



NOTICE OF FUND AVAILABILITY (NOFA) – GRANTS

NAME OF GRANT PROGRAM: DHSTS Opioid Expansion 2026	NOFA REFERENCE NO.: DHST26OPE
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PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS SHALL BE USED:

To fund Direct Services for Core Harm Reduction, Harm Reduction Health, Overdose Prevention & Response Innovation, as well as Capital Improvement Planning activities to clients with behaviors that make them vulnerable to HIV/STD transmission as a result of injection drug use and support harm reduction and overdose prevention services at syringe access locations, harm reduction centers and county health departments.

ESTIMATED AMOUNT OF MONEY IN THE GRANT PROGRAM: \$ 6,400,000.00	AWARD PERIOD: From 1/1/26 Through 6/30/26
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ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

1. Terms and Conditions for the Administration of Grants. ([Click here to download](#))
2. General and specific grant compliance requirements issued by the awarding division or commission.

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:

<input type="checkbox"/> Municipal Government	<input type="checkbox"/> Institution of Higher Education
<input type="checkbox"/> County Government	<input type="checkbox"/> Hospital
<input type="checkbox"/> State Government	<input type="checkbox"/> Non-profit Organization (501(c)3)
<input type="checkbox"/> Indian Tribal Gov't (Federally Recognized)	<input type="checkbox"/> Other:

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:

Entities eligible to apply for grant funds under this RFA must be authorized to operate a Harm Reduction Center in New Jersey by the New Jersey Department of Health. To find out more about how to register as a Harm Reduction site, please visit <https://www.nj.gov/health/forms/hrc-1.pdf>

APPLICATION PROCEDURES:

Eligible applicants will submit grant applications through the Department's System for Administering Grants Electronically (SAGE), in accordance with the Request for Applications (RFA). The RFA may be requested from the contact listed below.

Eligible applicants must attend at least one Technical Assistance webinar listed in RFA. Provide all necessary information which will allow the grant to open in SAGE for requesting agency.

FOR INFORMATION CONTACT:

NAME: Chelsea Betlow

TELEPHONE: (609) 913-5905

PROGRAM: Director, HIV Services

E-MAIL: chelsea.betlow@doh.nj.gov

MAILING ADDRESS: New Jersey Department of Health

PO BOX 363

Trenton, NJ 08625

DATE ON WHICH APPLICATION WILL BE AVAILABLE: 11/17/25

SAGE PROGRAM NAME: DHSTS Opioid Expansion 2026

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED: 12/08/25

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS: 01/01/26