



**Delaware Health
and Social Services**

Office of the Secretary

1901 N. DUPONT HIGHWAY, NEW CASTLE, DE 19720 * TELEPHONE: 302-255-9040 FAX: 302-255-4429

Memorandum of Understanding

between

THE DELAWARE DEPARTMENT OF HEALTH AND SOCIAL SERVICES

and

THE DELAWARE STATE HOUSING AUTHORITY

Purpose of the Memorandum of Understanding (MOU)

This Memorandum of Understanding (MOU) is between the Delaware Department of Health and Social Services (“DHSS”) and Delaware State Housing Authority (“DSHA”). Each partner listed in this MOU has agreed to enter into a collaborative agreement in order to ensure funding from the Rural Health Transformation Program is spent according to the project plan for establishing Kent and Sussex Counties Hope Centers.

Description of Partner Agencies

- a) The Delaware Department of Health and Social Services (“DHSS”) – DHSS improves the quality of life for Delaware’s citizens by promoting health and well-being, fostering self-sufficiency, and protecting vulnerable populations. Each of the ten divisions within DHSS provides essential services to meet its mission. DHSS, established through [29 Del C. §7901](#), has over 4,000 full time employees, located across the state serving clients at some of the most challenging moments in their lives, including administering SNAP and Medicaid.
- b) The Delaware State Housing Authority (“DSHA”) – DSHA is Delaware’s housing finance and community development agency and also serves as a public housing authority in Kent & Sussex County. DSHA, established through [29 Del. C. §8601](#), provides and assists others with quality, affordable housing opportunities and appropriate supportive services to low-and-moderate-income Delawareans.

Need for the MOU

- a) On December 29, 2025, the Centers for Medicaid and Medical Services (“CMS”), awarded Delaware, through DHSS, \$157.4 million for Year one of the Rural Health Transformation Program (“RHTP”). RHTP was included in Public Law 119-21, [One Big Beautiful Bill Act of 2025 \(“OBBBA”\)](#) to support rural health over five years. States had to identify projects that utilized funds in these named purposes:
 - a. **Prevention and chronic disease:** Promoting evidence-based, measurable interventions to improve prevention and chronic disease management.
 - b. **Provider payments:** Providing payments to health care providers for the provision of health care items or services, subject to restrictions described in the funding policies and limitations.
 - c. **Consumer tech solutions:** Promoting consumer-facing, technology-driven solutions for the prevention and management of chronic diseases.

“TO IMPROVE THE QUALITY OF LIFE FOR DELAWARE’S CITIZENS BY PROMOTING HEALTH AND WELL-BEING, FOSTERING SELF-SUFFICIENCY, AND PROTECTING VULNERABLE POPULATIONS.”

- d. **Training and technical assistance:** Providing training and technical assistance for the development and adoption of technology-enabled solutions that improve care delivery in rural hospitals, including remote monitoring, robotics, artificial intelligence, and other advanced technologies.
 - e. **Workforce:** Recruiting and retaining clinical workforce talent to rural areas, with commitments to serve rural communities for a minimum of 5 years.
 - f. **IT advances:** Providing technical assistance, software, and hardware for significant information technology advances designed to improve efficiency, enhance cybersecurity capability development, and improve patient health outcomes.
 - g. **Appropriate care availability:** Assisting rural communities to right size their health care delivery systems by identifying needed preventative, ambulatory, pre-hospital, emergency, acute inpatient care, outpatient care, and post-acute care service lines.
 - h. **Behavioral health:** Supporting access to opioid use disorder treatment services (as defined in section 1861(jjj)(1) of the Social Security Act), other substance use disorder treatment services, and mental health services.
 - i. **Innovative care:** Developing projects that support innovative models of care that include value-based care arrangements and alternative payment models, as appropriate.
- b) One project includes a partnership between DHSS and DSHA. This project aims to establish and operate two new Hope Centers to address health needs of the rural homeless population in Kent and Sussex County.
- c) This MOU seeks to clarify roles within DHSS and DSHA in order to successfully launch the Hope Centers.

Responsibilities

This MOU signifies that DHSS has entered into an agreement with the DSHA to establish two new Hope Centers in Kent and Sussex Counties. All parties agree to the responsibilities outlined below. These responsibilities may be subject to change upon consent of all parties involved.

- a) The Department of Health and Social Services (“DHSS”) will:
- a. Provide DSHA with the full funding amount of \$97.5 million for year one of RHTP. DHSS, once the MOU is executed and funds are received, will transfer these funds to DSHA using established state processes. DHSS agrees to support DSHA with RHTP funds for years two through five, based on the CMS approved budget. Funding will be transferred in November each year, through 2029, pending CMS approval.
 - b. Incorporate DSHA input and feedback in revised Hope Center budgets and workplans throughout the grant period.
 - c. Provide technical assistance for Request for Proposals (RFP) for support within the Hope Center, including integrated healthcare, intensive case management, self-sufficiency program, and community coordination. This includes partner identification, strategic oversight, and evaluation services.
 - d. Provide appropriate legal counsel in conjunction with DSHA legal counsel to ensure the project is within the framework set out in the Notice of Award from CMS.
 - e. Provide DSHA with reporting templates for both programmatic and financial reports.

- f. Monitor progress about the Hope Centers Project through regular meeting with DSHA. The cadence will be agreed upon by each organization.
- g. Establish and maintain a RHTP webpage on the DHSS website.

b) The Delaware State Housing Authority (“DSHA”) will:

- a. Lead the development, establishment and operation of two Hope Centers in Kent and Sussex Counties.
- b. Provide appropriate legal counsel in conjunction with DHSS legal counsel to ensure the project is within the framework set out in the Notice of Award from CMS.
- c. Provide information to DHSS related to project budget, in order to support DHSS communication with CMS.
- d. Procure all service contractors through the RFP process, working with DHSS to ensure services meet the needs of the rural homeless population in Kent and Sussex counties.
- e. Act as landlord and manage all facility operations for all service contractors, by charging rent to all building tenants. During the grant period, DSHA will ensure rent is paid through the grant to support mission-aligned services identified in the project plan.
- f. Provide programmatic reporting to DHSS 15 days before the due date outlined below to ensure compliance with reporting dates. Reports include:
 - i. Quarterly progress reports

Report	Reporting Period Start Date	Reporting Period End Date	Due Date
Quarterly Report # 1	August 1, 2026	October 30, 2026	November 29, 2026
Quarterly Report # 2	October 31, 2026	January 30, 2027	March 1, 2027
Quarterly Report # 3	January 31, 2027	April 30, 2027	May 30, 2027
Annual report due August 30, 2027 in place of quarterly report			
Quarterly Report # 4	August 1, 2027	October 30, 2027	November 29, 2027
Quarterly Report # 5	October 31, 2027	January 30, 2028	February 29, 2028
Quarterly Report # 6	January 31, 2028	April 30, 2028	May 30, 2028
Annual report due August 30, 2028 in place of quarterly report			
Quarterly Report # 7	August 1, 2028	October 30, 2028	November 29, 2028
Quarterly Report # 8	October 31, 2028	January 30, 2029	March 1, 2029
Quarterly Report # 9	January 31, 2029	April 30, 2029	May 30, 2029
Annual report due August 30, 2029 in place of quarterly report			
Quarterly Report # 10	August 1, 2029	October 30, 2029	November 29, 2029
Quarterly Report # 11	October 31, 2029	January 30, 2030	March 1, 2030
Quarterly Report # 12	January 31, 2030	April 30, 2030	May 30, 2030
Annual report due August 30, 2030 in place of quarterly report			
Quarterly Report # 13	August 1, 2030	October 30, 2030	November 29, 2030

ii. Annual progress reports

Report	Reporting Period Start Date	Reporting Period End Date	Due Date
Annual Report # 1 ⁵	December 29, 2025	July 31, 2026	August 30, 2026
Annual Report # 2	August 1, 2026	July 31, 2027	August 30, 2027
Annual Report # 3	August 1, 2027	July 31, 2028	August 30, 2028
Annual Report # 4	August 1, 2028	July 31, 2029	August 30, 2029
Annual Report # 5	August 1, 2029	July 31, 2030	August 30, 2030
Final Report⁶	December 29, 2025	October 30, 2030	February 27, 2031

Commitment to Partnership

- a) The partners agree to collaborate pursuant to the program details within this agreement.
- b) We, the undersigned have read and agree with this MOU. Further, we have reviewed the proposed program plan and approve it.

IN WITNESS THEREOF, the Parties hereto have caused this Agreement to be duly executed as of the date and year first above written.

For the State of Delaware:
Department of Health & Social Services (DHSS)
Office of the Secretary

Signed by:
Julie Devlin
771D3869C2E2440...

Witness

Signed by:
Christin Linke Young
501183A26B1A498...

Christin Linke Young
Cabinet Secretary, DHSS

2/27/2026

Date

For the State of Delaware:
Delaware State Housing Authority (DSHA)

Signed by:
Bryce Gates
55DAD5B4A23D41B...

Witness

Signed by:
Matthew Heckles
E34DAEB45C4640A...

Matthew Heckles
Director, DSHA

3/6/2026

Date



**DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF PUBLIC HEALTH**

Delaware State Housing Authority

AMENDMENT #1 TO CONTRACT #26-284

FOR

KENT AND SUSSEX COUNTY HOPE CENTERS ESTABLISHMENT

This Amendment #1 (“Amendment”) is made effective as of May 1, 2026, by and between the State of Delaware, Department of Health and Social Services, DIVISION OF PUBLIC HEALTH (“Delaware”) and Delaware State Housing Authority (“Vendor”). Delaware and Vendor are hereinafter occasionally referred to individually as a “Party” or collectively as the “Parties”.)

WHEREAS, the parties to the Contract desire to amend it,

NOW, THEREFORE, the parties hereto do mutually agree as follows:

1. The original MOU is being amended to add a start date (5/1/26) and an end date (9/30/2031), add a MOU# (26-284), add a title (Kent and Sussex County Hope Centers Establishment) and add a CRS to show the funding.
2. The total amount of this amendment shall not exceed \$26,370,000.00. The total amount of the Contract shall not exceed \$26,370,000.00.
3. All other terms and conditions of the Contract shall remain in full force and effect.

IN WITNESS WHEREOF, the Party has caused this Amendment #1 to the Contract to be executed by their duly authorized officials.

Delaware State Housing Authority

**Department of Health & Social Services
DIVISION OF PUBLIC HEALTH**

Signed by:

Matthew Heckles

4/27/2026

Matthew Heckles

Date

Director, DSHA

Signed by:

Christen Linke Young

4/27/2026

Christen Linke Young

Date

DHSS Cabinet Secretary

Signed by:

Julie Devlin

4/27/2026

Julie Devlin

Date

Witness:

Signed by:

Bryce Gates

4/27/2026

Bryce Gates

Date

Witness

N/A

CMP

^{DS}
RW

Division

N/A

IRM