

# Frequently Asked Questions: Flex quality improvement and population health

03/20/2024

**Q1: If we plan to submit for multiple strategy areas, should we complete separate entries into the proposal portal for each strategy area, or should they be combined into a single submission? If a single submission, do you want the budget information separated by strategy area?**

A1: There should be a single submission per organization that includes all strategies that apply. Budget items should be laid out according to the line items available in the application form: salary, fringe, travel, etc. The budget narrative describes the staffing model for the proposal and all strategies.

**Q2: There is no “Collaborate” button on the Minnesota Rural Hospital Flexibility Program Quality and Population Health application. When I click “Apply”, I only see “Public Profile” at the top but no “Collaborate” option. How can I add collaborators to the application so we can all work off the same application?**

A2: The collaboration button feature is not available until the application has been created. Once there is a draft of the application, the applicant can add other individuals from the organization as collaborators. More information about these instructions can be found in the [Grantee Guide](#).

**Q3: Can you clarify if applications should include a timeline and workplan, as an attachment to the application, or if you are only looking for that information to be entered into the portal? If the workplan is not an attachment, can you provide guidance on inclusion of more than five activities (the portal appears to be limited to five activities)?**

A3: The required workplan is in the section of the Application form in the Grant Portal called “workplan”. Under required attachments there is space to upload additional supplemental material. You can choose to upload a document with more activities here if you need extra space. There will be no competitive advantage for listing more than 5 activities. You can review the scoring criteria for the methods and workplan in Attachment B.

#### **Q4: Should the budget and budget narrative reflect the Year 1 workplan only (vs. any proposed multi-year activities)?**

A4: The budget and budget narrative should be for the first year of your proposed project. For projects that last longer than a year, the estimated annual budget for years 2-5 will be based on the year 1 awards. This information is summarized in the RFP under section 1.3. The grant agreement will follow a multi-year agreement structure. Applicants with projects that last more than a year will be asked to resubmit an updated budget annually. For multi-year activities you can indicate in the timeline of the workplan and/or also in the methods section if an activity is proposed to last more than a year, or if that activity will be repeated annually.

#### **Q5: Are spaces counted as a "character"?**

A5: The character limit includes spaces.

#### **Q6: Where is the link to the updated due diligence review form?**

A6: Updated [Due Diligence Review](https://www.health.state.mn.us/about/grants/duediligence.pdf) (<https://www.health.state.mn.us/about/grants/duediligence.pdf>) is posted on the [MDH Grant Resources web page](https://www.health.state.mn.us/about/grants/resources.html) (<https://www.health.state.mn.us/about/grants/resources.html>).

#### **Q7: We are seeking clarification regarding what is considered a potential or perceived organizational conflict of interest. The top of page 26 in the RFP includes a section that outlines 'unequal access to information' as an example of organization conflict of interest or potential unfair competitive advantage. As an incumbent supporting Flex work, we have access to current Flex data. Should access to that information be listed on the form as a potential perceived conflict of interest?**

A7: Yes, this is an example of something that could be a potential or perceived conflict of interest. Noting this on the COI form does not exclude your organization from receiving future Flex grant dollars.

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*To obtain this information in a different format, call: 651-201-3528*