



Superior HealthPlan Community Grant Program

The **Superior HealthPlan Community Grant Program** provides financial support to organizations that address Non-Medical Drivers of Health (NMDOH), also known as Social Determinants of Health. Here are the key details:

Applications must be completed in full by **March 31, 2026**, and submitted online to be considered. All applications are reviewed by the Superior HealthPlan Grant Committee and **will be awarded on a yearly basis to community-based organizations** across Texas. Applicants will be notified of the committee's decision by the tenth business day of April. Each applicant selected to receive a grant from Superior HealthPlan will receive \$10,000.

Applicants *must* align proposals with **at least one** of these focus areas:

Housing Stability & Support: Programs should aim to reduce housing insecurity and improve living conditions for Medicaid members. Eligible programs include, but are not limited to, the following:

Utility Assistance Program: Provide short-term financial support for electricity, gas, or water bills.

Rental Assistance or Security Deposit Fund: Help individuals secure stable housing by covering move-in costs.

Emergency Shelter Support: Offer temporary shelter or hotel vouchers for individuals experiencing homelessness.

Home Repair & Maintenance Program: Fund minor repairs or accessibility modifications for low-income households.

Application Fee Assistance: Cover costs associated with applying for housing.

Pest Control Services: Provide extermination services to ensure safe and healthy living environments.

Food Security & Nutrition: Programs should address food access, nutrition, and emergency food needs for vulnerable populations. Eligible programs include, but are not limited to, the following:

Community Food Pantry: Establish or expand a pantry offering culturally appropriate, nutritious food.

Home Food Delivery: Deliver groceries or prepared meals to homebound individuals or families without transportation.

Emergency Food Assistance: Provide food boxes or meal vouchers during crises or natural disasters.

Congregate or Mobile Meal Programs: Serve hot meals at community centers or via mobile units in food deserts.

Health Care Access & Literacy: Programs should reduce barriers to care and improve health outcomes through education, navigation, and support. Eligible programs include, but are not limited to, the following:

Dental Care Access Days: Partner with local dentists to provide free or low-cost cleanings and exams for adults, ages 21 and older, who have Medicaid coverage.

In-Home Assistive Services: Offer non-clinical assistive devices such as Alexa for seniors, medical alert systems, fall detection sensors, and smart home monitoring systems.

Health Literacy Workshops: Educate community members about navigating the health system, understanding prescriptions, and preventive care.

Transportation Voucher Program: Medical – Provide rides to and from hospitals, ER discharges, or other urgent health care appointments. Social Service Support – Provide transportation to agencies like food pantries and hygiene and clothing closets.

All grantees must meet the following criteria:

Must serve the Medicaid population.

Must agree to an end-of-term follow-up visit by December 15 to showcase how awarded funds were used while also demonstrating outcomes.

Grant funds may not cover salary or fringe benefits for staff.

Must not have received a Superior HealthPlan grant or sponsorship within the last 12 months.

Must be located in Texas and provide services to Texas residents.

Applicant must submit all required supporting documentation (signed agreement, W-9, vendor forms, etc.) by April 30, 2025, to avoid losing grant funding.

Community-based organization must "claim" their organization on the [FindHelp webpage](#) , if applicable.

To learn more about grant criteria, please review the [Superior HealthPlan Grant Scoring Guide \(PDF\)](#).

Please note that submitting an online application does not guarantee funding. For additional questions, please email outreach@superiorhealthplan.com.

Previous Grant Recipients



Application for Grant

Today's Date *

MM/DD/YYYY

First Name *

Last Name *

Professional Title *

Feedback

Email *

Confirmation Email *

Organization Name *

Street Address *

Street Address 2

City *

State *

Zip Code *

County *

Phone Number *

Does the organization have 501c3 status? *

Yes

No

Tax ID Number *

Briefly describe the organization's history, mission and goals. *

Feedback

Please select the focus area that most closely aligns with your proposed request for funding. *

- Housing Stability & Support
- Food Security & Nutrition
- Health Care Access & Literacy

Please provide the name of the program for which the funds would be used if awarded. *

Example: County X Utility Assistance Program

Briefly describe the purpose of the funding request and how it will be used to serve vulnerable Texas communities. *

What is the anticipated number of individuals, geographic area and population who will benefit from these funds (e.g. 30 children, ages 8-12, who are working to achieve grade-level performance in South Texas)? *

Please describe how the project or program has potential for sustainable, long-term impact. *

Briefly describe any promotional benefits or brand awareness Superior HealthPlan would receive about this grant. *

Submit