eRA.

Component	Page limit
☐ Application for Federal Assistance (SF-424)	None
☐ Budget Information for Non-Construction Programs (SF-424A)	None
☐ Assurances for Non-Construction Programs (SF-424B)	None
☐ Project/Performance Site Location(s)	None
☐ Grants.gov Lobbying form	None

Application Contents and Format

This section includes guidance on each item found in the application checklist.

The following links contain information on:

- Formatting instructions and information on system validation requirements.
- Completing forms and required components (*Section A* in the Application Guide).

Project Abstract

Page limit: 1 page

Your project abstract should include:

- The project name.
- The geographic area to receive T/TA and need across the area.
- The intended audience(s) of the TTA, including identifying professions, education level, organization types, or settings that define the intended audience(s).
- The number of people to be trained annually and throughout the lifetime of the project.
- Trainings and TA that will be implemented through the grant.
- Project goals.
- Measurable objectives (whenever possible, focus on objectives that relate to SAMHSA's Strategic Priorities).

In the first five or fewer lines of your abstract, write a summary of your project that can be used in publications, reports to Congress, and press releases, if you are funded.

Project Narrative

Page limit: 15 pages

File name: Project narrative

In developing your project narrative:

- Provide a detailed response to the merit review criteria.
- Follow the required formatting instructions.
- Stay within the page limit or we will not review your application. We recommend page limits for the subsections, but they are for guidance only. You may place citations in an attachment, which does not count in the 15-page limit.

Budget Narrative

Page limit: None

File name: BNF

The budget narrative supports the information you provide in Standard Form 424-A. See Other Required Forms.

It includes added detail and justifies the costs you ask for. As you develop your budget, consider:

- If the costs are reasonable and consistent with your project's purpose and activities.
- The restrictions on spending funds. See funding limitations.

To create your budget narrative, see detailed instructions and a template in *Section F* in the *Application Guide*.

Attachments

You will upload attachments in Grants.gov using the Other Attachments form or in eRA ASSIST using the Other Narratives Attachment form.

Use only the following attachments listed. If your application includes any attachments not required in this document, they will be disregarded.

Do not use attachments to extend or replace any of the sections of the Project Narrative. Reviewers will not consider them if you do.

Name the attachments: Attachment 1, Attachment 2, and so on.

Attachment 1: Letter(s) of Commitment (LOC)

Include LOCs from any organization(s) partnering in the project. **Do not include any letters of support. Reviewers will not consider them.** A letter of support describes general support of the project, while an LOC outlines the specific contributions an organization will make in the project.

Attachment 2: Data Collection Instruments and/or Interview Protocols

If you are planning to use SAMHSA approved instruments, they do not need to be submitted. If you are planning to use non-SAMHSA approved instruments, those must be submitted.

Attachment 3: Sample Consent Forms

Include, as appropriate, informed consent forms for participation in the TTA event and for the collection of data.

Attachment 4: Project Timeline

Page limit: 2 pages

This attachment is scored by reviewers. Provide a chart or graph depicting a realistic timeline for the entire 5 years of the project period. Show dates, key activities, and responsible staff. The key activities must include the requirements outlined in Required Activities.

Attachment 5: Biographical Sketches and Position Descriptions

See biographical sketches and position descriptions for more information. Position descriptions should be no longer than one page each and biographical sketches should be no more than two pages.

Attachment 6: Confidentiality and SAMHSA Participant Protection

This **required** attachment is in response to *Section D* in the *Application Guide* and reviewers will assess the response.

Attachment 7: Letter to the State Point of Contact

Review information on Intergovernmental Review and in Section J in the *Application Guide* for detailed information on E.O. 12372 requirements to determine if this applies.

Attachment 8: Documentation of Nonprofit Status

All private nonprofit organizations: you must submit proof of nonprofit status in your application. Any of the following is acceptable evidence of nonprofit status:

- A reference to the applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations, as described in Section 501(c)(3) of the IRS Code.
- A copy of a current and valid IRS tax exemption certificate.
- A statement from a state taxing body, state attorney general, or other appropriate state official certifying the applicant organization has nonprofit status.
- A certified copy of the applicant organization's certificate of incorporation or similar document that establishes nonprofit status.
- Any of the above proof for a state or national parent organization and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate.

Attachment 9: Negotiated Indirect Cost Rate Agreement (NICRA)

If you have a NICRA, the document must be submitted.

Other Required Forms

You will need to complete some standard forms. Upload the following standard forms as listed on Grants.gov. You can find them in the NOFO Application Package or review them and their instructions at Grants.gov Forms.

Forms	Submission Requirement
Application for Federal Assistance (SF-424)	With application
Budget Information for Non-Construction Programs (SF-424A)	With application
Assurances for Non-Construction Programs (SF-424B)	With application
Project/Performance Site Location(s) Form	With application
Grants.gov Lobbying Form	With application

SF-424

Fill out all sections of the SF-424.

- In Line 4 (Applicant Identifier), enter the eRA Commons Username of the Project Director (PD)/Principal Investigator (PI).
- In Line 8b (Employer/Taxpayer Identification Number (EIN/TIN)), enter the recipient organization's 12-character EIN and suffix as registered with the Payment Management System (PMS), if applicable. If not registered in PMS, enter the recipient organization's EIN.
- In Line 8f, enter the name and contact information of the PD identified in the budget and in Line 4 (eRA Commons Username).
- In Line 17 (Proposed Project Date), enter: a. Start Date: 9/30/2026; b. End Date: 9/29/2031.
- In Line 18 (Estimated Funding), enter the amount requested or to be contributed for the first budget/funding period only by each contributor.
- Line 21 is the Authorized Representative and should not be the same individual as the PD in Line 8f.

It is recommended you review the sample of a completed SF-424.

SF-424A Budget Information Form

Fill out all sections of the SF-424A using the instructions below. **The totals in Sections A, B, and D must match.**

- **Section A –** Budget Summary:
  - As cost sharing/match is **not required,** use the first row only (Line 1) to report the total federal funds (e) and non-federal funds (f) requested for the **first year** of your project only.
- **Section B –** Budget Categories:
  - As cost sharing/match is **not required,** use the first column only (Column 1) to report the budget category breakouts (Lines 6a through 6h) and indirect charges (Line 6j) for the total funding requested for the **first year** of your project only.
- **Section C –** Non-Federal Resources:
  - As cost sharing/match is **not required,** leave this section blank.
- **Section D –** Forecasted Cash Needs:
  - Enter the total funds requested, broken down by quarter, only for **Year 1** of the project period.
  - Use the first row for federal funds and the second row (Line 14) for **non-federal** funds.
- **Section E –** Budget Estimates of Federal Funds Needed for the Balance of the Project:
  - Enter the total funds requested for the out years (e.g., Year 2, Year 3, Year 4, and Year 5). For example, if funds are being requested for five years total, enter the requested budget amount for each of those budget period in columns b, c, d, and e (i.e., four out years):
    - (b) First column is the budget for the second budget period.
    - (c) Second column is the budget for the third budget period.
    - (d) Third column is the budget for the fourth budget period.
    - (e) Fourth column is the budget for the fifth budget period.
  - Use Line 16 for federal funds and Line 17 for non-federal funds.

See Formatting Requirements to review common errors in completing the SF-424 and the SF-424A. These errors will prevent your application from being successfully submitted.

It is highly recommended you use the Budget Template on the SAMHSA website.

See the Budget Template Users Guide and the sample completed SF-424A forms at Sample SF-424A (Match Not Required)

For additional information, see Section F in the Application Guide and Budget Related FAQs.

Step 4: Learn About Review and Award

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Application Review

Initial Review

We review each application to make sure it meets basic requirements. We will not consider an application that:

- Is from an organization that does not meet all eligibility criteria.
- Is submitted after the deadline.
- Exceeds the 15-page limit for the Project Narrative.

Merit Review

Project Narrative

Your Project Narrative describes the proposed project. Peer reviewers will assess your response to the criteria below. The following instructions should be considered as you develop the Project Narrative:

- The Project Narrative cannot be longer than 15 pages.
- There are four sections (Sections A–D) and you must use the section numbers and headings listed in the Evaluation Criteria (e.g., A.1, B.2) **before the response to each criterion.**
- Do not combine two or more criteria or refer to another section of the Project Narrative in your response.
- Reviewers will only consider information included in the appropriate numbered criterion.
- The number of points after each section heading is the maximum number of points a reviewer may give for that section.
- Unless required, cost-sharing will not be a factor in the review of your response to the criteria.

A: Intended Audience, Population of focus and need statement (20 points – approximately 3 pages)

1. Identify and describe:
    - The healthcare providers (including primary care, mental health professionals and pediatric providers), paraprofessionals, and non-clinical community service providers who will be provided TTA on the identification of, interventions for, and treatment of eating disorders. Include information on professions, geographic focus, organization types, etc.

2. Describe the individuals and communities impacted by the delivery of TTA as well as the impact on their health outcomes, including:
    - Characteristics of individuals (e.g., sex [male or female], geographic distribution, system involvement, clinical concerns) across the lifespan, including children and youth, with or at risk for eating disorders that will be impacted by the delivery of TTA.
    - The proposed impact of TTA delivery on health outcomes for individuals across the lifespan, including children and youth, with or at risk for eating disorders.
3. Describe the need for national TTA on eating disorders, including service gaps, barriers to care, screening and identification and workforce capacity. Identify the source of the data (e.g., National Survey on Drug Use and Health (NSDUH)). (**Note:** Citations can be put in an attachment). **Note:** Racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation are prohibited.

B: Proposed implementation approach (40 points – approximately 6 pages)

1. Describe the goals and measurable objectives of your proposed project. See Developing Goals and Measurable Objectives. They must align with the Statement of Need in A.3. Provide the following table:

# of Individuals to receive TTA

TTA provided	Year 1	Year 2	Year 3	Year 4	Year 5
Total					

2. Describe how you will implement all the Required Activities and selected allowable activities. Include the methods of delivery for evidence-based TTA, education materials, and resources for the recipient audience(s), specifically as noted in Required Activities 2, 3, and 5.
3. Describe how your proposed implementation approach will address SAMHSA Strategic Priorities.
4. In Attachment 4, provide no more than a two-page chart or graph depicting a realistic timeline for the entire 5 years of the program. It must include dates, key activities (i.e., Step 1 required activities), and

responsible staff. Indicate when service delivery will begin. The timeline does not count towards the page limit for the Program Narrative.

C: Organizational experience and staffing (30 points – approximately 4 pages)

1. Describe your organization's experience with providing evidence-based TTA, including curriculum development, to healthcare providers, paraprofessionals, and non-clinical community service providers to improve practice and outcomes for individuals who experience eating disorders.
2. Identify any organization(s) you will partner with. For each, describe their experience providing the required activities and their specific roles and responsibilities for this project. If applicable, include LOCs from each partner in **Attachment 1.** Indicate if you are not partnering with any other organization(s).
3. Provide a complete list of all significant staff positions for the project, including the key personnel (Project Director and Evaluator). For each, describe their:
    - Role.
    - Level of effort (LOE), stated as a percentage of employment. (e.g., 1.0 FTE = full-time)
    - Qualifications, including their experience designing, developing, or providing TTA to the intended audience or increasing the impact of behavioral health services for the individuals impacted by eating disorders.

D: Data collection and performance measurement (10 points – approximately 2 pages)

1. Describe how you will collect the required data for this program and what other data will be collected. Describe how required and proposed data collection will be used for continuous quality improvement and to manage, monitor, and enhance the program (see Developing the Plan for Data Collection and Performance Measurement).

Risk Review

Before making an award, we review the risk that you will not prudently manage federal funds. We need to make sure you have handled any past federal awards well and demonstrated sound business practices.

We use SAM.gov Responsibility/Qualification to check this history for all awards likely to be over $250,000.

You can comment on your organization's information in SAM.gov. We'll consider your comments before deciding about your level of risk.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see 2 CFR Part 200.

Review and Selection Process

When making funding decisions, we consider:

- Peer review results. Reviewers evaluate an application's scientific/technical aspects through the merit review process, which is an evaluation of the merits of the submitted application(s) based on the criteria/guidelines provided in the NOFO. The results of that merit review are advisory in nature only. Program offices and approving officials make final determinations for funding.
- Alignment with agency priorities. Before final funding decisions are made, applications will be reviewed for consistency with applicable laws and alignment with SAMHSA Strategic Priorities. To the extent permitted by law and applicable court orders, applications that do not align with SAMHSA Strategic Priorities will not receive funding.

The program office and approving official make the final determination for funding based on the following:

- When the individual award is over $250,000, approval by the Center for Mental Health Services, National Advisory Council.
- Availability of funds.
- Submission of any required documentation that must be submitted prior to making an award.

Other principles that may be considered in funding decisions include:

- Preference for discretionary awards should be given to institutions with lower indirect cost rates.

- Discretionary grants should be given to a broad range of recipients rather than to a select group of repeat players. Grants should be awarded to a mix of recipients likely to produce immediately demonstrable results and recipients with the potential for potentially longer-term, breakthrough results, in a manner consistent with the funding opportunity announcement.
- To the extent institutional affiliation is considered in making discretionary awards, agencies should prioritize an institution's commitment to rigorous, reproducible scholarship over its historical reputation or perceived prestige. As to science grants, agencies should prioritize institutions that have demonstrated success in implementing Gold Standard Science.

Award Notices

You will receive an email from eRA Commons that describes how you can access the application review results, including the application score. If your application is approved for funding, a Notice of Award (NoA) will be emailed to: (1) the Signing Official identified on page 3 of the SF-424 (Authorized Representative section); and (2) the Project Director identified on page 1 of the SF-424 (8f).

If your application is not funded, an email will be sent to you from eRA Commons. This email will include a summary of the peer reviewer comments and scores. It may take up to four months from the program's award date for this information to be sent to you.

The NoA is the only document that authorizes recipients to receive federal funding for a project.

Step 5:
Submit Your Application

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Submission Requirements and Deadlines

Go to Find the Application Package to make sure you have everything you need.

Make sure you are current with SAM.gov and UEI requirements. See Get Registered.

You must maintain your registration throughout the life of any award.

Deadlines

Application

Due on Wednesday, June 24, 2026.

- For electronic submissions, the due time is 11:59 p.m. ET.
- If you receive an exemption from electronic submission, the due time is 4:30 p.m. ET. See exemptions for paper applications (3.2) in *Section A* in the *Application Guide*.
- When your application is submitted, it must pass validation checks for both Grants.gov and eRA. You will receive emails from both systems to either confirm the application successfully passed validation checks, or to notify you that there were errors that must be fixed before the application can be considered successfully submitted.
- If using the Grants.gov Workspace tool, use the Preview Grantor Validation feature in Grants.gov before submitting your application. Doing so will allow you to validate your application and review/fix all errors and warnings before submitting.
- It is strongly advised that organizations log into their eRA Commons account post submission to confirm submission status, as emails from each system could be placed in a recipient's junk mail folder and go unread.

Intergovernmental Review

You will need to submit application information for intergovernmental review under Executive Order 12372. Under this order, states may design their own processes for obtaining, reviewing, and commenting on some applications. See *Section J* in the *Application Guide*.

This requirement does not apply to states or American Indian and Alaska Native tribes or tribal organizations.

Step 6: Learn What Happens After Award

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Post-award Requirements and Administration

Administrative and National Policy Requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the NoA. We incorporate this NOFO by reference. You can see SAMHSA's standard terms and conditions on our website.
- The regulations at 2 CFR Part 200 — Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, modifications at 2 CFR 300, and any superseding regulations.
- The HHS Grants Policy Statement (GPS). Your NoA will reference this document. If there are any exceptions to the GPS, they'll be listed in your NoA.
- All anti-discrimination laws: By applying for or accepting federal funds from HHS, you certify compliance with all federal antidiscrimination laws and these requirements. Complying with those laws is a material condition of receiving federal funding streams. You are responsible for ensuring subrecipients, contractors, and partners also comply.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in HHS Administrative and National Policy Requirements. See Section H in the Application Guide.
- SAMHSA grants must align with SAMHSA and presidential priorities and policies.
- SAMHSA may terminate an award in accordance with any of the conditions set forth in 2 CFR 200.340(a)(1)–(4), including when an award no longer effectuates program goals or agency priorities as provided in 2 CFR 200.340(a)(4).

Reporting Requirements

If funded, you will have to follow reporting requirements. The NoA will provide specific details.

You are required to submit an annual Programmatic Progress Report (PPR) in years one through four and a cumulative Final Progress Report (FPR) in year five. You must use the OMB-approved Excel Programmatic Progress Report (PPR) template for your program.

You will need to submit your completed PPRs in eRA Commons.

The annual PPR for years one through four is due within 90 days of the end of each budget period.

The **Programmatic Progress Report** must discuss:

- Updates on key personnel, budget, or project changes (as applicable);
- Progress achieving your application's goals and objectives;
- Progress implementing required activities and selected allowable activities, including accomplishments, facilitators, challenges and barriers, and planned actions to leverage successes or address challenges and barriers;
- The impact of the TTA on the primary audience including practice improvement, improved capacity, and knowledge transfer;
- A list of all TTA materials developed and disseminated during the reporting period; and
- Success stories.

You must submit the FPR within 120 days of the end of the project period. This report must be cumulative and include all activities during the entire project period.

After receiving your grant award, you will be required to submit various financial reports to SAMHSA. Please see SAMHSA Reporting Requirements.

Endnotes

1. Juli, R., Juli, M. R., Juli, G., & Juli, L. (2023). Eating Disorders and Psychiatric Comorbidity. *Psychiatria Danubina, 35 (Suppl 2), 217–220.* ↕
2. *2 CFR 300.414(c)(1)(i) – The indirect costs for the portion of an award to an organization which is for training may be capped at a fixed rate of 8 percent of Modified Total Direct Costs (MTDC), exclusive of tuition and related fees, as well as subawards in excess of $25,000.* ↕