



CMS Releases Notice of Funding Opportunity for MAHA ELEVATE Model

The Centers for Medicare and Medicaid Services (CMS) recently released the [Notice of Funding Opportunity \(NOFO\)](#) for the [Make America Healthy Again: Enhancing Lifestyle and Evaluating Value-Based Approaches Through Evidence](#) cooperative grant model. This voluntary initiative is designed to test lifestyle and functional medicine interventions that address chronic disease that are not currently covered by Medicare Fee-For-Service (FFS). The model is intended to complement traditional medical care by supporting whole-person approaches, including psychological, nutritional, physical, and self-care interventions.

Eligible Participants

Participation is limited to organizations that directly deliver or partner with entities that deliver whole-person functional or lifestyle medicine (FLM) services to beneficiaries. Applicants must demonstrate prior experience implementing evidence-based health and wellness interventions, the ability to measure and evaluate program impact, and the capacity to collect and report data accurately and in a timely manner. In addition, applicants must demonstrate that they have appropriate processes in place to ensure beneficiary protections, privacy, and program integrity.

Organizations must have a Tax Identification Number (TIN), National Provider Identification (NPI), CMS Certification Number (CCN), and/or Employer Identification Number (EIN). Model participants are strongly encouraged—but not required—to enroll in Medicare FFS. Applicants must have prior experience integrating FLM into conventional medical care. Entities that do not provide direct clinical care and want to participate are strongly encouraged to form partnerships with care entities or organizations that deliver direct clinical care.

Funding Structure and Timeline

MAHA ELEVATE will fund up to 30 cooperative agreements over a three-year performance period, with a total budget of \$100 million. Funds will be distributed in two rounds for two separate cohorts in 2026 and 2027.

Organizations interested in participating in Cohort 1 must submit a [Letter of Intent](#) by April 10, 2026 and a [NOFO](#) application by May 15, 2026. The program will launch in October 2026. Cohort 2 will follow a similar process and timeline, launching in October 2027. Organizations may submit multiple proposals and receive multiple awards, provided each proposed intervention is substantially distinct.

All applicants must demonstrate:

- Strong evidence supporting their selected intervention;
- Proof of successful prior implementation of the intervention;
- The ability to recruit a large number of enrollees;
- A clear and methodologically sound randomization plan; and
- Robust data management capabilities.

Fundable Interventions

Applications must focus on one or more chronic conditions and clearly identify the evidence-based interventions proposed to address those condition. Areas of focus include nutrition, physical activity, social connections, stress management, harmful substance avoidance, and sleep. All applications must include at least one nutrition or physical activity component, and CMS will reserve three awards for interventions targeting dementia and cognitive decline.

Payment is tied to meeting operational milestones and enrolling a minimum number of required beneficiaries sufficient to support CMS evaluation of intervention effects. CMS will evaluate whether the intervention improved patient experience, clinical indicators and outcomes; decreased emergency department visits, hospitalizations, and unplanned readmissions; and optimized spending.

Participation in MAHA ELEVATE does not affect beneficiaries' Medicare FFS benefits, coverage, or rights. CMS will actively monitor beneficiary safety and reserves the right to disenroll participants who fail to meet quality or safety standards.

Opportunities for Assisted Living Providers

MAHA ELEVATE presents an opportunity for advanced assisted living (AL) providers and those who partner with organizations delivering whole-person, lifestyle-focused care. AL communities can leverage existing infrastructure—including healthy dining programs, physical activity and mobility sessions, and social engagement initiatives—to scale structured, evidence-based interventions focused on chronic disease prevention and functional wellness.

Participation is most viable for senior living organizations with the operational capacity to meet several key requirements, including:

- Access to clinical care expertise
- Eligibility through a Medicare FFS-enrolled entity
- The ability to recruit and randomize large (≥ 2000) Medicare FFS cohorts
- Data management and research-reporting capabilities
- Demonstrated experience and success integrating FLM components—such as nutrition, physical activity and behavioral health—into traditional medical care delivery.

The Model [NOFO](#), [NOFO Webinar](#), and [FAQs](#) are available.

AHCA/NCAL recently hosted a [webinar](#) on MAHA ELEVATE, and AHCA/NCAL members may view the recording by registering (*member log-in required*).

Learn more about value-based care engagement opportunities for AL providers at the [6th Annual Population Health Management Summit, April 15 – 16, 2026, in Baltimore, MD](#).

Please reach out to AHCA's Population Health Policy Analyst [Rohini Achal](#) or [Nisha Hammel](#), Vice President, Reimbursement Policy & Population Health with any questions.