

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Rural Hospital Provider Assistance Program

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: HRSA's Federal Office of Rural Health Policy (FORHP), within HHS, will administer the Rural Hospital Provider Assistance Program for fiscal year (FY) 2026, a new formula grant program authorized under the Consolidated Appropriations Act, 2026. This notice is being issued prior to the publication of the Rural Hospital Provider Assistance Program Notice of Funding Opportunity to allow eligible hospitals enough time to prepare and submit applications through www.grants.gov, and for HRSA to process applications. \$25,000,000 will be available for HRSA to make payments to eligible hospitals within FY 2026.

DATES: Completed applications must be submitted electronically through www.grants.gov by July 1, 2026, at 11:59 p.m. Eastern Time.

ADDRESSES: Questions should be submitted to RuralHospitals@hrsa.gov.

FOR FURTHER INFORMATION CONTACT: Krista Mastel, Public Health Analyst, Hospital State Division, FORHP, HRSA, 5600 Fishers Lane, Rockville, Maryland 20852, 1-301-443-0491, and RuralHospitals@hrsa.gov.

SUPPLEMENTARY INFORMATION:

Background

Section 711 of the Social Security Act (42 U.S.C. 912) directs FORHP to advise the Secretary of HHS on policies affecting rural hospitals and health care and coordinating activities within HHS that relate to rural health care. Since the 1990s, FORHP has administered grants that support activities related to increasing access to health care in rural areas. The Consolidated Appropriations Act, 2026, Public Law 119-75, H.R. 7148, authorized \$25,000,000 for making payments to eligible hospitals for the maintenance of health care providers. This program will be administered by FORHP. Eligible hospitals will apply directly to HRSA, and funds will be awarded directly to hospitals.

Eligibility Information

As set forth in the Consolidated Appropriations Act, 2026, eligible hospitals must meet the following criteria to receive payments: (1) have no more than 50 inpatient beds and (2) have an established wage index values of less than 0.90 as determined by the Secretary of HHS under section 1886(d)(3)(E) of the Social Security Act (42 U.S.C. 1395ww(d)(3)(E)). The payment amounts will be determined by dividing total available funding equally among eligible hospitals. Up to 10 percent of the funds may be used by eligible hospitals for administrative expenses.

For the purposes of this grant program, HRSA will use the following methodology and best and most current data available at the time of this notice to determine eligible hospitals:

1. *Inpatient Beds:* the number of inpatient beds will be determined by the number of acute care inpatient beds reported in the Medicare cost report provided in the Centers for Medicare & Medicaid Services (CMS) Healthcare Cost Report Information System Quarterly Update for FY 2025 as of December 31, 2025. Acute care inpatient beds are derived from the Medicare cost report, Worksheet S-3, Part I, Line 14, column 2, which represents staffed beds and excludes beds paid under separate psychiatric or rehabilitation payment systems.

2. *Hospital Wage Index:* HRSA will use the wage index values published in Table 2, as finalized in the FY 2026 Hospital Inpatient Prospective Payment System final rule (or correction notice, if applicable), which reflect the full application of all relevant policies and adjustments to determine whether a hospital had an established wage index value of less than 0.90. Table 2 is available on the CMS website at <https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps>. To access it, select the link for the applicable final rule on the left-hand side of the page or navigate to "Acute Inpatient Files for Download." With each Inpatient Prospective Payment System final rule (or correction notice, if applicable), CMS publishes Table 2: Case-Mix Index and Wage Index by CMS Certification Number. This table reflects the final wage index assigned to each hospital for the upcoming fiscal year at the time of the development of the final rule. The wage index values incorporate all applicable policies and adjustments, including reclassifications, wage index floors, caps, and other statutory or regulatory requirements.

3. *Rural Status:* eligible hospitals must be located in a HRSA-designated rural area (<https://www.hrsa.gov/rural-health/about-us/what-is-rural>). The Rural Health Grants Analyzer (<https://data.hrsa.gov/topics/rural-health/rural-health-eligibility>) identifies all counties and census tracts that are considered a HRSA-designated rural area.

Preliminary analysis identified 167 hospitals across 13 states that met the criteria established in the Consolidated Appropriations Act, 2026, and located in HRSA-designated rural areas. Based on this analysis, HRSA estimates awarding \$24,750,000 to 167 eligible hospitals in the amount of approximately \$148,000 per hospital assuming all eligible hospitals apply. All eligible hospitals must apply for grant funding in order to receive payment. The final per hospital award amount will be adjusted based on the total number of eligible hospitals that apply for funding. Further information on the identified hospitals is provided under "Preliminary List of Hospitals Meeting Eligibility Criteria" section.

Applications and Submission Information

HRSA anticipates releasing the Rural Hospital Provider Assistance Program (HRSA-26-105) Notice of Funding Opportunity in May 2026. Applicants can find more information on www.grants.gov: <https://www.grants.gov/search-results-detail/361524>. Eligible hospitals are encouraged to subscribe to the funding forecast to receive updates on the application release and an upcoming informational webinar, where applicants can ask questions on the program and application process. For general information about federal grants, applicants can visit <https://www.grants.gov/learn-grants/grants-101/>.

Applications must be submitted through [Grants.gov](http://www.grants.gov) by July 1, 2026, at 11:59 p.m. Eastern Time. Since registration can take several weeks, eligible hospitals are strongly encouraged to begin the process of registering with [SAM.gov](http://www.sam.gov) and [Grants.gov](http://www.grants.gov) as soon as possible to avoid delays and ensure timely submission. For additional guidance, applicants can refer to the Quick Start Guide for Applicants (<https://www.grants.gov/quick-start-guide/applicants>) and How to Apply for Grants (<https://www.grants.gov/applicants/grant-applications/how-to-apply-for-grants>).

Preliminary List of Hospitals Meeting Eligibility Criteria

The table below is provided for informational purposes only and is

based on preliminary analysis to identify hospitals that may meet the eligibility criteria set forth in the Consolidated Appropriations Act, 2026, and are located in HRSA-designated

rural areas (<https://www.hrsa.gov/rural-health/about-us/what-is-rural>). This includes hospitals with no more than 50 acute care inpatient beds and a FY 2026 wage index of less than 0.90, including

hospitals that may have converted to a Critical Access Hospital or Rural Emergency Hospital. For questions, please contact RuralHospitals@hrsa.gov.

Hospital name	City	State
ATMORE COMMUNITY HOSPITAL	ATMORE	AL
BIBB MEDICAL CENTER	CENTREVILLE	AL
BULLOCK COUNTY HOSPITAL	UNION SPRINGS	AL
CLAY COUNTY HOSPITAL	ASHLAND	AL
COMMUNITY HOSPITAL INC	TALLASSEE	AL
CRENSHAW COMMUNITY HOSPITAL	LUVERNE	AL
D W MCMILLAN MEMORIAL HOSPITAL	BREWTON	AL
EAMC-LANIER	VALLEY	AL
EVERGREEN MEDICAL CENTER	EVERGREEN	AL
FAYETTE MEDICAL CENTER	FAYETTE	AL
GROVE HILL MEMORIAL HOSPITAL	GROVE HILL	AL
HIGHLANDS MEDICAL CENTER	SCOTTSBORO	AL
HILL HOSPITAL OF SUMTER COUNTY	YORK	AL
JACKSON MEDICAL CENTER	JACKSON	AL
JOHN PAUL JONES HOSPITAL	CAMDEN	AL
LAKE MARTIN COMMUNITY HOSPITAL	DADEVILLE	AL
LAKELAND COMMUNITY HOSPITAL	HALEYVILLE	AL
MARION REGIONAL MEDICAL CENTER	HAMILTON	AL
MIZELL MEMORIAL HOSPITAL	OPP	AL
MONROE COUNTY HOSPITAL	MONROEVILLE	AL
NORTH BALDWIN INFIRMARY	BAY MINETTE	AL
NORTHWEST MEDICAL CENTER	WINFIELD	AL
REGIONAL MEDICAL CTR OF CENTRAL AL	GREENVILLE	AL
RUSSELL MEDICAL CENTER	ALEXANDER CITY	AL
RUSSELLVILLE HOSPITAL	RUSSELLVILLE	AL
ST. VINCENTS CHILTON	CLANTON	AL
TROY REGIONAL MEDICAL CENTER	TROY	AL
WHITFIELD REGIONAL HOSPITAL	DEMOPOLIS	AL
WIREGRASS MEDICAL CENTER	GENEVA	AL
BHMC-STUTTGART	STUTTGART	AR
BHMC-DREW COUNTY	MONTICELLO	AR
CHAMBERS MEMORIAL HOSPITAL	DANVILLE	AR
FORREST CITY MEDICAL CENTER	FORREST CITY	AR
GREAT RIVER MEDICAL CENTER	BLYTHEVILLE	AR
MAGNOLIA REGIONAL HEALTH SYSTEM INC	MAGNOLIA	AR
OUACHITA COUNTY MEDICAL CENTER	CAMDEN	AR
SILOAM SPRINGS MEMORIAL HOSPITAL	SILOAM SPRINGS	AR
WADLEY MEDICAL CENTER AT HOPE	HOPE	AR
ADVENTHEALTH MURRAY	CHATSWORTH	GA
APPLING GENERAL HOSPITAL	BAXLEY	GA
BURKE MEDICAL CENTER	WAYNESBORO	GA
DODGE COUNTY HOSPITAL	EASTMAN	GA
DONALSONVILLE HOSPITAL	DONALSONVILLE	GA
DORMINY MEDICAL CENTER	FITZGERALD	GA
EMANUEL MEDICAL CENTER	SWAINSBORO	GA
EVANS MEMORIAL HOSPITAL	CLAXTON	GA
FLINT RIVER COMMUNITY HOSPITAL	MONTEZUMA	GA
GRADY GENERAL HOSPITAL	CAIRO	GA
JEFFERSON HOSPITAL	LOUISVILLE	GA
NGMC HABERSHAM	DEMOREST	GA
SGHS—CAMDEN CAMPUS	ST. MARYS	GA
SGMC BERRIEN CAMPUS	NASHVILLE	GA
SOUTHWELL MEDICAL	ADEL	GA
STEPHENS COUNTY HOSPITAL	TOCCOA	GA
UNION GENERAL HOSPITAL	BLAIRSVILLE	GA
UNIVERSITY HOSPITAL MCDUFFIE	THOMSON	GA
WASHINGTON CO REG MED CTR	SANDERSVILLE	GA
ADVENTHEALTH OTTAWA	OTTAWA	KS
COFFEYVILLE REG MEDICAL CENTER, INC	COFFEYVILLE	KS
LABETTE COUNTY MEDICAL CENTER	PARSONS	KS
MCPHERSON HOSPITAL, INC	MCPHERSON	KS
MIAMI COUNTY MEDICAL CENTER	PAOLA	KS
PRATT REGIONAL MEDICAL CENTER	PRATT	KS
SAINT JOHN HOSPITAL	LEAVENWORTH	KS
SALINA SURGICAL HOSPITAL	SALINA	KS
STORMONT VAIL—FLINT HILLS	JUNCTION CITY	KS
SUMMIT SURGICAL, LLC	HUTCHINSON	KS
SUSAN B. ALLEN MEMORIAL HOSPITAL	EL DORADO	KS

Hospital name	City	State
UKHS GREAT BEND CAMPUS	GREAT BEND	KY
ADVENTHEALTH MANCHESTER	MANCHESTER	KY
HARRISON MEMORIAL HOSPITAL	CYNTHIANA	KY
MIDDLESBORO ARH	MIDDLESBORO	KY
MONROE COUNTY MEDICAL CENTER	TOMPKINSVILLE	KY
MUHLENBERG COMMUNITY HOSPITAL	GREENVILLE	KY
OWENSBORO HEALTH TWIN LAKES MEDICAL	LEITCHFIELD	KY
PAINTSVILLE ARH HOSPITAL	PAINTSVILLE	KY
PINEVILLE COMMUNITY HEALTH CENTER	PINEVILLE	KY
ROCKCASTLE HOSPT. & RESPIR CARE CTR	MT VERNON	KY
THE MEDICAL CENTER AT RUSSELLVILLE	RUSSELLVILLE	KY
TJ HEALTH COLUMBIA	COLUMBIA	KY
TUG VALLEY ARH	SOUTH WILLIAMSON	KY
ACADIAN MEDICAL CENTER	EUNICE	LA
ALLEN PARISH HOSPITAL	KINDER	LA
AVOYELLES HOSPITAL	MARKSVILLE	LA
BEAUREGARD MEMORIAL HOSPITAL, INC	DERIDDER	LA
BYRD REGIONAL HOSPITAL	LEESVILLE	LA
CALDWELL MEMORIAL HOSPITAL	COLUMBIA	LA
CITIZENS MEDICAL CENTER	COLUMBIA	LA
DESOTO REGIONAL HEALTH SYSTEM	MANSFIELD	LA
EAST CARROLL PARISH HOSPITAL	LAKE PROVIDENCE	LA
FRANKLIN MEDICAL CENTER	WINNSBORO	LA
HOMER MEMORIAL HOSPITAL	HOMER	LA
LASALLE GENERAL HOSPITAL, INC	JENA	LA
MERCY REGIONAL MEDICAL CENTER	VILLE PLATTE	LA
MOREHOUSE GENERAL HOSPITAL	BASTROP	LA
OAKDALE COMMUNITY HOSPITAL	OAKDALE	LA
OCHSNER AMERICAN LEGION HOSPITAL	JENNINGS	LA
OUR LADY OF THE ANGELS HOSPITAL MC	BOGALUSA	LA
RICHLAND PARISH HOSPITAL SERVICE DIS	RAYVILLE	LA
SABINE MEDICAL CENTER	MANY	LA
SAVOY MEDICAL MANAGEMENT GROUP INC	MAMOU	LA
SPRINGHILL MEDICAL CENTER	SPRINGHILL	LA
WINN PARISH MEDICAL CENTER	WINNFIELD	LA
GARRETT COUNTY MEMORIAL HOSPITAL	OAKLAND	MD
ANDERSON REGIONAL MED CTR-SOUTH CAMP	MERIDIAN	MS
BAPTIST MEM HOSPITAL BOONEVILLE	BOONEVILLE	MS
BEACHAM MEMORIAL HOSPITAL	MAGNOLIA	MS
CLAY COUNTY MEDICAL CORPORATION	WEST POINT	MS
GEORGE COUNTY HOSPITAL	LUCEDALE	MS
GREENWOOD LEFLORE HOSPITAL	GREENWOOD	MS
HIGHLAND COMMUNITY HOSPITAL	PICAYUNE	MS
HIGHLAND HILLS MEDICAL CENTER	SENATOBIA	MS
JASPER GENERAL HOSPITAL	BAY SPRINGS	MS
KINGS DAUGHTERS MEDICAL CENTER	BROOKHAVEN	MS
MAGEE GENERAL HOSPITAL	MAGEE	MS
MARION GENERAL HOSPITAL	COLUMBIA	MS
NESHOBA COUNTY GENERAL HOSPITAL	PHILADELPHIA	MS
SOUTH SUNFLOWER COUNTY HOSPITAL	INDIANOLA	MS
TISHOMINGO HEALTH SERVICES	IUKA	MS
UMMC-GRENADA	GRENADA	MS
WAYNE GENERAL HOSPITAL	WAYNESBORO	MS
WEBSTER HEALTH SERVICES	EUPORA	MS
WINSTON MEDICAL CENTER	LOUISVILLE	MS
YALOBUSHA GENERAL HOSPITAL	WATER VALLEY	MS
DUPLIN GENERAL HOSPITAL INCORPORATED	KENANSVILLE	NC
THE MCDOWELL HOSPITAL	MARION	NC
ALLIANCE COMMUNITY HOSPITAL	ALLIANCE	OH
KINGS DAUGHTERS MED CENTER OHIO	PORTSMOUTH	OH
MEMORIAL HOSPITAL	FREMONT	OH
MERCY HEALTH—TIFFIN HOSPITAL LLC	TIFFIN	OH
POMERENE HOSPITAL	MILLERSBURG	OH
THE BELLEVUE HOSPITAL	BELLEVUE	OH
CHEROKEE MEDICAL CENTER	GAFFNEY	SC
COASTAL CAROLINA MEDICAL CENTER	HARDEEVILLE	SC
HAMPTON REGIONAL MEDICAL CENTER	VARNVILLE	SC
MCLEOD HEALTH CHERAW	CHERAW	SC
MCLEOD HEALTH CLARENDON	MANNING	SC
MCLEOD MEDICAL CENTER—DILLON	DILLON	SC
MUSC HEALTH BLACK RIVER MEDICAL CENTER	CADES	SC
MUSC HEALTH MARION MEDICAL CENTER	MULLINS	SC
NEWBERRY COUNTY MEMORIAL HOSPITAL	NEWBERRY	SC
PH LAURENS COUNTY HOSPITAL	CLINTON	SC

Hospital name	City	State
ASCENSION ST THOMAS RIVER PARK	MCMINNVILLE	TN
BAPTIST MEM HOSPITAL HUNTINGDON	HUNTINGDON	TN
BAPTIST MEM HOSPITAL TIPTON COUNTY	COVINGTON	TN
BAPTIST MEM HOSPITAL UNION CITY	UNION CITY	TN
CLAIBORNE MEDICAL CENTER	TAZEVELL	TN
HARDIN MEDICAL CENTER	SAVANNAH	TN
HAWKINS COUNTY MEMORIAL HOSPITAL	ROGERSVILLE	TN
HAYWOOD COUNTY COMMUNITY HOSPITAL	BROWNSVILLE	TN
HENDERSON COUNTY COMMUNITY HOSPITAL	LEXINGTON	TN
HENRY COUNTY MEDICAL CENTER	PARIS	TN
LAFOLLETTE MEDICAL CENTER	LAFOLLETTE	TN
LINCOLN MEDICAL CENTER	FAYETTEVILLE	TN
MILAN GENERAL HOSPITAL	MILAN	TN
NEWPORT MEDICAL CENTER	NEWPORT	TN
SAINT THOMAS HIGHLAND HOSPITAL	SPARTA	TN
SAINT THOMAS STONES RIVER HOSPITAL	WOODBURY	TN
ST THOMAS DEKALB HOSPITAL	SMITHVILLE	TN
UNITY MEDICAL CENTER	MANCHESTER	TN
VANDERBILT BEDFORD COUNTY HOSPITAL	SHELBYVILLE	TN
WEST TN HEALTHCARE VOLUNTEER HOSPITA	MARTIN	TN
MON HEALTH MARION NEIGHBORHOOD HOSPI	WHITE HALL	WV
PLEASANT VALLEY HOSPITAL	POINT PLEASANT	WV
STONEWALL JACKSON MEMORIAL HOSPITAL	WESTON	WV
WELCH COMMUNITY HOSPITAL	WELCH	WV
WETZEL COUNTY HOSPITAL	NEW MARTINSVILLE	WV

Thomas J. Engels,
Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Vaccine Injury Compensation Program; List of Petitions Received

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: HRSA is publishing this notice of petitions received under the National Vaccine Injury Compensation Program (the Program), as required by the Public Health Service (PHS) Act, as amended. While the Secretary of HHS is named as the respondent in all proceedings brought by the filing of petitions for compensation under the Program, the United States Court of Federal Claims is charged by statute with responsibility for considering and acting upon the petitions.

FOR FURTHER INFORMATION CONTACT: For information about requirements for filing petitions, and the Program in general, contact Lisa L. Reyes, Clerk of Court, United States Court of Federal Claims, 717 Madison Place NW, Washington, DC 20005, (202) 357-6400. For information on HRSA’s role in the Program, contact the Director, Division

of Injury Compensation Programs, 5600 Fishers Lane, Room 14W-18, Rockville, Maryland 20857; 1-800-338-2382, or visit our website at: <https://www.hrsa.gov/vaccine-compensation>.

SUPPLEMENTARY INFORMATION: The Program provides a system of no-fault compensation for certain individuals who have been injured by specific vaccines. Subtitle 2 of Title XXI of the PHS Act, 42 U.S.C. 300aa-10 *et seq.*, provides that those seeking compensation are to file a petition with the United States Court of Federal Claims and to serve a copy of the petition to the Secretary of HHS, who is named as the respondent in each proceeding. The Secretary has delegated this responsibility under the Program to HRSA. The Court is directed by statute to appoint special masters who take evidence, conduct hearings as appropriate, and make initial decisions as to eligibility for, and amount of, compensation.

A petition may be filed with respect to injuries, disabilities, illnesses, conditions, and deaths resulting from vaccines described in the Vaccine Injury Table (the Table) set forth at 42 CFR 100.3. This Table lists for each covered vaccine the conditions that may lead to compensation and, for each condition, the time period for occurrence of the first symptom or manifestation of onset or of significant aggravation after vaccine administration. Compensation may also be awarded for conditions not listed in the Table and for conditions that are manifested outside the time periods specified in the Table, but only

if the petitioner shows that the condition was caused by one of the listed vaccines.

Section 2112(b)(2) of the PHS Act, 42 U.S.C. 300aa-12(b)(2), requires that “[w]ithin 30 days after the Secretary receives service of any petition filed under section 2111 the Secretary shall publish notice of such petition in the **Federal Register**.” Set forth below is a list of petitions received by HRSA on March 1, 2026, through March 31, 2026. This list provides the name of the petitioner, city, and state of vaccination (if unknown then the city and state of the person or attorney filing the claim), and case number. In cases where the Court has redacted the name of a petitioner and/or the case number, the list reflects such redaction.

Section 2112(b)(2) also provides that the special master “shall afford all interested persons an opportunity to submit relevant, written information” relating to the following:

1. The existence of evidence “that there is not a preponderance of the evidence that the illness, disability, injury, condition, or death described in the petition is due to factors unrelated to the administration of the vaccine described in the petition,” and

2. Any allegation in a petition that the petitioner either:

a. “[S]ustained, or had significantly aggravated, any illness, disability, injury, or condition not set forth in the Vaccine Injury Table but which was caused by” one of the vaccines referred to in the Table, or

b. “[S]ustained, or had significantly aggravated, any illness, disability,