



FY2025 International Medical Graduate (IMG) Primary Care Residency Grant Program

GRANT REQUEST FOR PROPOSAL (RFP)

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07/22/2024

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RFP Part 1: Overview

1.1 General Information

- **Announcement Title:** FY25 IMG Primary Care Residency Grant Program
- **Minnesota Department of Health (MDH) Program Website:**
https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/index.html#imgpc_r
- **Application Deadline:** September 6, 2024

1.2 Program Description

Minnesota faces a shortage of primary care physicians, particularly in rural and underserved areas of the state. Physicians who received their medical training in other countries and have immigrated to Minnesota can help strengthen our primary care workforce and serve our diverse communities across the state. The Minnesota Legislature established programs to facilitate pathways to integrate these physicians into the Minnesota health care workforce.

Minnesota Statutes [Section 144.1911](#) authorizes MDH to award grants to support residency positions for Minnesota immigrant international medical graduates (IIMGs) who are willing to serve in rural or underserved areas of the state. A Minnesota IIMG is an immigrant who was born outside the U.S., received their medical degree outside the U.S. and Canada, arrived in the U.S. as an IMG, now resides permanently in the U.S. or has a temporary status based on urgent humanitarian or significant public benefit reasons, and has lived in Minnesota for at least two years.

The IMG Primary Care Residency Grant Program provides funding to accredited primary care residency programs in Minnesota to support the training of IIMG residents. IIMGs who accept a grant-funded residency position enter into an agreement with MDH to provide primary care for at least five years in a rural or underserved community in Minnesota after graduating from the residency program. IIMGs also make payments into a revolving account that contributes to sustaining MDH IMG assistance programs, including this residency grant program.

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.

FY25 IMG PRIMARY CARE RESIDENCY GRANT PROGRAM

Funding	Estimate
Estimated Amount to Grant	\$390,000
Estimated Number of Awards	1
Estimated Award Maximum	\$390,000
Estimated Award Minimum	N/A

Match Requirement

N/A

Project Dates

Application due to MDH: September 6, 2024
Grant distribution announcement: Late October 2024
Grant Agreements begin: March 1, 2025

1.4 Eligible Applicants

Eligible applicants fulfill all the following criteria:

- Residency program in one of the following primary care specialties:
 - Family medicine,
 - General internal medicine,
 - General pediatrics,
 - General surgery,
 - Obstetrics and gynecology, or
 - Psychiatry.
- Located in Minnesota and train medical residents in Minnesota.
- Demonstrate current accreditation by and compliance with the Institutional and Program Requirements for Graduate Medical Education in the specialties listed above of the Accreditation Council for Graduate Medical Education (ACGME).

Grant funds are not transferrable to any other entity. Applicants that are aware of any upcoming mergers, acquisitions, or any other changes in their organization or legal standing, must disclose this information to MDH in their application, or as soon as they are aware of it.

Collaboration

Collaboration between entities is welcome but not required.

1.5 Questions and Answers

All questions regarding this RFP must be submitted by email to Roble Aden at MN_health.IMG@state.mn.us. All answers will be posted within five business days at <https://www.health.state.mn.us/facilities/ruralhealth/funding/grants/index.html#imgpccr>.

Please submit questions no later than 4:30 p.m. Central Time on August 23, 2024.

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 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 IMG Primary Care Residency Grant program was enacted to facilitate pathways for Minnesota IIMGs to enter the primary care workforce and practice in rural and underserved areas of the state. This will increase access to primary care for communities experiencing physician shortages and health inequities.

The program will serve all Minnesotans in need of health care, especially in rural and underserved communities.

Grant outcomes will include:

- Greater opportunity for IIMGs to practice medicine in Minnesota.
- Expansion of Minnesota's primary care physician workforce.
- Enhanced access to culturally and linguistically responsive primary care for Minnesota's rural and underserved communities.

Other Competitive Priorities

Priority will be given to programs that:

- Use grant funds to create a new residency slot above their baseline number of residents.
- Demonstrate how the curriculum prepares physicians to address health inequities and work cross-culturally.
- Include training rotations in rural or underserved communities.

For the purposes of this grant program, "rural community" means a statutory and home rule charter city or township that is outside the seven-county metropolitan area as defined in section [473.121, subdivision 2](#), excluding the cities of Duluth, Mankato, Moorhead, Rochester, and St. Cloud.

For the purposes of this grant program, "underserved community" means a Minnesota area or population included in the list of designated primary medical care health professional shortage areas, medically underserved areas, or medically underserved populations maintained and updated by the U.S. Health Resources and Services

Administration (HRSA). To determine whether a proposed training site is in a designated shortage area, visit the HRSA website and use the search tools: [Find Shortage Areas \(hrsa.gov\)](#).

2.2 Eligible Projects

Grant funds may be used for:

- Salary and fringe for IIMG residents, as well as faculty and preceptors involved in training IIMG residents.
- Travel and lodging for IIMG residents.
- Training site equipment and supplies required for training IIMG residents.
- Other costs directly related to training IIMG residents.

Eligible IIMGs

Programs must use grant funds to train one or more eligible IIMGs. An eligible IIMG meets these criteria:

- A physician who received a basic medical degree or qualification from a medical school located outside the U.S. and Canada.
- Born outside the U.S.
- Entered the U.S. as an internationally trained physician.
- Now resides permanently in the U.S. or has a temporary status based on [urgent humanitarian or significant public benefit reasons](#).
- Did not enter the U.S. on a J1 visa or similar nonimmigrant visa following acceptance into a U.S. medical residency or fellowship program.
- Has lived in Minnesota for at least two years at the time the program starts.
- Has not been admitted to or completed a medical residency program in the U.S.
- Certified by the Educational Commission for Foreign Medical Graduates (ECFMG).
- Has passed United States Medical Licensing Exam (USMLE) Steps 1 and 2.
- Commits to providing primary care in a rural or underserved community of Minnesota for at least five years after graduating from the program.

IIMGs who are accepted into a grant-funded residency position must sign a service agreement with MDH before beginning the program. The service agreement documents their commitment to:

- Making annual payments for five years into the MDH IMG Assistance Programs account, beginning in their second year of post-residency employment. IIMGs pay \$15,000 per year or 10% of their annual compensation, whichever is less.
- Providing primary care in a rural or underserved community of Minnesota for at least five years after graduating from the program.

For the purposes of this grant program, “rural community” means a statutory and home rule charter city or township that is outside the seven-county metropolitan area as defined in

section [473.121, subdivision 2](#), excluding the cities of Duluth, Mankato, Moorhead, Rochester, and St. Cloud.

For the purposes of this grant program, “underserved community” means a Minnesota area or population included in the list of designated primary medical care health professional shortage areas, medically underserved areas, or medically underserved populations maintained and updated by the U.S. Health Resources and Services Administration (HRSA). To determine whether a proposed training site is in a designated shortage area, visit the HRSA website and use the search tools: [Find Shortage Areas \(hrsa.gov\)](#).

Prior to receiving grant payments, programs will be required to submit the following documentation to MDH:

- A copy of the signed contract between the residency program and the IIMG.
- A copy of the IIMG’s ECFMG certification.
- An attestation from the IIMG that they have lived in Minnesota for at least two years, as well as documentation provided by the IIMG to demonstrate two years of Minnesota residency. MDH will provide the program with a list of acceptable documentation.

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.
- Administrative or indirect costs not directly related to the IIMG residency positions.

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 at least annually until all grant funds have been expended and all the terms in the grant agreement have been met.

The reporting schedule will be quarterly.

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.

Technical Assistance

Consultation and guidance in completing the online application process is available upon request. MDH will provide forms and templates for invoices and progress reports. MDH is also available to provide technical assistance for grantees. It is the grantee's responsibility to meet all obligations in the contract, and to notify MDH and request approval for any changes to these obligations.

For assistance, contact Roble Aden at MN_health.IMG@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:

- Invoices should be submitted quarterly, 20 days after the end of the most recently completed fiscal quarter.
- Payments will be distributed quarterly, upon receipt of a progress report, an invoice, and an expenditure report. Reports will be assigned and completed in the online portal.

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 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://mnuvp.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 Minnesota: 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 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.

Non-Transferability

Grant funds are not transferrable to any other entity. Applicants that are aware of any upcoming mergers, acquisitions, or any other changes in their organization or legal standing, must disclose this information to MDH in their application, or as soon as they are aware of it.

2.5 Review and Selection Process

Review Process

Funding will be allocated through a competitive process with review by a committee representing content and community specialists. 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 review each applicant on a 100-point scale. A standardized scoring system will be used to determine the extent to which the applicant meets the evaluation criteria.

The evaluation criteria and point values are detailed in Part 4 of this RFP.

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 pre-award risk assessment prior to a grant award. Additional information may be required for proposed budgets of \$50,000 and higher to a potential applicant in order to comply with [Policy on Pre-Award Risk Assessment for Potential Grantees](#).

Notification

MDH anticipates notifying all applicants via email of funding decisions in late October 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 Friday, September 6, 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.

Acknowledgement of application receipt. The [Online Grants Portal](#) will send an automated email to the user who submitted the application to confirm the submission of your application. Additionally, the application status will change from "Draft" to "Submitted" on the Applicant Dashboard and record the date the application was submitted. If the application is still in draft status by the application deadline, you will no longer be able to edit or submit the application.

If you do not receive an automated email confirming submission, or encounter any other issues with the online application, please contact Roble Aden promptly at MN_health.IMG@state.mn.us. We encourage you to submit in advance of the deadline to allow time to address any technical issues.

3.2 Application Submission Instructions

ORHPC requires application submissions to be made through an online [Grants Portal](#). Please reference the ORHPC [Grantee Guide](#) for information on account creation, password recovery, application creation, and collaboration.

Read RFP Part 4: Application Guidance within this RFP document for instructions on how to address the application questions in the Grants Portal.

If you have any questions, please contact Roble Aden at MN_health.IMG@state.mn.us.

3.3 Application Instructions

You must complete all required fields in the online application form and submit all required attachments for your application to be considered complete.

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 neither 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

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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.

RFP Part 4: Application Guidance

Section 1. Organization and Applicant Information

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

Section 2. Project Information

Contact Overview

This section requests contact information for the organization, including the Authorized Organization Representative (AOR). This person is often the CEO of the organization and must have the authority to enter a contract with the State. An additional program contact is also advised.

Section 3. Organization Background and Capacity

Program Overview

Provide a brief summary of your program, including its history, location, staff and faculty, administrative structure, and organizational partnerships.

Primary Care Field

Indicate the primary care field in which your residency program provides training: Family medicine, General internal medicine, General pediatrics, General surgery, Obstetrics and Gynecology, or Psychiatry.

Need for Physicians in Field

Briefly summarize data showing the need and demand for physicians in this primary care field in Minnesota, particularly in rural and underserved communities.

Experience Training IMGs

Describe your program's experience training residents who are IMGs. How have you supported IMG residents' success in your program? How will you support the success of a grant-funded IMG resident?

Section 4. Project Narrative

New or Existing Residency Position

Indicate whether you will use grant funds to create a new residency position above the baseline number of residents in your program.

Baseline Number of Residents

Indicate the baseline (current) number of residents in the eligible specialty.

Provide the numbers of residents and graduates over the previous five years, or maximum years available if fewer than five years. Explain any recent reductions or increases in the number of residents.

Length of Training

Indicate the length of your residency training program: two, three, or four years.

Training Locations

Provide the geographic location of each clinical training rotation site. Indicate whether each site is in a rural or underserved community (see RFP section 2.1). To determine whether a proposed training site is in a designated shortage area, visit the HRSA website and use the search tools: [Find Shortage Areas \(hrsa.gov\)](https://www.hrsa.gov/shortage).

Primary Care Team Model

Briefly describe how residents work and learn as part of a primary care team.

Health Equity and Cross-cultural Training

Briefly describe how the curriculum prepares physicians to address health inequities and work cross-culturally.

Placement of Graduates

Provide data on where graduates of your residency program are employed, specifically the number and percentage working in rural Minnesota communities and the number and percentage working in underserved Minnesota communities.

Recruitment

Describe recruitment and selection efforts, including recruitment and selection of IIMGs and resident match outcomes from recent years.

Program Sustainability

Describe your program's plans for sustainability and maintaining the same number of residency positions after this grant funding ends.

Section 5: Budget & Budget Narrative

Provide a detailed justification for each of the estimated expenses to successfully meet the goals of the proposed project.

Budget Line Items

Provide the amount of grant funds requested, as well as the amounts and sources of other funding, in the appropriate fields for each budget area.

Budget categories:

- **Salaries:** Salaries should include the costs of personnel, such as residents and faculty, who work directly for the applicant and are paid a salary or wage directly from the applicant organization. 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 payroll tax, health insurance costs, Medicare/Medicaid, etc. for employees billed to this grant under the Salaries category. In the Budget Narrative, explain how fringe expenses were calculated. Fringe is often calculated at a percentage of salary. Example: \$50,000 x 25% fringe = \$12,500
- **Travel:** Describe any proposed travel and/or lodging for IIMG residents as it relates to the direct operation of the program. Allowed and approved travel expenses will be reimbursed in no greater amount than as provided in the current Minnesota Management and Budget [Commissioner's Plan](#) or at the grantee's established rate, whichever is lower, at the time travel occurred.
- **Supplies:** Include supplies required for training IIMG residents.
- **Contracted Services:** Include any contracted services, such as costs associated with training sites for IIMG residents, on this line.
- **Equipment and Capital Improvements:** Include any equipment or training site improvement costs required for training IIMG residents. Equipment has a value of \$5,000 or more. Items below \$5,000 are considered supplies.
- **Other expenses:** Whenever possible, include proposed expenditures in the categories listed above. If it is necessary to include expenditures in this general category, include a detailed description of the activities as they relate directly to training IIMG residents. Note that indirect expenses are not allowed.

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

Section 6: Required Attachments

Audited Financial Statements

Please upload a copy of the most recent independent audit into the online application. If the audit encompasses multiple entities within a system or umbrella organization, please provide additional financial information, such as an income statement, specific to the applicant entity.

Due Diligence

Please complete the [Due Diligence Form](#) and attach to the online application form.

Proof of Accreditation

Provide documentation of current accreditation by ACGME or another national body that accredits residency programs, or a detailed, credible plan to obtain accreditation.

Section 7: Applicant Conflict of Interest Disclosure

Applicants will complete a Conflict of Interest Disclosure form in the online application. See a copy of the form on the [MDH Grant Resources webpage](#).

RFP Part 5: Attachments

- Attachment A: Application Evaluation Criteria

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.

The review committee will review each applicant on a 100-point scale as follows:

ORGANIZATION BACKGROUND AND CAPACITY

Evaluation Criteria	Score	Reviewer Comments: Strengths/Weaknesses
Program overview provides a clear picture of the program.	/5	
Data show a strong need for physicians in this field in MN, particularly in rural and underserved communities.	/5	
Program has strong experience training IMG residents.	/5	
Program describes effective supports and strategies for ensuring the success of IMG residents.	/5	
Total points for this section	/20	

PROJECT NARRATIVE AND WORK PLAN

Evaluation Criteria	Score	Comments: Strengths/Weaknesses
Program will use grant funds to create a new residency position.	/5	
Program has had a relatively stable number of residents over the past five years or has grown in a sustainable way.	/5	
Clinical training rotation sites are located in rural or underserved communities: all or nearly all (20 points), more than half (10 points), fewer than half (5 points), or none (0 points).	/20	
Program incorporates a strong model of team-based primary care.	/5	

FY25 IMG PRIMARY CARE RESIDENCY GRANT PROGRAM

Curriculum has a strong focus on preparing physicians to address health inequities and work cross-culturally.	/5	
Program graduates are currently working in rural and underserved Minnesota communities: all or nearly all (20 points), more than half (10 points), fewer than half (5 points), none (0 points).	/20	
Applicant describes effective recruitment and selection efforts and successful match outcomes.	/5	
Applicant describes a sound plan for sustaining their residency positions beyond the grant period.	/5	
Total points for this section	/70	

BUDGET NARRATIVE

Evaluation Criteria	Score	Comments: Strengths/Weaknesses
Proposed costs in the budget are clear, with enough detail to understand why they are included.	/5	
Proposed expenses seem reasonable and align with the goals and requirements of this program.	/5	
Total points for this section	/10	
Total Score	/100	