STATE OF MARYLAND
Community Health Resources Commission
45 Calvert Street, Room 336 • Annapolis, Maryland 21401

Larry Hogan, Governor – Boyd Rutherford, Lt. Governor
Elizabeth Chung, Chair – Mark Luckner, Executive Director

Maryland Community Health Resources Commission
FY 2021 Call for Proposals, Frequently Asked Questions

1. **Is there a limit to the number of applications that can be submitted by a single entity?**

   No, there is no limit to the number of applications submitted by a single entity; however, applicants should be very clear about the differences between each proposal that is submitted.

2. **Does it matter if an applicant is a current and/or former grantee? Does that weigh in their favor?**

   Former/current grantees of the CHRC are welcome to submit proposals this year but are not provided special consideration in this Call for Proposals. Applicants should be aware that past/current performance as a grantee with the Commission will be taken into consideration when applications are reviewed.

3. **Are current grantees eligible to submit new grant applications?**

   Yes, current grantees are welcome to apply for another grant if their current project is under implementation and meeting metric reporting requirements. However, applicants are advised that the proposal must be wholly separate and distinct from the current grant under implementation. Applicants should be aware that past/current performance as a grantee with the Commission will be taken into consideration when applications are reviewed.

4. **May out-of-state entities submit grant applications?**

   Out-of-state applicants are permitted to submit grant applications if the entity provides services primarily to Maryland residents from service sites located within the State, and meets all of the eligibility requirements as a community health resource.

5. **If an applicant does not currently provide primary health care services on a sliding scale fee or refer to reduced price clinical health services, but could provide either service by virtue of a grant, is the applicant eligible to apply as a community health resource?**

   No. An applicant must currently provide primary health care services on a sliding fee scale or refer to reduced price clinical health services to qualify as a community health resource. Applicants cannot become community health resources by receiving a grant; they must meet the eligibility criteria before receiving a grant from the CHRC.

6. **If an applicant provides access services, specifically transportation services, via a sliding scale fee schedule that directly assists low-income, uninsured, or underinsured**

individuals to gain access to reduced-price clinical health care services, does the applicant qualify as an Access Services community health resource?

Yes. If an applicant provides transportation services to low-income, uninsured, or underinsured individuals via a sliding scale fee schedule that directly assist the individuals to gain access to reduced-price clinical health care services, the applicant qualifies as an Access Community Health Resource. The applicant must provide a copy of its sliding scale fee schedule for transportation services and a current MOU with, and the sliding scale fee schedule of, the entity providing the clinical health care services.

7. **Is the Commission willing to support projects submitted by hospitals as the lead applicant?**

Hospitals are considered a Primary Health Care Community Health Care Resource and may serve as the lead applicant, but the CHRC will require that hospitals submit their sliding fee schedule and policy regarding patients who are unable to pay for services. In addition, grant applications submitted by hospitals should clearly demonstrate that CHRC grant funding is the best source of funding for the project, and the envisioned project cannot be funded by other sources (i.e., funding made available by the HSCRC or the hospital community benefit dollars).

8. **Are hospitals required to submit a MOU, either to determine eligibility as a community resource or to provide hospital patients access to community based services through partner organizations?**

The current Call for Proposals promotes and emphasizes community-based public/private partnership approaches to achieve the strategic priorities of the CHRC. To this end, the lead applicants (which may include hospitals) for the proposed project are strongly encouraged to clearly detail the project activities and responsibilities assumed by each partner organization. Hospitals are not required to submit a MOU to establish eligibility as a community health resource. However, if the hospital as lead applicant submits a project proposal to deliver grant funded services through a community-based partnership or access services provider, the hospital will need to determine whether a Letter of Collaboraation or MOU is applicable to the relationship with these organizations.

9. **How would the Commission respond to two independent applications from sources offering complementary services in the same geographic area?**

Applicants offering complementary services in the same geographic area should consider a collaboration before submitting grant applications.

10. **Can programs be developed across multiple jurisdictions?**

Proposals that serve multiple jurisdictions will be favorably reviewed, but precision on-target population, and the goals and impact of project will be necessary. Applications should present a clear accountability plan that delineates the responsibilities of project partners and how grant funds will be utilized. To the extent that there is one lead applicant with multiple sub-partners, the proposal should provide a management plan that describes how the lead grantee will manage sub-grantees/contractors and which outcomes (specifically) will be impacted by the activities of the sub-contractors/partners.

11. How many program years can a grant submission cover? Is there a maximum number of program years which the Commission will support?

Applicants are permitted to submit proposals for one or two year grants.

12. Can programs be funded across multiple areas of focus? Can a single program address more than one area of focus (category)?

While it is understood that some proposals could be considered as addressing elements across the three areas of focus, applicants are strongly encouraged to select just one area of focus category. The Letter of Intent and full grant application should select and clearly state **one** specific area of focus category. The CHRC does not recommend addressing more than one area of focus per grant application.

If more than one area of focus is being considered, a separate LOI and full grant application must be submitted and each project proposal should clearly differentiate between the areas of focus selected.

13. Should individual projects address both strategic priorities, or may they address only one?

Applicants are strongly encouraged to address both strategic priorities in grant proposals. These priorities will apply to all proposals that are submitted, irrespective of the area of focus of the project proposal.

14. How many grants will be awarded, and how does this relate to funding for FY 2021 and FY 2022?

The CHRC has a potential total of $2.7 million to award in new grant funding in FY 2021. The CHRC will support one and two-year projects. Grant awards made in this year's Call for Proposals may include funding from multiple fiscal years, similar to previous Calls for Proposals.

15. If a grant is awarded for two years, is it necessary to re-apply for funding in the second year of the grant?

For projects that are funded across multiple fiscal years, the grantee does not need to re-apply during the project period. However, the program needs to demonstrate performance and progress toward meeting the overall goals of the grant, as reflected in regular grantee program reports that are submitted and reviewed by the CHRC. Grantees that do not comply with these requirements (e.g., not submitting complete reports when due) or do not meet program performance goals may be subject to the withholding of grant funds during the grant period, and may be subject to discontinuation or termination of the grant.

16. Since the ranges listed are for "Year 1," how does that affect a proposed two-year project?

Applicants are able to submit one or two year budget proposals, and the amounts for each area of focus category should be considered guidelines and represent the likely overall amount that will be awarded in each area of focus category this year.

17. Does the full Year One budget need to be expended before the end of FY 2021 (i.e., June 30, 2021)?

No. The Commission's funds are special funds and do not need to be expended before the end of the fiscal year (June 30, 2021).

18. How will procurement roll out? Once the funds are awarded and start dates are determined, how much lead-time will be required?

Once the CHRC makes its grant awards at the February/March 2021 Commission meeting, grantees are notified that they need to: (1) sign the grant agreement; (2) review and approve performance metrics and grant reporting schedule; (3) provide an updated line item budget for the grant award amount; and (4) submit the first invoice for payment which typically reflects 50% of the Year One award. Grantees are expected to launch program implementation within the first 60-90 days of the grant award.

19. If the lead organization does not provide direct services but is partnering with a community health resource, does that satisfy the CHR requirement?

No. The lead applicant (future/potential grantee) must meet all of the requirements to be a community health resource.

20. If a hospital opens an outpatient clinic or provides primary health care services in the community on a sliding scale fee schedule, will they qualify as a community health resource?

Yes. Applicants, especially hospitals, are strongly encouraged to clarify how requested CHRC funds are separate and distinct from grant funds that have been made available by the HSCRC, and the proposal should comment on why the requested use of limited CHRC grant funds cannot be supported with existing hospital community benefit resources or other funding opportunities available from the State or HSCRC. Also, when grant requests are submitted to the CHRC, hospital applicants are encouraged to partner with existing community based providers or resources that are already serving the community or target population.

21. What documentation fulfills the requirement for proof that an organization is a community health resource? When should this information be submitted?

When submitting the Letter of Intent, applicants must demonstrate that they are either: (a) a designated community health resource; (b) a primary health care services community health resource; or (c) an access services community health resource. Organizations seeking to validate this designation must confirm that services are provided on a sliding scale fee schedule or at no charge to the client. Acceptable documentation includes the organization's sliding scale fee schedule.

To confirm that an entity is an access services community health resource, the applicant must submit a current MOU with an agency to which the applicant refers individuals or a letter from the agency documenting the formal referral relationship.

Outpatient mental health clinics should include a copy of the current MDH BHA license.

This information should be submitted with the Letter of Intent, which is due **November 18, 2020, at 12:00 noon**. If not included with the Letter of Intent, CHRC staff will request additional materials to certify the applicant's eligibility as a community health resource.

22. Are Letters of Intent (LOIs) mandatory?

Yes, LOIs are mandatory and are due on Wednesday, **November 18, 2020, at 12:00 noon**. Only the official CHRC LOI template, completed according to the instruction provided below will be considered.

The LOI template and instructions can be found at:

https://health.maryland.gov/mchrc/Pages/home.aspx

23. Is the requirement to submit a financial audit mandatory?

Yes, submission of the most current financial audit is mandatory. The Commission uses the financial information of the applicants to evaluate the long-term financial solvency of its potential grantees and to ensure that limited public grant funding is invested in financially sustainable organizations. If the audit is determined by an independent reviewing agency to be "aged," the Commission will contact applicant to request an updated financial audit. If the applicant does not have a current financial audit available, the Commission will also accept other financial information such as tax returns or a profit and loss statement. However, submission of tax returns or a profit and loss statement in lieu of a formal, independent financial audit will result in the applicant being flagged as high risk.

24. Are local health departments required to submit the financial audit?

No, this requirement does not apply to local health departments.

25. Can funds be used for delivery of direct services?

Yes, grant funds can be used for direct services.

26. Are grant funds able to support the costs of addressing social determinants of health (e.g., transportation)?

Yes, the CHRC is looking to support programs that address the social determinants of health, but the proposal should be very clear how the use of grant funds will expand health care access and (similar to other/any proposals) be very specific in terms of health outcomes that will be improved/impacted by virtue of addressing social determinants of health. The Commission will prioritize proposals which utilize a holistic approach and implement evidence-based interventions such as community health workers, patient navigators, multisectoral partnerships, and community-based participatory approaches. Interventions that propose collaborations with multiple entities and community-based partnerships that create social, political, or economic support systems to address the social determinants of health for a specific population are strongly encouraged.

27. Will the Commission consider program proposals that address the needs of the geriatric population?

Yes. As with any application the proposal should address the two strategic priorities of this year's RFP. Seniors are specified as a vulnerable population under this year's RFP.

28. What are the characteristics of a sustainability plan?

The CHRC is looking to support programs that will be sustainable after initial grant funds have been utilized. Proposals that present a strong sustainability plan will receive added consideration. Examples of sustainability plans include, but are not limited to: (1) commitment by a hospital partner or private foundations to provide post-award funding; (2) development of the ability to bill third-party payers for services provided; and/or (3) development of the ability to sustain employment of staff members hired for the program.

29. Is the budget a scored criteria in review of the applications?

Review of the grant application begins with an assessment of the project and proposed intervention strategy(ies). The budget request is then assessed to determine whether the budget is commensurate with the program or strategy proposed. The Commission may suggest reduced budgets due to budget constraints.

30. Is a specific amount or percentage of matching funding required?

There is no specific amount or percentage of matching funding required, but applications with matching funding will be well received by the CHRC.

31. What does the Commission consider to be "major equipment" or "small equipment and furniture costs" when developing a budget that includes purchase of equipment?

Any purchase that can be depreciated (i.e., such as a van, renovations in excess of $5,000, or large dental chairs) would be considered major equipment. Examples of small equipment and furniture costs would be a fax machine, small computer equipment/items, or chairs for a waiting area if less than $5,000.

32. In light of SB 1045, which requires the State to honor certain rates for indirect costs on certain State-funded grants and contracts with nonprofit organizations, will the Commission accept rates for indirect costs that exceed 10%?

Yes, in limited circumstances. In accordance with SB 1045, now codified at Md. Code Ann., State Finance and Procurement § 2-208, the CHRC will allow for reimbursement of indirect costs to nonprofit organizations in an amount equal to the rate the nonprofit organization has negotiated and received for indirect costs under a direct federal award, or from a nonfederal entity based on the cost principles in Subpart E of OMB Uniform Guidance.

33. What are permissible expenses incurred as part of indirect costs?

Indirect costs include items that are associated with running the organization as a whole and benefit more than one project/program. Allowable indirect costs include items such as administrative staff salaries, rent, utilities, office supplies, insurance, etc. No more than 10% of the total budget can be requested for indirect costs, apart from the circumstances specified in Question 33.

34. What is not allowable under indirect costs?

Noncash transactions such as depreciation are not allowable indirect costs.

35. Payroll fringe costs are limited to 25%. Will fringe costs exceeding 25% be considered?

The Commission advises that the fringe rate be calculated at no more than 25%. If the grantee requests more than 25%, the applicant will be required to provide a compelling

rationale for exceeding this amount. The Commission is willing to consider fringe requests above 25% on a case-by-case basis.

36. What actions can be taken if there is an error in the Year 1 and/or Total Budget stated in the Letter of Intent?

Applicants are encouraged to confirm the budget request **before** submitting the Letter of Intent; however, if an error is discovered after LOI submission, the Commission can be notified about the corrected budget request via email.

37. Are the Grant Application Cover Sheet and Contractual Obligations forms available as a template?

Templates for the Grant Application Cover Sheet and the Contractual Obligations are available on the CHRC website at:

https://health.maryland.gov/mchrc/Pages/home.aspx

38. What is the overall page limit for the proposals?

Applicants are advised to limit their project proposals to **15 pages** in length.

39. Is there a preferred database to be used in discussing the metrics?

Acceptable databases for reporting metrics include the State Health Improvement Process (SHIP) metrics, hospital data sets from Chesapeake Regional Information System for our Patients (CRISP) or individual hospitals and/or HEDIS benchmarks. The Commission is seeking a level of specificity in the design and collection of the metrics, and proof that the grantee has the capacity to collect the relevant data sets and report progress (in terms of specific metrics, baselines, etc.) towards the goals of the proposal. Grantees should be very specific about how they will establish baseline data, and capture and analyze the data required for metric reporting to demonstrate the success and impact of project interventions.

40. Can grantees hire a third-party evaluation company/consultant to perform program evaluation?

Yes.

41. Is there an implicit expectation that grantees will publish the impact and/or outcome of their project in peer-reviewed journals?

No, but the Commission encourages grantees to disseminate their results to a wider audience. Programs that present sound evaluation plans, the capacity to collect data, and document project impact/ROI, etc. will be favorably reviewed.

44. Permissible grant expenses include:

    a) Salaries and employment benefits for project staff;
    b) Subcontracting and consultant fees;
    c) Data collection and analysis;
    d) Project-related travel, conference calls, and meetings;
    e) Office supplies, expenses, and other indirect costs as approved by the Commission; and
    f) A limited amount of essential equipment and minor infrastructure improvements required by the project.

Funds from operating grants awarded under this subtitle may not be used for:
    a) The purchase or lease of major equipment;
    b) Construction projects;
    c) Support of clinical trials;
    d) Medical devices or drugs that have not received approval from the appropriate federal agency; or
    e) Lobbying or political activity.

42. When completing the LOI item "organization name", if there are multiple organizations coordinating together on the proposed project, should we list all participating organizations or designate one organization as the project lead?

CHRC recommends selecting one organization or entity to apply as the lead applicant, and consult the eligibility criteria listed on pages listed on pages 8 and 9 in the Call for Proposals to confirm their eligibility as the lead organization. Other partners in the project could be described briefly in the LOI with a complete description in the full project proposal included in the full grant submission.

43. If an applicant meets the criteria as a designated or primary health care services community health resource, but the project proposal involves provision of grant services through a partner organization, is a MOU with the partner organization required with submission of the LOI?

No. Submission of an MOU with the LOI is only required for access services community resources applicants, as the MOU establishes that a formal agreement exists between the access services applicant and a designated or primary health care services community health resource to jointly provide grant funded services under a proposed project.

After LOI review, applicants deemed eligible by the CHRC will be invited to submit a full grant application. The project proposal will need to define clearly the role(s) and responsibilities of partner organizations in providing grant funded services. The scope and type of services, and the formal nature of the relationship between the applicant and partner organization(s) will determine whether a Letter of Collaboration or MOU (or other legal agreement) is appropriate. The CHRC advises that Letters of Collaboration are (when applicable to delivery of services) a mandatory appendix to the full grant application. The CHRC also understands that applicants may be reluctant to execute a

MOU (or other legal agreement) with partner organizations until the full grant application and budget are approved by the Commission. In this case, it is acceptable to submit MOUs after the full grant application and budget are approved.

44. Do current or past CHRC grantees need to go through the eligibility review process again for this Call for Proposals?

Yes, all applicants including current grantees will need to undergo an eligibility review for the current Call for Proposals by submitting an LOI and financial audit documentation.

45. How quickly will applicants be notified if they will be invited to submit a full grant application?

CHRC staff will notify all applicants of their eligibility to submit a full grant application within a few days of the LOI submission deadline. We anticipate all notifications will be completed prior to the Thanksgiving holiday.

46. Please clarify the process and requirements for submitting the LOI, financial audit, MOU and full grant application.

The LOI, financial audit and eligibility documentation need to be submitted electronically to mdh.chrc@maryland.gov, no later than **12:00 noon on November 18, 2020**. Paper copy versions of these documents are **not** required. The CHRC requests that the electronic file containing all financial audit and disclosure documentation be submitted in a separate file from the LOI and eligibility documentation (and MOU, if applicable).

For submission of the **full grant application**:

a) the full grant application and all appendices and attachments, must be submitted electronically no later than **12:00 noon on December 17, 2020**, to mdh.chrc@maryland.gov. CHRC requests that the Executive Summary and Project Proposal sections of the application be submitted in MS Word (Word 2010 or later preferred) **and** Adobe Acrobat .pdf formats.

b) **one hard copy original** of the entire full grant application, clip bound and stamped "ORIGINAL" on the face page must also be submitted. If the documents are submitted by USPS, the package must be post-marked no later than **December 18, 2020**. If UPS, FEDEX or other express delivery service is used, the shipping documentation must indicate that the "package" was picked up for delivery by the courier no later than COB on **December 18, 2020**.

c) all applicants will receive confirmation that their application has been received; likewise, applicants will be notified of any ommissions or other issues with the application.

47. Is there a maximum budget amount allowed per grant application?

The **total** amount of funding available for grant awards under this Call for Proposals is approximately $2.7 million. Further, the total amount available for grant awards under each Area of Focus will limited to approximately $1 million. Given the limited funding available, the CHRC anticipates a **highly** competitive award process this year. To achieve the most equitable distribution of funding across multiple grants, applicants are strongly encouraged to exercise frugality in the amount of their budget requests.

48. Is there a CHRC preference between one- or two-year projects under this Call for Proposals?

No. However, when selecting the length of the grant program, applicants should consider whether the selected timeframe offers sufficient opportunity to deliver the intended impact of the grant program, and also consider which timeframe offers the greatest opportunity to achieve program sustainability once the CHRC grant ends.