



2024 Community Clinic Grant Program

GRANT REQUEST FOR PROPOSAL (RFP)

Minnesota Department of Health
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02/15/2024

To obtain this information in a different format, call: 651-201-3780.

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RFP Part 1: Overview

1.1 General Information

- **Announcement Title:** Community Clinic Grant Program – Fiscal Year 2024
- **Minnesota Department of Health (MDH) Program Website:**
<https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/index.html#ccg>
- **Application Deadline:** 4:30 PM, Monday, March 25, 2024

1.2 Program Description

[Minnesota Statute 145.9268](#) authorizes the Commissioner of Health to award grants to support the capacity of eligible organizations to plan, establish or operate clinical services for populations with low income and/or living in rural areas of the state.

Fiscal Year 2024 program funding will support clinic efforts to improve:

- Mental health services for adolescents and young adults ages 12-25 (minimally ages 12-17), or
- Oral health programs for all ages, with preference for projects supporting collaborative practice dental hygienists to provide services in community locations, or
- Clinical services for at-risk youth ages 12 - 25.

1.3 Funding and Project Dates

Funding

Funding will be allocated through a competitive process. If selected, you may only incur eligible expenditures when the grant agreement is fully executed, and the grant has reached its effective date.

Funding	Estimate
Estimated Amount to Grant	\$530,000
Estimated Number of Awards	10-13
Estimated Award Maximum	\$45,000
Estimated Award Minimum	N/A

Match Requirement

The Community Clinic Grant Program does not require matching funds.

Project Dates

Funding will be provided for one year, June 1, 2024 – May 31, 2025. It is expected that applicants will be able to complete the proposed project during the grant period.

1.4 Eligible Applicants

Eligible entities include:

- Nonprofit clinics established to provide preventative, medical, dental, or mental health services to low-income or rural population groups.
- A government entity operating a clinic which provides preventative, medical, dental, or mental health services.
- An Indian Health Services unit or Indian tribal government operating a clinic which provides preventative, medical, dental, or mental health services; or,
- A consortium of these entities.

All applicant organizations must also have a policy to ensure no person will be denied services due to inability to pay (e.g., sliding-fee scale).

For purposes of the Community Clinic Grant Program, the term clinic means an outpatient or ambulatory setting for the diagnosis or treatment of illness or injury or the maintenance of health. Clinics may be stationary or mobile and must not be solely for the purpose of urgent nor emergent care. Eligible health services include preventative, medical, dental and mental health. Clinics may provide one or more of these services and are not required to provide all.

Additional criteria only for applicants choosing to apply under Option A: Mental health services for adolescents and young adults:

All mental health service project applicants must:

- Serve young people, minimally ages 12-17 but preferably ages 12-25.
- Provide directly or partner with a local clinic that provides Child and Teen Checkups (C&TC) or preventative health visits for adolescents and young adults.
- Accept Medicaid-eligible patients.

Collaboration

For mental health projects, collaboration with local young people, families and community partners is required. Collaborative entities may include primary care clinics, local public health [C&TC coordinators](#), community mental health agencies, culturally specific or faith-based organizations, schools and youth-serving agencies.

For all other grant projects, collaboration is encouraged.

1.5 Questions and Answers

All questions regarding this RFP must be submitted by email or phone to Health.CommunityClinicGrant@state.mn.us or 651-201-3780. All answers will be posted within five business days at the [Community Clinic Grant](#) program website.

Please submit questions no later than 4:30 p.m. Central Standard Time (CST), on March 15, 2024.

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To ensure the proper and fair evaluation of all applications, other communications regarding this RFP including verbal, telephone, written or internet initiated by or on behalf of any applicant to any employee of the Department, other than questions submitted to as outlined above, are prohibited. **Any violation of this prohibition may result in the disqualification of the applicant.**

RFP Information Meeting

An informational webinar will be held on Monday, March 4, 2024, at 11:00 am. [Click here to join the meeting.](#)

Materials from the meeting, including questions and answers, will be posted by 4:30 p.m. on March 13, 2024 at the [Community Clinic Grant](#) program website.

RFP Part 2: Program Details

2.1 Priorities

Health Equity Priorities

It is the policy of the State of Minnesota to ensure fairness, precision, equity and consistency in competitive grant awards. This includes implementing diversity and inclusion in grant-making. [The Policy on Rating Criteria for Competitive Grant Review](#) establishes the expectation that grant programs intentionally identify how the grant serves diverse populations, especially populations experiencing inequities and/or disparities.

The goal of the Community Clinic Grant program is to increase access to clinical services for underserved populations.

Underserved populations include but are not limited to:

- Populations experiencing health care access issues due to low incomes.
- Populations experiencing health care access issues due to living in rural areas.
- Populations experiencing known health inequities due to characteristics such as age, race/ethnicity, gender, income, geography, education, sexual orientation, disability, military service and veteran status.

Some data resources are available through the [Minnesota Center for Health Statistics](#).

Grant outcomes will vary depending on the project proposed. All projects must address how they will measure the impact on health disparities, such as improving or increasing services for underserved populations. Grant outcomes may include:

Option A: Mental health services for adolescents and young adults ages 12-25 (minimally ages 12-17)

- The total number of patients receiving mental health services
- The number of patients receiving services that are from underserved populations
- The number of patients screened for mental health issues, and the number of follow-ups conducted.
- Number of Child and Teen Checkups (C&TC) or preventative health visits for adolescents and young adults.

Option B: Oral health programs for all ages, with preference for projects supporting collaborative practice dental hygienists to provide services in community locations

- The number of collaborative practice authorizations for dental hygienists by the applicant.
- The total number of oral health patients served.
- The number of patients receiving services that are from underserved populations.
- The number of oral health services provided by applicant.

- The number of patients served because of oral health equipment replacements.

Option C: Clinical services for at-risk youth ages 12 – 25

- The total number of patients receiving preventive primary care services.
- The number of patients receiving services that are from underserved populations.

Other Competitive Priorities

As part of the application process, applicants are asked to submit a program description and a workplan explaining how program activities will be supported. Reviewers will evaluate:

- Whether the project will increase access to primary care, mental health, or oral health services for rural, low income, underserved, and/or at-risk populations.
- Whether the project will improve health equity, reduce health disparities, and incorporate cultural competency in services provided.
- Whether the project demonstrates collaboration with other eligible community clinics, hospitals, health care providers, or community organizations.
- For Option B, oral health programs for all ages, whether the projects utilizes collaborative practice dental hygienists.

2.2 Eligible Projects

Eligible projects for the Fiscal Year 2024 Community Clinic Grant program are limited to:

- A. Mental health programs serving low income and underserved adolescents and young adults ages 12-25 (minimally ages 12-17), or
- B. Oral health programs for all ages, with preference for projects supporting collaborative practice dental hygienists to provide services in community locations, or
- C. Clinical services for at-risk youth ages 12 - 25.

Eligible health services include preventative, medical, dental and mental health. Clinics may provide one or more of these services and are not required to provide all.

Mental Health Projects

Applicants must have a policy that ensures no person will be denied services because of inability to pay such as a sliding fee scale policy. Applicants must also accept Medicaid-eligible patients. Services may include a broad range of projects including screening, clinical mental health services, and tele-mental health services. Proposals may include a broad range of projects including, but not limited to, expanding current capacity, adding new services, creating a new clinic or service area, or supporting services to those with low incomes or living in rural areas of the state.

Example grant outcomes can be found in [section 2.1](#) above.

Oral Health Projects

Applicants must have a policy that ensures no person will be denied services because of inability to pay such as a sliding fee scale policy. Proposals to improve oral health may include a broad range of projects including direct services, expanding services, replacing equipment, etc. However, preference will be given to proposals to establish or expand the use of collaborative dental hygiene agreements between dental hygienists and dentists to support expanded oral health services in community-based locations.

The following resources may be used to learn more about collaborative dental hygiene agreements.

- [Minnesota Statutes 150A.10, subd. 1a](#) authorizes Collaborative Dental Hygiene Practice in Community Settings.
- [Minnesota Administrative Rules 3100.8700](#) describe dental hygiene scope of practice that may be provided by a collaborative practice dental hygienist.
- Collaborative agreements must be registered through the [Minnesota Board of Dentistry](#), which also provides an agreement template.

Example grant outcomes can be found in [section 2.1](#) above.

Clinical Services for At-Risk Youth Projects

At-risk youth is defined as adolescents who are more likely to engage in behaviors that can lead to negative health outcomes, such as substance abuse, violence, and unprotected sex.

Applicants must have a policy that ensures no person will be denied services because of inability to pay such as a sliding fee scale policy. Proposals for clinical services for at-risk youth may include preventative, medical, sexual health, dental and/or mental health services.

Projects may focus on one or more of these services and are not required to include all.

Proposals may include a broad range of projects including, but not limited to, expanding current capacity, adding new services, creating a new clinic or service area, or supporting services to those with low incomes or living in rural areas of the state.

Example grant outcomes can be found in [section 2.1](#) above.

Eligible Expenses

Eligible expenditures may include but are not limited to:

- Staff time for providing services, coordination, data collection, and reporting.
- Equipment, instruments and supplies necessary for comprehensive services
- Equipment or planning related to dental, primary or mental health services, which can be in-person or tele-health.
- Data collection, billing system or electronic health records system establishment or updates.
- Electronic health record updates to support dental and mental health, referral and/or follow-up services.

- Improvements for care delivery, such as increased translation and interpretation services.
- Culturally tailored outreach materials to targeted populations.
- Incentives, food, travel, or time reimbursement for youth participation in program treatment plan.
- Indirect costs

Ineligible Expenses

Ineligible expenses include but are not limited to:

- Fundraising
- Taxes, except sales tax on goods and services
- Lobbyists, political contributions
- Bad debts, late payment fees, finance charges, or contingency funds

2.3 Grant Management Responsibilities

Grant Agreement

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. Grantee should read the grant agreement, sign, and once signed, comply with all conditions of the grant agreement.

No work on grant activities can begin until a fully executed grant agreement is in place and the State's Authorized Representative has notified the Grantee that work may start.

The funded applicant will be legally responsible for assuring implementation of the work plan and compliance with all applicable state requirements including worker's compensation insurance, nondiscrimination, data privacy, budget compliance, and reporting.

Accountability and Reporting Requirements

It is the policy of the State of Minnesota to monitor progress on state grants by requiring grantees to submit written progress reports until all grant funds have been expended and all of the terms in the grant agreement have been met.

The reporting schedule will be quarterly. Reports will be submitted through the Office of Rural Health and Primary Care's online grant portal. A report form will be provided to grantees.

Reports will be due:

- January 20
- April 20
- July 20
- October 20

Grant Monitoring

[Minn. Stat. §16B.97](#) and [Policy on Grant Monitoring](#) require the following:

- One monitoring visit during the grant period on all state grants over \$50,000
- Annual monitoring visits during the grant period on all grants over \$250,000
- Conducting a financial reconciliation of grantee's expenditures at least once during the grant period on grants over \$50,000.

The monitoring schedule will be keeping with [Minn. Stat. §16B.97](#) and Policy on Grant Monitoring guidelines with the option for additional monitoring visits as needed.

Technical Assistance

Consultation and guidance in completing the application process is available upon request. For assistance, contact Bekah Ehlebracht, Office of Rural Health and Primary Care, at 651-201-3780, toll free from Greater Minnesota at 1-800-366-5424 or at health.CommunityClinicGrant@state.mn.us.

Grant Payments

Per [State Policy on Grant Payments](#), reimbursement is the method for making grant payments. All grantee requests for reimbursement must correspond to the approved grant budget. The State shall review each request for reimbursement against the approved grant budget, grant expenditures to-date and the latest grant progress report before approving payment. Grant payments shall not be made on grants with past due progress reports unless MDH has given the grantee a written extension.

The invoicing and payment schedule will be quarterly.

Invoices for reimbursement of grant expenditures must include supporting documentation for proof of expenditures. Reimbursements will not be processed until the narrative progress report is received.

2.4 Grant Provisions

Contracting and Bidding Requirements

(a) Municipalities A grantee that is a municipality, defined as a county, town, city, school district or other municipal corporation or political subdivision of the state authorized by law to enter into contracts is subject to the contracting requirements set forth under [Minn. Stat. § 471.345](#). Projects that involve construction work are subject to the applicable prevailing wage laws, including those under [Minn. Stat. § 177.41](#), et. seq.

(b) Non-municipalities Grantees that are not municipalities must adhere to the following standards in the event that duties assigned to the Grantee are to be subcontracted out to a third party:

- i. Any services or materials that are expected to cost \$100,000 or more must

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undergo a formal notice and bidding process consistent with the standards set forth under Minnesota Statutes 16B.

- ii. Services or materials that are expected to cost between \$25,000 and \$99,999 must be competitively awarded based on a minimum of three (3) verbal quotes or bids.
- iii. Services or materials that are expected to cost between \$10,000 and \$24,999 must be competitively awarded based on a minimum of two (2) verbal quotes or bids or awarded to a targeted vendor.
- iv. The grantee must take all necessary affirmative steps to assure that targeted vendors from businesses with active certifications through these entities are used when possible:
 - Minnesota Department of Administration's Certified Targeted Group, Economically Disadvantaged and Veteran-Owned Vendor List ([Equity in Procurement \(TG/ED/VO\) Directory / Minnesota Office of State Procurement \(mn.gov\)](#));
 - Metropolitan Council's Targeted Vendor list: Minnesota Unified Certification Program (<https://mnuccp.metc.state.mn.us/>) or
 - Small Business Certification Program through Hennepin County, Ramsey County, and City of St. Paul: Central Certification Program (<https://www.stpaul.gov/departments/human-rights-equal-economic-opportunity/contract-compliance-business-development-9>).
- v. The grantee must maintain written standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award and administration of contracts.
- vi. The grantee must maintain support documentation of the purchasing or bidding process utilized to contract services in their financial records, including support documentation justifying a single/sole source bid, if applicable.
- vii. Notwithstanding (i) - (iv) above, State may waive bidding process requirements when:
 - Vendors included in response to competitive grant request for proposal process were approved and incorporated as an approved work plan for the grant or
 - There is only one legitimate or practical source for such materials or services and that grantee has established a fair and reasonable price.
- viii. Projects that include construction work of \$25,000 or more, are subject to applicable prevailing wage laws, including those under Minnesota Statutes 177.41 through 177.44.

- ix. Grantee must not contract with vendors who are suspended or debarred in MN: The list of debarred vendors is available at:
<https://mn.gov/admin/osp/government/suspended-debarred/>.

Conflicts of Interest

MDH will take steps to prevent individual and organizational conflicts of interest, both in reference to applicants and reviewers per [Minn. Stat. § 16B.98](#) and the Office of Grants Management’s Policy 08-01, “Conflict of Interest Policy for State Grant-Making.”

Applicants must complete the [Applicant Conflict of Disclosure form \(Attachment C\)](#) section of the online application and submit it as part of the completed application. Failure to complete and submit this form will result in disqualification from the review process.

Organizational conflicts of interest occur when:

- a grantee or applicant is unable or potentially unable to render impartial assistance or advice
- a grantee’s or applicant’s objectivity in performing the grant work is or might be otherwise impaired
- a grantee or applicant has an unfair competitive advantage

Individual conflicts of interest occur when:

- an applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH’s time, services, facilities, equipment, supplies, prestige, or influence
- An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this RFP/project.
- An applicant, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant organization.
- An applicant, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

In cases where a conflict of interest is perceived, disclosed, or discovered, the applicants or grantees will be notified and actions may be pursued, including but not limited to disqualification from eligibility for the grant award or termination of the grant agreement.

Public Data and Trade Secret Materials

All applications submitted in response to this RFP will become property of the State. In accordance with [Minn. Stat. § 13.599](#), all applications and their contents are private or nonpublic until the applications are opened.

Once the applications are opened, the name and address of each applicant and the amount requested is public. All other data in an application is private or nonpublic data until completion of the evaluation process, which is defined by statute as when MDH has completed negotiating the grant agreement with the selected applicant.

After MDH has completed the evaluation process, all remaining data in the applications is public with the exception of trade secret data as defined and classified in [Minn. Stat. § 13.37](#), subd. 1(b). A statement by an applicant that the application is copyrighted or otherwise protected does not prevent public access to the application or its contents. ([Minn. Stat. § 13.599](#), subd. 3(a)).

If an applicant submits any information in an application that it believes to be trade secret information, as defined by [Minn. Stat. § 13.37](#), the applicant must:

- Clearly mark all trade secret materials in its application at the time it is submitted,
- Include a statement attached to its application justifying the trade secret designation for each item, and
- Defend any action seeking release of the materials it believes to be trade secret, and indemnify and hold harmless MDH and the State of Minnesota, its agents and employees, from any judgments or damages awarded against the State in favor of the party requesting the materials, and any and all costs connected with that defense.
- This indemnification survives MDH's award of a grant agreement. In submitting an application in response to this RFP, the applicant agrees that this indemnification survives as long as the trade secret materials are in possession of MDH. The State will not consider the prices submitted by the responder to be proprietary or trade secret materials.

MDH reserves the right to reject a claim that any particular information in an application is trade secret information if it determines the applicant has not met the burden of establishing that the information constitutes a trade secret. MDH will not consider the budgets submitted by applicants to be proprietary or trade secret materials. Use of generic trade secret language encompassing substantial portions of the application or simple assertions of trade secret without substantial explanation of the basis for that designation will be insufficient to warrant a trade secret designation.

If a grant is awarded to an applicant, MDH may use or disclose the trade secret data to the extent provided by law. Any decision by the State to disclose information determined to be trade secret information will be made consistent with the Minnesota Government Data Practices Act ([Ch. 13 MN Statutes](#)) and other relevant laws and regulations.

If certain information is found to constitute trade secret information, the remainder of the application will become public; in the event a data request is received for application information, only the trade secret data will be removed and remain nonpublic.

Audits

Per [Minn. Stat. § 16B.98](#), subd. 8, the grantee's books, records, documents, and accounting procedures and practices of the grantee or other party that are relevant to the grant or transaction are subject to examination by the granting agency and either the legislative auditor or the state auditor, as appropriate. This requirement will last for a minimum of six years from the grant agreement end date, receipt, and approval of all final reports, or the required period of time to satisfy all state and program retention requirements, whichever is later.

Affirmative Action and Non-Discrimination Requirements for all Grantees

The grantee agrees not to discriminate against any employee or applicant for employment because of race, color, creed, religion, national origin, sex, marital status, status in regard to public assistance, membership or activity in a local commission, disability, sexual orientation, or age in regard to any position for which the employee or applicant for employment is qualified. [Minn. Stat. § 363A.02](#). The grantee agrees to take affirmative steps to employ, advance in employment, upgrade, train, and recruit minority persons, women, and persons with disabilities.

The grantee must not discriminate against any employee or applicant for employment because of physical or mental disability in regard to any position for which the employee or applicant for employment is qualified. The grantee agrees to take affirmative action to employ, advance in employment, and otherwise treat qualified disabled persons without discrimination based upon their physical or mental disability in all employment practices such as the following: employment, upgrading, demotion or transfer, recruitment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Minn. Rules, part [5000.3550](#).

The grantee agrees to comply with the rules and relevant orders of the Minnesota Department of Human Rights issued pursuant to the Minnesota Human Rights Act.

2.5 Review and Selection Process

Review Process

Funding will be allocated through a competitive process with review by a committee comprised of volunteer health care stakeholders representing various geographies, health-related entities, and populations from across the state. The review committee will evaluate all eligible and complete applications received by the deadline.

MDH will review all committee recommendations and is responsible for award decisions. **The award decisions of MDH are final and not subject to appeal.** Additionally:

- MDH reserves the right to withhold the distribution of funds in cases where proposals submitted do not meet the necessary criteria.
- The RFP does not obligate MDH to award a grant agreement or complete the project, and MDH reserves the right to cancel this RFP if it is considered to be in its best interest.
- MDH reserves the right to waive minor irregularities or request additional information to further clarify or validate information submitted in the application, provided the application, as submitted, substantially complies with the requirements of this RFP. There is, however, no guarantee MDH will look for information or clarification outside of the submitted written application. Therefore, it is important that all applicants ensure that all sections of their application are complete to avoid the possibility of failing an evaluation phase or having their score reduced for lack of information.

Selection Criteria and Weight

The review committee will be reviewing each applicant on a 100-point scale for the mental health and clinical services options. The oral health option will be scored on a 105 point scale. A standardized scoring system will be used to determine the extent to which the applicant meets the selection criteria.

The scoring factors and weight that applications will be judged are based on criteria detailed in [Attachment A: Application Evaluation Criteria](#).

Grantee Past Performance and Due Diligence Review Process

- It is the policy of the State of Minnesota to consider a grant applicant's past performance before awarding subsequent grants to them.
- State policy requires states to conduct a financial review prior to a grant award made of \$50,000 and higher to a nonprofit organization, in order to comply with [Policy on the Financial Review of Nongovernmental Organizations](#).

Notification

MDH anticipates notifying all applicants via email of funding decisions by May 8, 2024.

RFP Part 3: Application and Submission Instructions

3.1 Application Deadline

All applications **must** be received by MDH no later than 4:30 p.m. Central Time, on March 25, 2024.

Late applications will not be accepted. It is the applicant's sole responsibility to allow sufficient time to address all potential delays caused by any reason whatsoever. MDH will not be responsible for delays caused by mail, delivery, computer or technology problems.

3.2 Application Submission Instructions

Applications must be submitted electronically through the ORHPC online [Grants Portal](#).

- Existing users: If your organization has a grant with the ORHPC, and you already have a user account, please enter your credentials and log-in. If you forgot your passwords, please use the "Forgot your Password?" link to reset your password.
- New users: If your organization does not already have a profile in the system, you will need to create an account. Please click on "Create New Account" to complete the registration process and create your logon credentials.
- Not sure? If you think that you or someone at your organization has already registered your organization in the system, do not create a new account. Please contact the program administrator at health.CommunityClinicGrant@state.mn.us to receive a username and password.

Once in the system, click on the link "apply" located on the upper tool bar on the home page. You will be redirected to a list of open applications in the system; select the appropriate program. Read "[RFP: Application Instructions](#)" within the request for proposal for further instructions on how to address application questions outlined in the online portal.

If you have any questions, please submit them to: health.CommunityClinicGrant@state.mn.us.

3.3 Application Instructions

You must submit the following in order for the application to be considered complete:

- Online form:
 - Organization and Application Information
 - Project Information
 - [Project Abstract](#)
 - [Project Narrative and Workplan](#)
 - [Budget Narrative](#)

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- [Grant Budget Line-Item Request](#)
- [Conflict of Interest](#)

- Required Attachments
 - [Governing Board Resolution form](#)
 - [Due Diligence form](#)
 - Audited Financial Statement
 - Statement of Expenses and Revenues (for Government Programs, Tribal Programs, and Clinics and/or grant projects of a larger organization)
 - Patient Payment Policy

- Optional Attachments
 - Letters of Support
 - Organization's Geographic Service Area

Incomplete applications will be rejected and not evaluated.

Applications must include all required application materials, including attachments. Do not provide any materials that are not requested in this RFP, as such materials will not be considered nor evaluated. **MDH reserves the right to reject any application that does not meet these requirements.**

By submitting an application, each applicant warrants that the information provided is true, correct, and reliable for purposes of evaluation for potential grant award. The submission of inaccurate or misleading information may be grounds for disqualification from the award, as well as subject the applicant to suspension or debarment proceedings and other remedies available by law.

All costs incurred in responding to this RFP will be borne by the applicant.

Section 1. Organization and Applicant Information

Basic information about the applicant entity is requested, including legal and business name, address, and tax identification number. This information will be used for contracting purposes.

Section 2. Project Information

Includes contact information for the Authorized Organization Representative (AOR), Fiscal Management Officer, and Contact Person for the Project Administration.

Section 3. Project Abstract

This section requests summary information about the project including the requested amount, the name of the program, contact information, specific, measurable outcomes that the project will accomplish and how the proposed project will be accomplished, i.e., the "who, what, when, where, why, and how" of a project.

Project Type

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Check all that apply.

Mental Health Project

Oral Health Project

Clinical Services for At-Risk Youth Project

Applicant Information

The applicant information section not only documents eligibility but also the capability of the organization to successfully provide services to the population.

Eligibility and Organizational Background (10,000 character limit)

- Briefly describe the organization’s mission and goals. If the proposed project includes a collaborating community partner, include a brief description of the partner’s organization. For example, a dental clinic providing outreach/mobile services at elementary schools should include a list of the targeted schools.
- Describe the services provided by the organization.
- Describe the organization’s patient population.
- Describe the organization’s geographic service area (you may attach a map).
- Explain the organization’s policy to ensure no person will be denied services due to inability to pay, such as a sliding-fee scale or a charity care policy. If no sliding-fee or charity care policy is in place due to the nature of the organization and/or billing policies (e.g., tribal clinics, free clinics that accept Medicaid patients), please describe this and how it ensures that no person is denied services. (**Attach a copy of the policy – this is required.**)
- Discuss your organization’s capacity to carry out this grant.

Percentage Minnesota Health Care Programs

What percentage of patients at your clinic are on Minnesota Health Care Programs? (4 character limit)

Percentage Medicare

What percentage of patients at your clinic are on Medicare? (4 character limit)

Percentage Sliding-Fee Users

What percentage of patients at your clinic utilize sliding-fee payment options? (4 character limit)

Section 4. Narrative

The online application provides open fields for grant applicants to respond to narrative questions about the project. The purpose of the Project Narrative is to provide details and context for the proposed project. Please provide concise and thorough responses to the questions outlined below. Failing to provide all the requested information may result in a lower score during the application review.

Project Description and Collaboration

Problem Statement

Provide a clear and concise (one to two sentences) statement of a problem experienced by the target population that your grant project intends to address. The problem should be one that is experienced by the patient/community population (e.g., elementary-aged children lack access to dental care) and should not be a problem experienced by the clinic (e.g., lack of revenue, decreased reimbursement, old equipment, etc.). (1,000 character limit)

Project Need

Provide local demographic data and health information that correlates to the problem statement and describe how it supports the need for the grant project. State and national data may be provided in addition to local data to support the severity of the problem described in the problem statement but should not be solely relied upon to support need. (5,000 character limit)

Project Description

The proposed project should address the problem described in the problem statement. You will be asked to answer the following questions:

Please describe the target population to be served by the project including how many patients (in numbers) are expected to benefit from the project. (1000 characters)

Please describe what will be done and an overview of how it will be done (as reflected in more detail in the Work Plan) to provide a broader picture of how activities are accomplished. Please include the following: (7,000 character limit)

- A description of how the project will increase access to primary care, mental health, or oral health services for rural, low income, underserved, and/or at-risk populations.
- A description of the project outcomes.
 - Outcomes must be tangible, measurable and achievable outcomes specific to what the proposed grant project is intending to accomplish. *Grantees will be required to report measurable results from the outcomes at the end of the grant period.*
 - Outcomes should be patient-centered with the focus on the targeted population and not on organization activities.
 - Outcomes must include a current base percentage or number so that intended change is clear and measurable. *It is expected that the grant project and outcomes will be achieved within the grant period.*
 - Grant outcomes should pertain to what will happen within the target population, not what the clinic will “do” (which are activities within the work plan).
 - Outcomes contain four common elements:
 1. An indicator (how the problem will change)

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2. A target (a “who” or a “what,” generally the client)
3. A time frame (when), and
4. The amount of measurable change expected in the indicator, or the target.

Outcomes **must** include the following information:

By (when, date), (% or # of change from a stated base) of (what population), will (indicator – do what, change how).

For example:

By May 31, 2025, 95% (from 86% in 2018) of the grantee’s at-risk adolescents will have up-to-date vaccinations.

If a proposed outcome includes that the grantee will do something, it would be considered an activity and not an outcome.

Describe how the project demonstrates collaboration with other eligible community clinics, hospitals, health care providers, or community organizations (if collaborating with other organizations). (1000 character limit)

- Option A: Mental health services for adolescents and young adults ages 12-25 (minimally ages 12-17), requires collaboration with community partners. Refer to RFP Sections [1.4](#) and [2.2](#) for more details on collaboration and project requirements, including a letter of commitment from clinic leadership to participate in required activities.
- Letters of support from collaborators are strongly encouraged for all applicants.

Describe how this project will improve health equity and reduce health disparities. (1000 character limit)

Project Evaluation

How do you plan on evaluating your project to assess if your project is meeting the goals and outcomes of your workplan? (5,000 character limit)

Project Work Plan

You will list the goal, detail the activities to reach the goal, including the start date, end date, and staff position responsible. *This project work plan will be included in the grant agreement if you are awarded funds.* You will be asked to describe the:

- Project Goal
 - Please describe the outcome you are trying to impact.
- Activity Description
 - Briefly describe each of the activities to reach this goal.
- Responsible Party
 - List the staff roles responsible for carrying out this activity, do not use names.
- Start Date
- End Date

Grantees will be required to report progress of activities and accomplishments on a quarterly basis during the grant period.

Section 5. Budget

The Budget in the online application includes two sections, Narrative and Line-Item requests.

The expenses included in the Grant Funds Requested column are those that will be supported by grant funds. The budget should be specific to the grant project described in the applicant's project narrative and is not intended to represent the organization's total budget.

Budget Narrative

Provide a detailed justification of the estimated project expenses to successfully meet the goals of the proposed project. The budget explanation should be broken down by each budget category. The narrative should provide information on the need for specific expenditures and how they will address the problem statement.

Budget Categories

- **Salaries:** Salaries should include the costs of personnel who work directly for the applicant and are paid a salary or wage directly from the applicant organization. This should not include administrative staff included in the indirect rate. Salaries can be calculated and described in the Budget Narrative as an hourly wage with total hours estimated to be spent on the project, or an annual salary with the estimated percentage of the total FTE.
- **Fringe:** This category includes share of pay roll tax, health insurance costs, Medicare/Medicaid, etc. for employees billed to this grant under the "salaries" category. If the applicant has expenses in this category they should explain how they were calculated in the Budget Narrative. This is often calculated at a percentage of salary. Example, \$50,000 x .25% fringe = \$12,500
- **Travel:** This category includes travel expenses necessary to complete the grant project.
- **Supplies:** This category includes supplies needed specifically for the grant project. It cannot include existing program expenses.
- **Contracted:** This category includes expenses for individuals or organizations the applicant contracts with to complete the project, including facilitators and trainers.
- **Equipment/Capital:** This category includes funding used to purchase equipment or to make capital improvements necessary to complete the grant project. Equipment has a value of \$5,000 or over. Items below \$5,000 are considered supplies.
- **Other expenses:** Use the "other" categories to enter expenses that do not fit in the rest of the budget categories, for examples stipends intended for community members attending planning meetings.
- **Indirect:** An indirect cost rate is a percentage used to distribute indirect costs to all of an organization's programs that benefit from them. Grantees cannot claim indirect costs in excess of the indirect cost rate that applies to their organization. Grantees must submit and retain on-file, the corresponding documentation of that indirect cost rate as outlined below:

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1. Grantees with a federally negotiated indirect cost rate can use grant funds for indirect costs in an amount up to but not exceeding that rate. Grantees must submit proof of the federally negotiated indirect cost rate as an attachment to this application. Grantees are responsible for ensuring that the rate is not applied to direct costs that are excluded from the indirect rate.
2. Grantees without a federally negotiated indirect cost rate can use grant funds for indirect costs in an amount up to but not exceeding 10% of total direct costs.

Grant Budget Line-Item Request

Grantees may choose to use the [Budget Worksheet Form](#) to calculate budget cost before entering them in the application portal.

RFP Part 4: Attachments

- [Attachment A: Application Evaluation Criteria](#)
- [Attachment B: Governance Board Resolution Form](#)
- [Attachment C: Conflict of Interest Form](#)
- [Attachment D: Due Diligence Form](#)

Attachment A: Application Evaluation Criteria

A numerical scoring system will be used to evaluate eligible applications. Scores will be used to develop final recommendations. Applicants are encouraged to score their own application using the evaluation score-sheet before submitting their application. This step is not required but may help ensure applications address the criteria evaluators will use to score applications.

PROJECT NARRATIVE

Evaluation Criteria	Score	Comments: Strengths/Weaknesses
Organization demonstrates capacity to fully accomplish this project.	/5	
The service area and target population are described, including the percentage of patients that are covered by Minnesota Health Care Programs, Medicare and utilizing sliding fee.	/5	
A clear and concise problem statement is included. It should be a patient-focused problem that directly relates to the proposed project.	/5	
A clear description of the grant project is provided, including an overview of what will be done and how it will be done.	/5	
Population and/or patient data is provided and it supports the need for the project. Data should be related to the problem statement.	/5	
Applicant describes how many patients will be impacted by the project and demonstrates how the project increases access to primary care, mental health, and/or oral health services for rural, low income, and underserved populations.	/10	
Project outcomes have measurable outcomes with an expected patient benefit and a baseline percentage number identified.	/10	
The applicant describes how the project will reduce health disparities and improve health equity.	/10	
There is evidence of collaboration with other eligible community clinics, hospitals, health care providers, or community organizations and/or letters of support are attached. Letters of support are not required but are strongly encouraged.	/5	
Total points for this section	/60	

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PROJECT WORK PLAN

Evaluation Criteria	Score	Comments: Strengths/Weaknesses
The work plan details the proposed project and includes activities that clearly intend to address the problem statement.	/20	
Total points for this section	/20	

BUDGET AND BUDGET NARRATIVE

Evaluation Criteria	Score	Comments: Strengths/Weaknesses
The budget and budget justification are provided and accurate. The line items should total correctly and match the budget narrative.	/5	
The budget narrative includes detail on each cost item for which grant funds are being requested and are in the format explained in the guidance.	/10	
The budget relates to the proposed project and project goals and outcomes. For example, if the project only describes replacing equipment, the budget should show equipment costs but not necessarily salaries or rent. However, if the project is broadly providing services, the budget may be inclusive of general operations.	/5	
Total points for this section	/20	
Total Score	/100	

Oral Health Funding Priorities

Evaluation Criteria	Score	Comments: Strengths/Weaknesses
For oral health projects only: Does the project use collaborative practice dental hygienists to provide services in community locations? (If yes, score 5 points, if no, score zero points.)	/5	
Total points for this section	/5	
Total Score	/105	

Attachment B: Governance Board Resolution Form

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Board Resolution

Be it resolved that:

- 1) _____ (*Applicant Organization*) may apply for a Community Clinic grant from the Office of Rural Health and Primary Care of the Minnesota Department of Health.
- 2) _____ (*Applicant Organization*) certifies that it will comply with the requirements of the Community Clinic Grant Program, including the requirements in Minnesota Statutes, Section 145.9268.
- 3) _____ (*Applicant Organization*) may enter into a grant agreement with the State of Minnesota if the application is successful.
- 4) _____ (*Name and Title of Authorized Official*) is hereby authorized to execute contracts and certifications as required to implement the organization's participation in the Minnesota Community Clinic Grant Program.

I certify that the above resolution was adopted by the: _____ (*Governing Body*)

Of _____ (*Applicant Organization*) on _____ (*date*).

SIGNED:

WITNESSED:

(*Signature*)

(*Signature*)

(*Printed Name and Title*)

(*Printed Name and Title*)

(*Date*)

(*Date*)

Attachment C: Conflict of Interest Form

Applicants will complete this form in the online application.

(This form is considered public data under [Minn. Stat. § 13.599](#))

The purpose of this form is to provide grant applicants a mechanism to disclose any actual, perceived or potential individual or organizational conflicts of interest that exist, as required by [Minn. Stat. § 16B.98, subd 2-3](#); Minnesota Office of Grants Management (OGM) [Policy 08-01, “Conflict of Interest Policy for State Grant-Making”](#); and federal regulation [2 Code of Federal Regulation \(CFR\) § 200.112, “Conflict of Interest.”](#) It is helpful if the applicant explains the reason for the conflict, but it is not required.

A disclosure will not automatically result in removal of the applicant, or grant application, from the review process.

Instructions

Read the descriptions below, mark the appropriate box(es) that pertain to you and your organization as it relates to this specific Request for Proposal (RFP), obtain applicant signature (applicant to determine appropriate signer).

Conflicts of Interest

Conflicts of interest may be actual, potential, or perceived. An actual conflict of interest occurs when a person uses or attempts to use their official position to secure benefits, privileges, exemptions or advantages for self, relatives, or organization with which the person is associated which are different from those available to the general public ([Minn. Stat. § 43A.38, subd. 5](#)). A potential conflict of interest may exist if an applicant has relationships, affiliations, or other interests that could create an inappropriate influence if the person is called on to make a decision or recommendation that would affect one or more of those relationships, affiliations, or interests. A perceived conflict of interest is any situation in which a reasonable person would conclude that conflicting duties or loyalties exists. A conflict of interest may exist even if no unethical, improper or illegal act results from it.

The Minnesota Department of Health (MDH) recognizes that applicants must maintain relationships with other public and private sector entities in order to continue as a viable organization. MDH will take this into account as it evaluates the appropriateness of proposed measures to mitigate actual, potential, and perceived conflicts of interest. It is not MDH’s intent to disqualify applicants based merely on the existence of a relationships with another entity, but rather only when such relationships cause a conflict that cannot be mitigated. Nevertheless, MDH and its partners must follow federal regulation and statutory guidance on conflicts of interest.

I. Organizational Conflict of Interest:

An [organizational conflict](#) of interest exists when, because of other activities or relationships with other persons, a person is unable or potentially unable to render impartial assistance or advice, or a person’s objectivity in performing the grant work is or might be otherwise impaired, or a person has an unfair competitive advantage.

An example of organizational conflict of interest includes, but is not limited to:

- Unequal Access to Information. Access to information that is classified as nonpublic data or is otherwise unavailable to the public could provide a vendor a competitive advantage in a later competition for another grant. For example, a nonprofit entity, in the course of conducting grant work for the State, may be given access to information that is not available to the public such as government plans, opinions, interpretations or positions. This nonprofit entity cannot use this information to its advantage in securing a subsequent grant, and measures must be put into place to assure this. Such an advantage could be perceived as unfair by a competing vendor who is not given similar access to the relevant information.

II. Individual Conflict of Interest:

An **individual conflict** of interest occurs when any of the following conditions is present:

- a. An applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH's time, services, facilities, equipment, supplies, prestige, or influence.
- b. An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this RFP/project.
- c. An applicant, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant organization.
- d. An applicant, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

Examples of individual conflict of interest include, but are not limited to:

- An individual owns Entity C and also sits on the board of Entity D, and both entities are applying to the same RFP.
- An employee or volunteer of the applicant has previously worked with MDH to create the "ground rules" for this solicitation by performing work such as, but not limited to: writing this RFP, preparing evaluation criteria, or evaluation guides for this RFP.
- An employee or volunteer of the applicant is compensated for serving on the board of a non-profit that may benefit from this work.

Instances in which an individual or applicant worked in a volunteer capacity with MDH should be evaluated on a case-by-case basis. Volunteer status has the potential to, but does not necessarily create a conflict of interest, depending on the nature of the relationship between the two parties. Volunteer is defined as "[a]n individual who performs hours of service for a public agency for civic, charitable, or humanitarian reasons, without promise, expectation or receipt of compensation for services rendered, is considered to be a volunteer during such hours" ([29 CFR § 553.101\(a\)](#)).

Certification and signature required on next page.

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III. Certification:

Applicant Name:	
RFP Title:	
MDH Grant Program Name: <i>(Ex. Family Planning Grant)</i>	

By signing in the space provided below, Applicant certifies the following:

A. To the best of Applicant’s knowledge and belief, and except as otherwise disclosed, there are no relevant facts or circumstances that could give rise to individual or organizational conflicts of interest.

B. Applicant, or employees of applicant, have an actual, potential, or perceived conflict(s) of interest which are listed below.

To the best of your knowledge, write the names of entities/individuals with which you have an actual, potential, or perceived conflict:

<i>Name of entity/individual</i>	<i>Relationship (e.g., Volunteer, Employee, Contractor, Family Relation)</i>	<i>Description of conflict (optional)</i>

C. If a conflict of interest is discovered at any time after submission of this form, Applicant will immediately provide full disclosure in writing to MDH. If a conflict of interest is determined to exist, MDH may, at its discretion, take action.

D. Applicant will obtain, and keep record of, conflict of interest disclosure forms from any subgrantees or subcontractors and keep them on file.

Applicant’s Signature

Printed Name	Title
Signature	Date

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MDH Program Use Only

This section to be completed by appropriate Grant Program Staff.

- Applicant has no conflict(s) of interest.
- Applicant has disclosed conflict(s) of interest and appropriate MDH Program staff have reviewed the conflict(s) in accordance with [ST510.01](#). MDH Program has determined the conflict(s) can be mitigated in the following way(s):

Describe how conflict(s) will be eliminated. Example: *Applicant's application will not be reviewed by External Partners with which they have a conflict.*

- Applicant has disclosed conflict(s) of interest and appropriate MDH Program staff have reviewed the conflict(s) in accordance with ST510.01. MDH Program has determined the conflict(s) cannot be mitigated. As such Applicant will not move forward in the RFP/grant process. MDH will communicate back to the Applicant and keep documentation of communication in RFP/grant files.

I certify that the conflict(s) has/have been discussed with this Applicant and the actions above have been taken.

MDH Program's Signature

Printed Name	Title
Signature	Date

Attachment D: Due Diligence Form

The Minnesota Department of Health (MDH) conducts pre-award assessments of all grant recipients prior to award of funds in accordance with federal, state and agency policies. **The Due Diligence Review is an important part of this assessment and is a required part of the application.**

You may find the form at: [Grant Resources - MN Dept. of Health \(state.mn.us\)](#).