NOAH | Funding Pathways & Governing Authorities

Companion reference for Dr. Steve and funding consultants | Source: NOAH National Funding Eligibility Matrix, reviewed 13 November 2026

Purpose: Make the funding mechanism and its legal/program authority explicit for each verified pathway. This is a source-based summary of verified pathways—not a statement that CRF or NOAH has been awarded funding or qualifies automatically.

1. Pediatric & developmental

Opportunity / status	Funding pathway	Governing authority, agency & source	Application / access route and key gate
S03 – Title V Maternal and Child Health Block Grant	Federal formula grant → state MCH agency → CRF only through a state-approved local service contract or subaward.	42 U.S.C. §§701–710; HRSA Maternal and Child Health Bureau; state MCH agency; official Title V program/source.	Approach the state Title V director; review the state needs assessment and procurement/subaward process. State match applies to the state recipient; it is not automatically CRF's match obligation.
S07 – Medicaid EPSDT	Medicaid claim or provider agreement through a qualified enrolled provider; state/managed-care plan rate and authorization rules apply.	42 U.S.C. §1396d(a)(4)(B), (r)(5); CMS; state Medicaid agency or Medicaid managed-care organization; official Medicaid source.	Work with a clinical partner and state Medicaid provider-enrollment process. Covered service, medical necessity, eligible child and authorization required; no automatic kit/subscription payment.
F30 – IDEA Part B, Section 611	Federal formula → state education agency → district/school procurement or service contract; not a direct CRF federal grant.	20 U.S.C. §1411; IDEA Part B §611; U.S. Department of Education; official IDEA program/statute.	Approach district special-education director. Scope must fit an eligible student's IEP/related services and applicable procurement rules.
F31 – IDEA Part B, Section 619 Preschool	Federal formula → state and preschool districts → district-dependent contract or approved service.	20 U.S.C. §1419; IDEA Part B §619; U.S. Department of Education; official IDEA program/statute.	Approach district special-education director. Only eligible children ages 3–5 and authorized IDEA services; not automatic kit coverage.
F32 – IDEA Part C Early Intervention	Federal formula → designated state lead agency → approved early-intervention provider network / state contract.	20 U.S.C. §§1433–1444; IDEA Part C; U.S. Department of Education; official program/statute.	Approach state Part C lead agency and approved provider network. Eligible infants/toddlers under 3 and approved-plan requirements apply.
F03 – NEA Grants for Arts Projects	Direct competitive grant to an eligible nonprofit through NEA's Grants for Arts Projects process.	20 U.S.C. §954; National Endowment for the Arts; Grants for Arts Projects guidelines; official program/statute.	Apply through Grants.gov and NEA applicant portal in a future cycle. Matrix notes 2026 deadlines passed; CRF's independent eligibility and five-year arts history must be confirmed.
F21 – NEA Challenge America	Direct nonprofit grant within the NEA Grants for Arts Projects discipline; not a separate/additive funding pool.	20 U.S.C. §954; NEA Grants for Arts Projects / Challenge America guidelines; official program/statute.	Apply through the next eligible NEA GAP cycle. Confirm CRF eligibility, history and current discipline limits; 1:1 cost share noted in matrix.

2. Behavioral health & recovery

Opportunity / status	Funding pathway	Governing authority, agency & source	Application / access route and key gate
S08 – Community Mental Health Services Block Grant (MHBG)	Federal block grant → state mental-health authority → approved state-plan services, subaward or contract; amount is state-specific.	42 U.S.C. §300x et seq.; SAMHSA; state mental-health authority; official MHBG source.	Approach state MHBG director and approved provider network. Eligible populations and state plan govern; ordinary depression alone does not establish SMI/SED eligibility.
S09 – Substance Use Prevention, Treatment and Recovery Services Block Grant (SUBG)	Federal block grant → state Single State Agency → approved prevention, treatment or recovery service agreement/subaward/contract.	42 U.S.C. §300x-21 et seq.; SAMHSA; state substance-use Single State Agency; official SUBG source.	Approach state substance-use agency and provider network. Scope, population, licensing and designated-use restrictions apply; no generic arts allocation.

Opportunity / status	Funding pathway	Governing authority, agency & source	Application / access route and key gate
S12 – HUD CDBG public services	Local CDBG public-service subaward or contract through an entitlement city/county or state non-entitlement program.	42 U.S.C. §5305(a)(8); 24 C.F.R. §570.201(e); HUD; entitlement city/county or state CDBG program; official CDBG source.	Approach local community-development office and review consolidated/action plan and public-service solicitation. Must meet national objective and public-service cap rules; not unrestricted tour subsidy.

3. Veterans & trauma

Opportunity / status	Funding pathway	Governing authority, agency & source	Application / access route and key gate
S16 – Creative Forces Community Engagement	Competitive grant through Mid-America Arts Alliance (M-AAA); Emerging and Advanced award categories, with cost share.	20 U.S.C. §954; NEA-supported Creative Forces program; Mid-America Arts Alliance; current Creative Forces guidance/official notice.	Matrix identifies an open competition: apply to M-AAA by 13 January 2027 for projects 1 July 2027–30 June 2028. CRF must prove applicant eligibility and partner/arts-history requirements.
S17 – VA medical-center procurement / Community Care Network	Two distinct routes: (1) VA procurement contract for nonclinical arts delivery; (2) authorized covered-care claims by an enrolled clinical provider.	38 U.S.C. §1703; VA procurement/referral and provider rules; VA medical-center procurement office or VA Community Care Network administrator; official VA source.	Approach VA contracting office for nonclinical procurement; clinical route requires provider enrollment/network status, referral, authorization and covered care. No blanket NOAH per diem.

4. Healthy aging & dementia

Opportunity / status	Funding pathway	Governing authority, agency & source	Application / access route and key gate
S18 – Older Americans Act Title III B	Federal formula pass-through → State Unit on Aging → Area Agency on Aging → community-provider grant, subaward or service contract.	42 U.S.C. §§3024–3026, 3030d; 45 C.F.R. §1321.71; Administration for Community Living (ACL); State Unit on Aging and Area Agency on Aging; official OAA source.	Approach local Area Agency on Aging for service procurement or subaward. Activity must fit local area plan, allowable services and participant eligibility (ordinarily age 60+).
S19 – Older Americans Act Title III D	Title III D evidence-based prevention grant or service contract through state/area aging agencies to a qualifying provider.	42 U.S.C. §3030m and applicable aging-agency standards; ACL; state or area aging agency; official OAA source.	Approach III D coordinator and complete evidence review before procurement. NOAH is not established as an accepted evidence-based III-D intervention in the matrix.
S20 – Older Americans Act Title III E	Federal formula pass-through → State Unit on Aging → Area Agency on Aging → caregiver-service provider grant or contract.	42 U.S.C. §§3030s–3030s-2; 45 C.F.R. §1321.71; ACL; state/area aging agency; official OAA source.	Approach Area Agency on Aging caregiver program and procurement. Caregiver/care-recipient eligibility, staffing and respite standards apply.
S21 – Medicaid Home- and Community-Based Services (HCBS)	Medicaid §1915(c) waiver or §1915(i) state-plan service → enrolled qualified provider/managed-care contract → authorized claims.	Social Security Act §1915(c)/(i); 42 U.S.C. §1396n(c)/(i); CMS; state Medicaid LTSS office and managed-care plan; official HCBS source.	Identify the actual state waiver/service, provider type, participant eligibility, person-centered plan, authorization, code and rate. HCBS authority alone does not cover NOAH products.
S22 – Medicare / Medicare Advantage	Original Medicare claims through an enrolled qualified professional/facility; Medicare Advantage only under the particular plan's benefit and contract.	42 U.S.C. §§1395k, 1395x, 1395y; 42 C.F.R. §422.102; CMS; Medicare Administrative Contractor or individual Medicare Advantage plan; official Medicare source.	Clinical partner must confirm covered service, code, setting, enrollment and rate; MA requires plan contracting/benefit approval. No payment established for tours, kits or subscriptions.

5. K–12 reading & literacy

Opportunity / status	Funding pathway	Governing authority, agency & source	Application / access route and key gate
F01 – Student Support and Academic Enrichment (Title IV-A)	State → district funding → district procurement / provider contract; not a direct federal award to CRF.	20 U.S.C. §§7111–7122; §§7117–7118; U.S. Department of Education; official Title IV-A program/statute.	Approach district Title IV-A director and procurement office. Matrix notes arts are expressly recognized under §7117(a)(3)(B) as supporting student success; align to school plan and procurement.
F04 – 21st Century Community Learning Centers (Title IV-B)	Federal-to-state award → state competition/subgrant → eligible district/community-based entity; CRF lead or partner only if eligible under notice.	20 U.S.C. §§7171–7176; U.S. Department of Education; state 21st CCLC competition; official program/statute.	Approach the state 21st CCLC competition administrator and target after-school sites in tour cities. State competition and eligible applicant rules control.
F12 – Comprehensive Literacy State Development (CLSD)	Federal direct grant to state education agency → state/local subgrants or contracts; SEA is direct applicant.	20 U.S.C. §§6641–6645, especially §6642(f); U.S. Department of Education; state education agency; official CLSD program/statute.	Approach SEA literacy director and eligible subgrantee/district purchasing office. Evidence-based literacy is central; arts activity alone is not proof of literacy effectiveness.

Important source and eligibility boundaries

• “Verified pathway” means the law, agency guidance or program rules support the described mechanism. It does not establish that CRF qualifies, that a solicitation is open, that funds remain available or that NOAH has an award.

• Potential opportunities requiring further research are intentionally not presented as verified funding. The full matrix retains 74 screening entries (50 federal entries and 24 state entries), plus payer pathways, state examples, foundation prospects and earned-income channels.

• Federal funds passed through states must be counted once. Grants, contracts, Medicaid/Medicare claims, private philanthropy and earned income are separate money types and must not be double-counted.

• Medicare and Medicaid pay only eligible enrolled providers for authorized covered services. They do not automatically pay for performances, puppet kits, academy access or subscriptions.

• Official sources are identified by authority, agency and program as named in the supplied matrix. Confirm the current notice, fiscal year, applicant class, award period, state allocation, allowable costs, match, procurement route and source link before applying.